

Shalat as Islamic Psychotherapy in Addressing Anxiety Disorders Amid Trends in Alternative Therapy

Renaldi Saputra & Ayu Prihatni

Universitas Islam Negeri Syarif Hidayatullah Jakarta

Email: agusraharjo87@uin-malang.ac.id

Abstract

This article examines the effectiveness of *shalat* (Islamic prayer) as a therapeutic intervention in reducing anxiety among individuals with psychological disorders. The study uses a mixed-methods approach, combining quantitative surveys and qualitative interviews, with a research design that integrates numerical and narrative data analysis to provide a comprehensive overview of the impact of *shalat*. The findings indicate that *shalat* significantly reduces anxiety levels, with an average decrease of 25% among participants who regularly engage in the practice. Additionally, *shalat* enhances overall mental well-being, accelerates psychological recovery, and strengthens spiritual resilience. Factors such as the frequency of prayer, the quality of *khusyuk* (focused devotion), and a supportive environment are crucial to the therapy's effectiveness. The data show that participants who perform *shalat* with deep focus in a calm environment report more positive outcomes. These findings support the potential of *shalat* as a supplementary method in anxiety therapy, offering an integrative and spiritual alternative for mental health treatment.

Keywords: Islamic psychotherapy, anxiety disorders, alternative therapy

Abstrak

Artikel ini mengkaji efektivitas shalat sebagai terapi Islami dalam mengurangi kecemasan pada individu dengan gangguan psikis. Penelitian ini menggunakan metode campuran, menggabungkan survei kuantitatif dan wawancara kualitatif, dengan desain penelitian yang mengintegrasikan analisis data numerik dan naratif untuk memberikan gambaran komprehensif tentang dampak shalat. Hasil penelitian menunjukkan bahwa shalat secara signifikan mengurangi tingkat kecemasan, dengan penurunan

rata-rata sebesar 25% pada peserta yang menjalani terapi secara rutin. Selain itu, terapi shalat meningkatkan kesejahteraan mental secara keseluruhan, mempercepat pemulihan psikologis, dan memperkuat kekuatan spiritual. Faktor-faktor seperti frekuensi shalat, kualitas khusyuk, dan lingkungan yang mendukung terbukti memainkan peran penting dalam efektivitas terapi. Data menunjukkan bahwa peserta yang melaksanakan shalat dengan khusyuk di lingkungan tenang melaporkan hasil yang lebih positif. Temuan ini mendukung potensi shalat sebagai metode tambahan dalam terapi kecemasan, menawarkan alternatif yang integratif dan spiritual untuk perawatan gangguan mental.

Keywords: Psikoterapi Islami, Gangguan Kecemasan, Terapi Alternatif

Introduction

Anxiety disorders are a significant and increasingly prevalent global mental health issue, especially amid social pressures and uncertainties. According to Ghotbabadi and Alizadeh (2018), anxiety disorders often lead to a decrease in the quality of life and add to social and economic burdens. In this context, conventional therapy does not always provide adequate solutions for all individuals, particularly those seeking more holistic or spiritually-based approaches (Bakara, Ibrahim, & Sriati, 2017). Therefore, the study of *shalat* as Islamic therapy is academically and practically important to understand alternative treatments that can significantly reduce anxiety and improve mental well-being.

Previous research has discussed various therapeutic approaches to anxiety disorders, such as cognitive and behavioral therapy (Gaazor, 2021). Although psychological therapies have shown good results, studies on spiritual-based interventions like *shalat* remain limited (Zaini, 2016). Many prior studies have not explored the clinical aspects of spiritual practice and instead focus solely on the general effects of spirituality. Existing research has also not deeply evaluated the effectiveness of *shalat* as a form of Islamic psychotherapy in a clinical context (Wardani, Nashori, & Uyun, 2016). This indicates a gap in the literature, which underscores the importance of this study to evaluate the effects of *shalat* in reducing anxiety.

This research aims to address the gaps in previous literature by examining the effectiveness of *shalat* as Islamic therapy in reducing anxiety disorders (Zaini, 2016). Specifically, the study will investigate how practicing *shalat* with *khusyuk* (focused devotion) can impact the reduction of anxiety levels in individuals with psychological disorders. The study will evaluate the relationship between regular *shalat* practice and mental health quality, and clinically measure its impact through the reduction of anxiety symptoms (Nida, 2014). Thus, this study is expected to make a significant contribution in the context of Islamic psychotherapy and as an alternative treatment for anxiety disorders.

This research hypothesizes that *shalat* performed with *khusyuk* has a significant impact on reducing anxiety in individuals with psychological disorders (Ghasemi et al., 2022). *Shalat* as a form of Islamic meditation is predicted to improve mental well-being through inner peace and emotional balance (Askari, Mohammadi, & Radmehr, 2018). Therefore, this study will examine the relationship between the frequency and quality of *shalat* and the clinical reduction of anxiety to see if *shalat* can become an effective approach to more holistic anxiety therapy.

Literature Review

The literature on the relationship between *shalat* practices and mental health, particularly in the context of anxiety disorders, shows several diverse trends. First, many studies highlight a positive relationship between spiritual practices and mental well-being, with *shalat* considered a form of Islamic meditation that can reduce stress and anxiety (Zaini, 2016; Nida, 2014). Second, there is a tendency to view *shalat* as a potential therapeutic intervention, but most of these studies remain theoretical and lack empirical measurement (Askari, Mohammadi, & Radmehr, 2018). Third, some studies explore the relationship between the intensity of spirituality and the effectiveness of therapy, but this focus often neglects other variables, such as social support and psychological factors that influence therapeutic outcomes (Ghasemi et al., 2022). Fourth, empirical approaches to

measure the impact of *shalat* in the context of Islamic psychotherapy remain rare, indicating a research gap that requires further attention.

The first trend in the literature is research that focuses on the relationship between spiritual practice and mental well-being, with *shalat* often considered a central component of this approach. Studies such as those by Zaini (2016) and Nida (2014) emphasize that *shalat* can function as a form of meditation that helps calm the mind and reduce anxiety symptoms. These approaches are typically descriptive and theoretical, where researchers rely heavily on literature reviews and theoretical arguments to support their hypotheses. However, the main weakness of this approach is the lack of strong empirical data to support their claims. Often, these studies also tend to overlook other psychological and social variables that may affect the effectiveness of *shalat* as anxiety therapy, such as community support or involvement in other religious activities.

The second trend in the research involves empirical approaches that attempt to measure the effectiveness of *shalat* as therapy in reducing anxiety. These studies usually employ quantitative methods, such as surveys or experiments, to assess changes in anxiety levels before and after the *shalat* intervention (Gaazor, 2021). Some studies also use standard psychological measurements to assess the effects of *shalat*, such as anxiety or stress scales. Although this approach is stronger in terms of data validity, these studies often have limitations in research design, such as small sample sizes or the lack of adequate control groups. Furthermore, there are challenges in ensuring that the observed changes are genuinely caused by *shalat* and not by other external factors. Nevertheless, this approach provides important contributions to understanding the empirical effects of spiritual practices in the context of mental health.

The third trend emerging in the literature is research that combines qualitative and quantitative approaches to gain a more holistic view of the effects of *shalat* on mental health. Studies such as Ghasemi et al. (2022) attempt to understand the subjective experiences of individuals undergoing *shalat* therapy, while also measuring the objective effects of this practice. This approach often involves in-

depth interviews or focus group discussions (FGD) to explore individual experiences, followed by quantitative measurements of changes in anxiety levels. Although this approach is more comprehensive, the challenge lies in the complexity of data analysis and the difficulty of consistently integrating qualitative and quantitative findings. However, these studies provide deeper insights into how and why *shalat* may be effective in reducing anxiety, as well as other factors that may play a role.

Despite the valuable insights offered by various approaches in previous research, there are several significant shortcomings. First, many studies focus solely on the spiritual effects of *shalat* without integrating broader psychological approaches, such as the role of social support or prior mental conditions (Sedaghat Ghotbabadi & Alizadeh, 2018). Second, empirical studies are often limited in terms of sample size and study design, affecting the generalizability of results. Third, while qualitative approaches provide in-depth insights, they often face challenges regarding data validity and reliability. Consequently, existing literature still lacks a holistic and empirical view of the effectiveness of *shalat* as a form of Islamic psychotherapy, especially in the context of reducing anxiety disorders.

Based on the evaluation of previous literature gaps, this study will focus on integrating empirical and theoretical approaches to evaluate the effectiveness of *shalat* as Islamic psychotherapy in reducing anxiety. The study will adopt a mixed-methods approach, combining quantitative analysis to measure objective changes in anxiety levels and qualitative approaches to understand individuals' subjective experiences. In doing so, this research is expected to provide a more comprehensive and valid contribution to the existing literature, offering practical solutions for individuals seeking holistic approaches to managing anxiety disorders. This new focus will also consider contextual variables such as social support and community involvement, which were previously underexplored in prior studies.

Method

The focus of this research is on individuals experiencing anxiety disorders. This study specifically explores how the practice of *shalat* (Islamic prayer), as a form of Islamic therapy, can affect anxiety levels in these individuals. The unit of analysis consists of individuals who regularly practice *shalat*, either in personal or communal contexts. The research will evaluate changes in anxiety levels before and after the implementation of *shalat* therapy, with the goal of understanding the psychological and spiritual effects of this practice. This focus on individuals will help the research identify variations in experiences and outcomes, providing a more comprehensive understanding of the effectiveness of *shalat* in overcoming anxiety disorders.

This study employs a mixed-methods research design, combining both qualitative and quantitative methods. This approach was chosen to obtain a more holistic understanding of the effects of *shalat* on anxiety disorders. The quantitative method is used to measure objective changes in anxiety levels using standardized scales such as the Hamilton Anxiety Rating Scale (HAM-A). Meanwhile, the qualitative method is used to collect data on participants' subjective experiences of practicing *shalat*. In-depth interviews and qualitative observations will enable the researchers to further explore the feelings, perceptions, and spiritual impacts experienced by individuals during *shalat*. This design is expected to provide deeper and more comprehensive insights.

The primary data source in this research comes from respondents who suffer from anxiety disorders and have undergone *shalat* therapy. Quantitative data are collected through structured surveys and questionnaires completed by the participants before and after therapy. Additionally, in-depth interviews with selected informants will be conducted to gather qualitative data on participants' subjective experiences. Besides primary data collected from respondents, this research also utilizes secondary data from literature and previous studies on *shalat* as a psychological therapy. This data will be used to strengthen the theoretical framework and confirm the study's findings within a broader context.

Data collection techniques in this study include a combination of direct observation, surveys, and in-depth interviews. The data collection process begins with observing individuals during *shalat* to identify changes in behavior and anxiety levels that may occur. Subsequently, surveys using structured questionnaires will be conducted before and after the *shalat* therapy intervention to measure objective changes in anxiety levels. To explore the subjective and spiritual aspects, in-depth interviews with selected respondents will be conducted using semi-structured interview guidelines. This interview process is designed to explore spiritual experiences, emotional changes, and respondents' views on the effectiveness of *shalat* as a therapy for anxiety disorders.

The data obtained in this study will be analyzed through two main stages: quantitative analysis and qualitative analysis. Quantitative data from surveys will be analyzed using descriptive and inferential statistical techniques to measure changes in anxiety levels before and after the *shalat* intervention. Techniques such as paired sample t-tests will be used to determine whether there are significant differences in anxiety levels. Qualitative data from in-depth interviews will be analyzed using thematic analysis. This stage includes coding the data, identifying main themes, and interpreting the meanings behind these themes. The combination of both approaches will provide a more comprehensive picture of the effectiveness of *shalat* as therapy for anxiety disorders, from both quantitative and qualitative perspectives.

Results and Discussion

The results of the study show a significant decrease in anxiety levels among participants after regularly practicing *shalat* for eight weeks. Quantitative data from surveys using the Hamilton Anxiety Rating Scale (HAM-A) indicate an average reduction of 25% in anxiety levels. One respondent said during an interview, "I feel calmer and more able to control my fear after consistently practicing focused *shalat*" (Respondent 5).

Table 1: Anxiety Levels

Group	Before Intervention	After Intervention
Average Anxiety Score	28.5	21.3

The data show that the regular practice of *shalat* reduces anxiety levels among the research participants, as seen from the decrease in HAM-A scores. These results show a consistent pattern where participants experience a significant reduction in anxiety. Respondents who reported performing *shalat* with devotion and regularity tended to experience improvements in emotional calmness, confirming the findings of previous studies (Zaini, 2016; Ghasemi et al., 2022). Additionally, those who engaged more deeply in *shalat* showed better outcomes.

These data reinforce the hypothesis that *shalat* can serve as an effective form of Islamic therapy in reducing anxiety. The deep spiritual experience during *shalat* seems to have a direct impact on reducing anxiety symptoms.

Improvement in Mental Well-being through Spiritual Strength

Interviews with participants revealed that the practice of *shalat* helps improve overall mental well-being, especially in terms of feelings of peace and emotional stability. One participant said, “*Shalat* gives me an extraordinary sense of peace, like the burdens of my life feel lighter after praying” (Respondent 3). This data is also reflected in the survey, which shows a 30% increase in mental well-being scores after eight weeks of *shalat* therapy.

Table 2: Aspects of Mental Well-being

Aspect of Well-being	Before Intervention (Score)	After Intervention (Score)
Sense of Peace and Calm	6.2	8.5

The data indicate a significant improvement in mental well-being after participants regularly practiced *shalat*, with notable increases in the aspects of peace and emotional stability. These results show a

pattern where focused *shalat* has a positive impact on mental well-being. The increase in peace reported by respondents supports previous literature on the spiritual effects of *shalat* in anxiety therapy (Askari, Mohammadi, & Radmehr, 2018).

The observed improvement in mental well-being can be explained by the spiritual strength gained through *shalat*, which helps individuals experience improvements in their mental health. This supports the idea that *shalat* can be a form of holistic therapy that enhances inner peace.

Acceleration of Psychological Recovery through *Shalat*

Analysis shows that participants who regularly practiced *shalat* reported accelerated recovery from anxiety symptoms. One participant reported, "I feel I recover faster from episodes of anxiety after performing *shalat* compared to other methods I have tried before" (Respondent 7). This is also evident from the data, which show that participants who underwent *shalat* therapy experienced faster reductions in anxiety symptoms compared to the control group.

Table 3: Recovery Time

Group	Recovery Time (weeks)	Anxiety Symptoms (Score)
<i>Shalat</i> Group	4	18.7
Control Group	6	22.3

The data show that participants who performed *shalat* experienced faster recovery from anxiety symptoms compared to those who did not engage in *shalat* therapy. The pattern found in this study indicates that *shalat* not only reduces anxiety levels but also accelerates psychological recovery. This reflects previous research stating that *shalat* provides better emotional stability compared to non-spiritual methods (Sedaghat Ghotbabadi & Alizadeh, 2018).

This acceleration in recovery suggests that *shalat* can be an effective tool for speeding up the healing process in individuals with anxiety disorders, reinforcing the belief in the potential of this therapy within the context of Islamic psychotherapy.

The Influence of Social Support in Shalat Therapy

Results from the interviews indicate that social support during *shalat* plays an important role in the positive outcomes experienced by participants. One participant stated, "*Shalat* in congregation made me feel more supported and stronger in facing my anxiety" (Respondent 9). This data is also reflected in the increase in social well-being scores after eight weeks of practicing group *shalat*.

Table 4: Aspects of Social Well-being

Aspect of Social Well-being		Before Intervention	After Intervention
Sense of Community Support		5.5	7.8

The data indicate that social support during group *shalat* enhances the social well-being of participants, contributing to a reduction in anxiety. Social support appears to strengthen the positive effects of *shalat* in anxiety therapy. This pattern is consistent with research suggesting that social support plays a crucial role in mental healing (Ghasemi et al., 2022).

These findings suggest that practicing *shalat* in a community setting has a more significant impact on reducing anxiety compared to individual *shalat*, highlighting the importance of the social aspect in this therapy.

Frequency of Shalat and Its Impact on Anxiety Reduction

The data show that the frequency of *shalat* significantly influences the effectiveness of therapy in reducing anxiety. Participants who performed *shalat* more than three times a day reported a greater reduction in anxiety compared to those who did it once or twice a day.

Table 5: Frequency of Shalat and Anxiety Reduction

Frequency of Shalat Anxiety Reduction (Score)

> 3 times a day 35%

Frequency of *Shalat* Anxiety Reduction (Score)

1-2 times a day 20%

The data indicate that the higher the frequency of *shalat*, the greater the reduction in anxiety experienced by participants. This pattern shows that the frequency of *shalat* is an important factor in determining its effectiveness in anxiety therapy, consistent with findings in the literature that suggest the frequency of spiritual practice can enhance positive outcomes (Nida, 2014).

Higher frequency of *shalat* provides a stronger effect in reducing anxiety, indicating that regularity and intensity of spiritual practice play key roles in therapeutic outcomes.

Interviews with participants revealed that the quality of *khusyuk* during *shalat* significantly affects therapy outcomes. One participant said, "When I am truly focused and *khusyuk*, I feel much more at peace, and my anxiety almost completely disappears" (Respondent 2). Participants who reported higher levels of *khusyuk* also reported greater reductions in anxiety.

The data show that the level of *khusyuk* during *shalat* positively correlates with the reduction in anxiety. These results indicate a pattern where the more focused a person is in *shalat*, the greater the positive effects on anxiety. This supports previous literature that highlights the importance of full concentration in spiritual practices to achieve better results (Askari, Mohammadi, & Radmehr, 2018).

The quality of *khusyuk* plays an important role in the effectiveness of *shalat* as a therapy for anxiety, indicating that the influence of spirituality is not only about frequency but also the depth of spiritual engagement.

The Duration of *Shalat* Therapy and Its Impact on Anxiety

Other data show that the duration of *shalat* therapy also affects the outcomes. Participants who underwent therapy for more than two

months reported better results in reducing anxiety compared to those who underwent therapy for less than two months.

Longer therapy duration resulted in better outcomes in reducing anxiety. This pattern suggests that the duration of *shalat* practice is also important in determining therapy outcomes. Participants who committed to *shalat* therapy for a longer period reported more significant improvements in their anxiety (Ghotbabadi & Alizadeh, 2018).

A longer practice duration allows the impact of *shalat* therapy to become stronger, indicating that this therapy requires time to deliver maximum results.

Qualitative data indicate that the environment in which *shalat* is performed also influences its effectiveness. One participant stated, "When I perform *shalat* in a quiet and peaceful environment, I feel a greater effect in reducing my anxiety" (Respondent 4). Participants who performed *shalat* in calm surroundings reported more significant reductions in anxiety.

The data show that participants' belief in the effectiveness of *shalat* as a therapy significantly influenced the outcomes they experienced. This pattern suggests that an individual's belief in the effectiveness of *shalat* plays a crucial role in therapy outcomes. This supports literature that suggests spiritual beliefs and faith in therapeutic methods significantly contribute to their effectiveness. A positive perception of *shalat* as a therapy can strengthen the therapeutic effect, indicating the importance of belief in spiritual interventions.

Conclusion

This study found that *shalat* has significant effectiveness in reducing anxiety levels in individuals with psychological disorders. This conclusion is based on the findings that participants who regularly engaged in *shalat* therapy experienced a 25% reduction in anxiety, according to quantitative survey results. Additionally, in-depth interviews revealed that participants felt an increase in emotional

calmness after performing *shalat* with focused devotion (*khusyuk*). The quality of *khusyuk* and a supportive environment contributed to the positive outcomes. In conclusion, *shalat* has the potential to be an effective alternative therapy for reducing anxiety in individuals with psychological disorders.

Shalat, as a form of Islamic therapy, was also proven to improve mental well-being and accelerate psychological recovery. The data showed that participants who underwent therapy for more than two months reported a 30% improvement in mental well-being. Social support during group *shalat* also strengthened the therapeutic results, with participants reporting stronger feelings of support and better social well-being. In conclusion, *shalat* not only reduces anxiety but also improves overall mental well-being.

These findings highlight the importance of the quality and frequency of *shalat* for the effectiveness of therapy. Participants who performed *shalat* more than three times a day and with a high level of *khusyuk* reported more significant reductions in anxiety. A calm environment also played an important role in enhancing the therapy's effectiveness. In conclusion, to maximize the benefits of *shalat* as a therapy, it is important for individuals to perform *shalat* with *khusyuk*, at a high frequency, and in a supportive environment.

Reference

Adz-Dzaky, M. (2002). Psikoterapi Islam untuk gangguan kejiwaan.

Retrieved from <https://garuda.kemdikbud.go.id/>

Adzkar, I. M. (2020). Pengaruh Doa Prabedah Terhadap Nyeri Dan Tanda-Tanda Vital Pascabedah. *Universitas Muhammadiyah Malang*.

<https://repository.umm.ac.id/handle/123456789/3524>

Amalia, N. (2021). Kecemasan Pre Operatif pada Pasien Persalinan.

Journal of Health and Medical Sciences, 15(2), 124-136.

<https://doi.org/10.24014/jhms.v15i2.12436>

Aryanti, S. (2021). Zikir dan Doa Sebagai Terapi untuk Ketenangan dan Kesehatan Jiwa. *Universitas Islam Negeri Raden Fatah Palembang*. <http://repository.radenfatah.ac.id/id/eprint/7389>

Askari, M., Mohammadi, H., Radmehr, H., & Jahangir, A. H. (2018). The effect of spiritual-religious psychotherapy on enhancing quality of life and reducing symptoms of anxiety and depression among the elderly. *Journal of Religion and Health*, 4(2), 29-41. <https://doi.org/10.29252/jrh.4.2.29>

Bakara, D. M., Ibrahim, K., & Sriati, A. (2017). Efek Spiritual Emotional Freedom Technique terhadap cemas dan depresi, sindrom koroner akut. *Jurnal Keperawatan Padjadjaran*, 1(1), 48-55. <https://doi.org/10.24198/jkp.v1n1.6>

Bimasakti, M. A. (2019). Doa Bersama dalam Pandangan Islam. *Jurnal Aqidah*, 5(2), 33-45. <https://doi.org/10.24252/aqidahta.v5i2.10651>

Darojat, T. A. (2019a). SOP Santunan Ruhani Pasien Rawat Inap Muslim. *RS PKU Muhammadiyah Gamping*. <https://repository.pku.ac.id/handle/123456789/7890>

Darojat, T. A. (2019b). SOP Santunan Ruhani Pasien Sebelum dan Sesudah Operasi. *RS PKU Muhammadiyah Gamping*. <https://repository.pku.ac.id/handle/123456789/7891>

Erin, A. (2014). Hubungan Dukungan Suami dengan Tingkat Kecemasan Ibu Hamil Menghadapi Persalinan di Puskesmas Turi Sleman. *Jurnal Kebidanan Indonesia*, 3(1), 45-53. <https://doi.org/10.29244/jki.v3i1.6524>

Fadillah, I. (2017). Pengaruh psikoterapi dalam menurunkan kecemasan pasien penyakit jantung. Retrieved from <https://garuda.kemdikbud.go.id/>

Gaazor, A. (2021). Evaluation of the effectiveness of positive psychotherapy on anxiety, perceived stress, and medication

adherence in patients with asthma. *International Journal of Body, Mind and Culture*, 7(4), 26-32.

<https://doi.org/10.22122/ijbmc.v7i4.239>

Ghasemi, M., Mohammadian, Y., Parvizifard, A. A., Rouzbahani, M., & JamshidMofid, P. (2022). The effectiveness of meaning-centered group psychotherapy on improving spiritual well-being and reducing anxiety in Iranian male cardiovascular patients. *Journal of Education and Health Promotion*, 11(1), 387.

https://doi.org/10.4103/jehp.jehp_1626_21

Ghotbabadi, S. S., & Alizadeh, K. (2018). The effectiveness of spiritual-religion psychotherapy on mental distress (depression, anxiety, and stress) in the elderly living in nursing homes. *Health, Spirituality and Medical Ethics*, 5(1), 20-25.

<https://doi.org/10.29252/jhsme.5.1.20>

Hernanto, F. F. (2016). Pengetahuan Tentang Kehamilan, Dukungan Keluarga dan Kecemasan Ibu Primigravida Trimester III. *Persona: Jurnal Psikologi Indonesia*, 5(3), 235-244.

<https://doi.org/10.21545/persona.v5i3.257>

Isnaniar, N., Norlita, W., & Gusrita, S. (2020). Pengaruh Peran Suami Terhadap Tingkat Kecemasan Ibu Hamil Dalam Menghadapi Proses Persalinan. *Jurnal Sains Dan Kesehatan*, 11(1), 32-44.

<https://doi.org/10.31964/jsk.v11i1.420>

Khotimah, S., & Sari, E. N. (2018). Analisis Perbedaan Partisipasi Suami dan Tenaga Kesehatan Terhadap Tingkat Kecemasan Ibu Intrapartum Primipara. *Journal For Quality In Women's Health*, 1(2), 50-56. <https://doi.org/10.25157/jqwh.v1i2.574>

Lee, S. (2017). Anxiety During Pregnancy: An Overview. *Hong Kong Journal of Mental Health*, 23(4), 77-89.

<https://doi.org/10.1002/hkjmh.23477>

Mulyadi, R., & Hidayah, M. (2012). Kecemasan dan psikoterapi Islam: Model psikoterapi Al-Qur'an dalam mengatasi kecemasan di Pondok

Pesantren Baiturrahmah. *El-Qudwah*, 10(2006). Retrieved from <https://garuda.kemdikbud.go.id/>

Mulyadi, R., & Hidayah, M. (2012). Kecemasan dan psikoterapi Islam: Model psikoterapi Al-Qur'an dalam mengatasi kecemasan di Pondok Pesantren Baiturrahmah. *El-Qudwah*, 10(2006). Retrieved from <https://garuda.kemdikbud.go.id/>

Nasution, A. Y. (2018). Analisis Zikir Dan Doa Bersama (Perspektif Empat Madzhab). *Jurnal Madani: Ilmu Pengetahuan, Teknologi Dan Humaniora*, 1(1), 33-54. <https://doi.org/10.33753/madani.v1i1.3>

Nasution, N. A. (2020). Literature Review Tingkat Kecemasan Pre Operatif Pada Pasien-Pasien Yang Diajarkan Doa Sebelum Dan Sesudah Menjalani Tindakan Anastesi Dan Operasi Elektif. *Universitas Muhammadiyah Sumatera Utara*. <http://repository.umsu.ac.id/id/eprint/5369>

Nida, F. L. K. (2014). Zikir sebagai psikoterapi dalam gangguan kecemasan bagi lansia. *Konseling Religi: Jurnal Bimbingan Konseling Islam*, 5(1), 133-150. <https://doi.org/10.21043/kr.v5i1.1064>

Niko, P. F. (2018). Pengaruh Terapi Dzikir Untuk Menurunkan Kecemasan Pada Ibu Hamil. *Jurnal Islamika*, 1(1), 24-33. <https://doi.org/10.29300/islamika.v1i1.2521>

Romalasari, N. F., & Astuti, K. (2020). Hubungan Antara Dukungan Suami dan Partisipasi Mengikuti Kelas Ibu Hamil dengan Kecemasan Menghadapi Persalinan pada Ibu Hamil Primigravida Trimester Tiga di Puskesmas Nglipar II. *Jurnal Bimbingan Dan Konseling Islam*, 4(2), 304-318. <https://doi.org/10.24014/bki.v4i2.25789>

Sedaghat Ghotbabadi, S., & Alizadeh, K. (2018). The effectiveness of spiritual-religion psychotherapy on anxiety and depression in the elderly. *Health, Spirituality, and Medical Ethics*, 5(1), 25-30. Retrieved from <https://doaj.org/article/7c41dfe45cd74d0282c4ad58f1edebf3>

Sumarni, S. (2020). Proses penyembuhan gejala kejiwaan berbasis Islamic Intervention of Psychology. *Nalar: Jurnal Peradaban dan Pemikiran Islam*, 3(2), 134-147.

<https://doi.org/10.23971/njppi.v3i2.1677>

Sundeen, S. J., & Stuart, G. W. (2000). Principles and Practice of Psychiatric Nursing. *Elsevier Health Sciences*.

Suraily, L. (2022). Hubungan Dukungan Keluarga, Dukungan Sosial, Persepsi Pandemi Covid-19 Dengan Tingkat Kecemasan Ibu Hamil. *Simfisis Jurnal Kebidanan Indonesia*, 2(1), 237-243.

<https://doi.org/10.35791/simfisis.v2i1.786>

Wardani, Y., Nashori, F., & Uyun, Q. (2016). Efektivitas pelatihan shalat khususnya dalam menurunkan kecemasan pada lansia hipertensi. *Jurnal Intervensi Psikologi*, 8(2), 217-233.

<https://doi.org/10.20885/intervensiipsikologi.vol8.iss2.art5>

Yusuf, A. M. (2016). Metode Penelitian Kuantitatif, Kualitatif & Penelitian Gabungan. *Prenada Media*.

Zaini, A. (2006). Shalat alternatif terbaik sebagai terapi psikoprobem. Retrieved from <https://garuda.kemdikbud.go.id/>

Zaini, A. (2016). Shalat sebagai terapi bagi pengidap gangguan kecemasan dalam perspektif psikoterapi Islam. *Konseling Religi: Jurnal Bimbingan Konseling Islam*, 6(2), 319-334.

<https://doi.org/10.21043/kr.v6i2.1029>

Zakariah, M. A., Afriani, V., & Zakariah, K. H. M. (2020). Metodologi Penelitian Kualitatif, Kuantitatif, Action Research, Research and Development (R&D). *Yayasan Pondok Pesantren Al Mawaddah Warrahmah Kolaka*. <https://doi.org/10.35791/mpkq.v1i1.256>