Dhikr Relaxation To Reduce Phobia In Students With Specific Phobia Disorder

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Abstract—The research aim is to know the effect of Dhikr relaxation to decrease phobia in students with specific phobia disorder by measuring the relaxation responses with Nexus-10 biofeedback unit and severity measure for specific phobia-adult. The hypothesis of the study is that there is an effect of dhikr relaxation to decrease specific phobia. This is a quasi experimental on single group pretest-posttest design with 10 students who have specific phobia disorders as research participants. Data collection was done using severity measure for specific phobia-adult, Nexus-10 biofeedback unit, interview and observation. The results of the data analysis shows significance decrease of severity measure for specific phobia-adult with Wilcoxon test (p value <0.05). The results of the data using the Nexus -10 Biofeedback unit showed significant results with respiration frequency with a value of sig. 0.009 (p <0.05) and heart rate variability with a value of sig. 0.047 (p <0.05). This shows that the Dhikr relaxations performed results in a decrease phobias in students with specific phobia disorders as indicated by decreased respiration frequency and decreased heart rate using the Nexus II Biofeedback unit.

Keywords. dhikr relaxation, specific phobia, bio-feedback, respiration frequency, heart rate

I. INTRODUCTION

Specific phobia is an anxiety disorders that mostly occur. Some of specific phobias are fear of animals, the darkness or the strangers that might appear in the childhood. According to Durand and Barlow, specific phobia has high percentage, then it becomes one of the psychological disorders that is found in AS and in the world [1].

Other sources mention that specific phobia commonly is experienced by the society about 13.2%. Generally this is caused by several things, especially unpleasant experience toward a certain thing or object. General irrational fear occur on the society, but it is not yet known which conditions cause stress or a weakness found in the specific diagnostic phobia criteria [2].

An unpleasant experience in childhood that deals with something unpleasant is allegedly assumed as a phobia experience. Phobias can also occur because someone associates the object with something else. Hence, this might cause a harmless objects can be a source of extraordinary fear for people with phobias [3].

Specific phobias indicate a feeling of being threatened on the subject when dealing with the object. The feeling of being threatened creates a stress response that causes the body to release some stress hormones, such as Cortisol and Adrenaline (also known as Epinephrine) into the bloodstream. These hormones increase concentration, energy and the ability to react. Biologically, the stress response causes an increase in heart rate and blood pressure. [4]

The study of physiological response to stress was pioneered by Walter Cannon and Hans Selye who focused on the autonomic response to a stressor. Individuals will prepare themselves for a stressor that is considered as a threat. Then, a number of neurobiological reactions are rolled out, starting with the release of adrenaline which activates the body's energy reserves through acceleration of heart rate, blood pressure, respiration, and blood glucose mobilization. Such reactions require a lot of energies. Therefore, the energy needs for other physiological activities that are considered as an unimportant energy are blocked, so that the energy can be used optimally for the reactions mentioned above. As a continuation of this process, the organism reaches a position to fight or get out of the fight-or-flight response. After short-term stress, the body's physiological response will return to normal. While a chronic or long term- stress however it is can cause problems because the body constantly produces more stress hormones and doesn't offer time for recovering, so that it can cause a serious health problems [4].
Various therapies can be used to treat phobias that are categorized as an anxiety disorder, such as systematic desensitization, exposure, and relaxation. These therapies can be carried out with various approaches, one of it is the transpersonal approach. The transpersonal therapy approach is a therapy that is close to the utilization of spiritual resources and the highest potential of humans. Transpersonal does not reject various types of therapy that have developed, but adds it to therapies that use mindfulness training, such as: hypnosis, meditation, and guided imagery [5]. The main difference between transpersonal and conventional approaches can be seen from the spiritual context, the transformation, and the use of spiritual practices [6]. Therefore, the transpersonal approach is more likely to be integrated with the Islamic approach, Sufism in particular. Khadijah [7] concluded in her study that transpersonal psychology and Sufism can be used as a medium to maximize the potential of goodness possessed by every human being and at the same time, both can be used as protective shield from negative things that can damage the soul and the human values.

In this study, researchers are interested in developing an integrative intervention effort that combines the science of transpersonal and Islamic psychology through psychosufistic therapeutic approaches. The therapeutic technique used is dhikr relaxation therapy. According to Trimingham, dhikr is the mysticism point in Islam. Dhikr (the recitation of the name of Allah repeatedly) is considered as a method of purifying the soul and healing of internal diseases. Besides that, dhikr also changes the tendency of the soul from the orientation of the outside world to the world inward and the chaotic soul because of thinking about world problems towards the unification of souls which can ultimately change the religious life from self-oriented to God-oriented [8].

This study shows the integration and the development of transpersonal psychotherapy and Sufism psychotherapy where the effectiveness of dhikr relaxation therapy in reducing specific phobias was measured on the basis of scale / inventory and biological parameters.

II. METHOD

This research is an experimental quantitative research with the following methods:

Research design

The research design used was a pretest-posttest one group design, doing a measurement before and after treatment in the experimental group.

| TABLE I. EXPERIMENT RESEARCH DESIGN |
|-------------------------------------|
| Group  | Pretest | Treatment | Postest |
|--------|---------|-----------|---------|
| Eksperiment | Y1 | Dhikr relaxation | Y2 |

Notes:
- Y1: The measurement before treatment
- Y2: The measurement after treatment

Participant

The selection of research subjects is by purifying sampling students who meet predetermined criteria. The following is the categorization of the subject: Muslims, students, enter the early adult development stage, and have specific phobia disorders.

Data Collection Tools

The tools used in data collection are:
1. Nexus-10 Biofeedback unit
2. Severity measure for specific phobia-adult
3. Interview questioners
4. Observation checklist during the training
5. Self-record

Statistic Analysis

The data collection method used was using a specific phobia scale measuring instrument and the nexus biofeedback which was presented in the form of pretest and posttest. The analysis used to test the hypothesis is the Wilcoxon test to determine the differences before and after being given treatment in one group [9]. The full calculation uses SPSS for Windows version 16.

(a) Specific phobias

People who experience with phobias will cause an urge to escape or avoid the object of a phobia. Specific phobia is excessive and persistent fear of specific objects or situations, such as fear of heights (acrophobia), fear of a closed place (claustrophobia), fear of small animals or other reptiles. Phobias are categorized as psychological disorders, if the phobia significantly affects a person's lifestyle or performance, or causes significant distress [10].

Characteristics of specific phobia disorders according to a summary of the Psychiatric Disorders (PPDGJ-III) and
DSM-5 (2013) Classification Guide [11], a person diagnosed with a specific phobia disorder or a typical phobia if:
1) All the criteria below must all be fulfilled for a definite diagnosis:
2) Psychologically, behavioral and autonomic symptoms that arise must be primary manifestations of anxiety and not secondary to other symptoms such as an obsession or obsessive mind;
3) Anxiety must be limited to the existence of specific phobic objects or situations (highly specific situations); and
4) The phobic situation should be avoided whenever it is possible.
In this typical phobia, generally there are no other psychiatric symptoms, unlike agoraphobia and social phobia

(b) Dhikr relaxation

Relaxation according to Benson [12] is the innate ability of the body to enter a special state that is characterized by the reduced heart rate, the decreased breathing speed, the decreased blood pressure, and the reduced metabolic rate. These changes can eliminate feelings of anxiety and stress. This is because conditions are relatively peaceful so that the individual's mental patterns change by freeing themselves from anxiety.

Dhikr in a narrow definition means that naming the Allah's greatness on various occasions. Whereas in the broadest sense, dhikr includes the understanding of the greatness and love of Allah SWT that has been given to us, by obeying all His commands and avoiding His prohibitions. According to al-Ashfani, dhikr is presenting something both in the form of feelings and deeds. In psychosufistik there is a lataif concept which is developed as a method of recitation in the heart. Lataif is a soft and delicate essence found in the heart of a person. In order for him to remain in his fitrah, maintenance is needed through dzikir and spiritual struggle [13].

Dhikr to Allah on any occasions will bring the servant closer to His Rabb. By feeling close to His Rabb, a servant will feel awake, and protected, strengthen the hope of the maghfirah, create a feeling of being willing and peaceful, and fostering peace and tranquility. Dhikrullah makes the soul alive, strenthen the hopes of forgiveness and blesses, and evokes the feelings of spaciousness and happiness [14].

(c) Severity measure for specific phobia-adult

The severity measure for specific phobia-adult is a measuring tool to determine the severity of specific phobias in individuals aged around 18 years and over and consists of 10 items. Each item asks the individual to rank the severity of the specific phobia he felt for seven days. This scale is based on DSM-5 [15].

(d) Relaxation response was measured using the Nexus-10 Biofeedback Unit

Relaxation according to Benson [12] is the innate ability of the body to enter a special state that is characterized by the reduced heart rate, the decreased breathing speed, the decreased blood pressure, and the reduced metabolic rate.

The parameters used as an indicator of the emergence of a relaxation response or a decrease in stress response with the Nexus-10 Biofeedback Unit are a decrease in heart rate and a decrease in the frequency of respiration. Decreased heart rate is measured by the method of measuring heart rate-blood volume pulse (HR-BVP) which shows the measurement of the number of heart beats over a period of time using a measure of blood volume that passes through the photoplethysmographic sensor (PPG) on each pulse, also called the blood volume pulse (BVP) [4].

### III. RESULTS AND DISCUSSION

| No | Name   | Specific Phobia Type | Specific Phobia Pretest Scale | Specific Phobia Posttest Scale |
|----|--------|----------------------|-------------------------------|------------------------------|
| 1  | Chintya| Trypophobia           | 39                            | 6                            |
| 2  | Aini   | Trypophobia           | 29                            | 0                            |
| 3  | Damay  | Ailurophobia          | 31                            | 21                           |
| 4  | Rizki  | Ichthyophobia         | 36                            | 13                           |
| 5  | Atin   | Ailurophobia          | 35                            | 25                           |
| 6  | Insani | Trypophobia           | 34                            | 20                           |
| 7  | Miftah | Hemophobia            | 30                            | 20                           |
| 8  | Mahmud | Hemophobia            | 30                            | 10                           |
| 9  | Citra  | Fear of Caterpillar   | 40                            | 20                           |
| 10 | Fandi  | Katsaridaphobia       | 40                            | 10                           |

**Notes:**
Trypophobia: fear of tiny holes
Ailurophobia: fear of cat
Ichthyophobia: fear of fish
Hemophobia: fear of blood
Katsaridaphobia: fear of cockroach

| No | Name    | Specific Phobia Type | Specific Phobia Pretest | Specific Phobia Posttest |
|----|---------|----------------------|------------------------|-------------------------|
| 1  | Chintya | Trypophobia           | 117.93                 | 84.02                   |
| 2  | Aini    | Trypophobia           | 87.72                  | 76.76                   |
| 3  | Damay   | Ailurophobia          | 101.9                  | 81.57                   |
| 4  | Rizki   | Ichthyophobia         | 111.31                 | 91.77                   |
| 5  | Atin    | Ailurophobia          | 100.47                 | 94.02                   |
| 6  | Insani  | Trypophobia           | 86.41                  | 80.62                   |
| 7  | Miftah  | Hemophobia            | 79.21                  | 78.24                   |
| 8  | Mahmud  | Hemophobia            | 70                     | 73.5                    |
| 9  | Citra   | Fear of Caterpillar   | 91.43                  | 85.76                   |
| 10 | Fandi   | Katsaridaphobia       | 70                     | 88.5                    |
Notes:
Tryphobilia: fear of tiny holes
Aliuropobia: fear of cat
Ichthyophobia: fear of fish
Hemophobia: fear of blood
Katsaridaphobia: fear of cockroach

TABLE IV. THE FREQUENCY OF RESPIRATION MEASUREMENT RESULTS

| No | Name   | Specific Phobia Type | Specific Phobia Pretest | Specific Phobia Posttest |
|----|--------|----------------------|-------------------------|-------------------------|
| 1  | Chintya| Tryphobilia           | 19.71                   | 16.19                   |
| 2  | Aini   | Tryphobilia           | 20.52                   | 20.73                   |
| 3  | Damay  | Aliuropobia           | 20.62                   | 14.45                   |
| 4  | Rizki  | Ichthyophobia         | 19.27                   | 8.48                    |
| 5  | Atin   | Aliuropobia           | 18.83                   | 20.08                   |
| 6  | Insani | Tryphobilia           | 23.44                   | 19.34                   |
| 7  | Miftah | Hemophobia            | 21.28                   | 17.37                   |
| 8  | Mahmud | Hemophobia            | 22.79                   | 13.64                   |
| 9  | Citra  | Fear of Caterpillar   | 25.92                   | 6.62                    |
| 10 | Fandi  | Katsaridaphobia       | 29.94                   | 16.33                   |

Notes:
Tryphobilia: fear of tiny holes
Aliuropobia: fear of cat
Ichthyophobia: fear of fish
Hemophobia: fear of blood
Katsaridaphobia: fear of cockroach

TABLE V. WILCOXON STATISTICAL TEST (SPECIFIC PHOBIAS SCALE)

| Sig.Value | p < 0.05 | Description |
|-----------|----------|-------------|
| 0.005     | p < 0.05 | Significant |

Based on the Wilcoxon statistical test table on specific phobias variables, it can be seen that the Sig. value is 0.005 (p <0.05). These results indicate that there is a significant effect of giving dhikr relaxation to reduce anxiety in Sunan Kalijaga UIN Yogyakarta and Raden Intan UIN Lampung students. It can be concluded that dzikir relaxation to reduce student anxiety is effective and the proposed hypothesis has been proven.

TABLE VI. WILCOXON STATISTICAL TEST (HR-BVP FOR NEXUS BIO-FEEDBACK)

| Sig.Value | p < 0.05 | Description |
|-----------|----------|-------------|
| 0.047     | p < 0.05 | Significant |

Based on the Wilcoxon HR (BVP) statistical test table on the Biofeedback Nexus, it can be seen that the Sig. value is 0.047 (p <0.05). These results showed that there was a significant difference in HR (BVP) before and after dhikr relaxation was given to students of Sunan Kalijaga UIN Yogyakarta and Raden Intan UIN Lampung.

Based on the Wilcoxon RSP-Rate statistical test table for the Biofeedback Nexus, it can be seen that the Sig value is 0.009 (p <0.05). The results showed that there were significant differences in respiration frequency before and after dzikir relaxation was given to students at Sunan Kalijaga UIN Yogyakarta and Raden Intan UIN Lampung.

This study aims to determine the effectiveness of dhikr relaxation to reduce phobias in students who have specific phobias. Based on all the results of the SPSS Wilcoxon analysis showed a significant effect of dzikir relaxation on decreasing specific phobias on Sunan Kalijaga UIN Yogyakarta and Raden Intan UIN Lampung students with Sig values of 0.005 (p <0.05) for specific phobia scales, Sig values of 0.047 (p <0.05) for HR (BVP) and Sig for 0.009 (p <0.05) for RSP-Rate.

The acceptance of all hypotheses in this study shows that Relaxation Dhikr is effective for reducing anxiety. In addition, it is also strengthened by the research conducted by Azmarina under the title Systematic Desensitization with the Tashbih Dhikr to Reduce Symptoms of Anxiety in Specific Phobia Disorders. The results of the research shows that systematic desensitisation with prayer beads gives a significant influence on reducing anxiety symptoms in specific phobia disorders. [1]

According to Lulu's explanation [16], dhikr can penetrate all parts of the body even to every cell of the body itself. So that, it has an influence on the physical by feeling the weak vibration, penetrating and drains those dhikr throughout the body. At this time, the child's body experiences relaxation or nervous relaxation. This will affect the reduction or loss of mental stress resulting from not fulfilling physical and spiritual needs.

The research related to heart rate and specific phobia that has been done shows that the decrease in anxiety possessed by early adults who have specific phobias is a decrease in heart rate. This is in line with the results of the study which showed significant results in heart rate as measured by the Nexus-10 Biofeedback Unit in the study subjects [17].

Diaphragmatic breathing used in dhikr relaxation exercises, namely in the form of slower breathing frequencies can provide input to the vague nerve parasympathetically. Therefore, it decreases stress response and raises a relaxation response [18].

Based on the results of interviews and observations, it was shown that the subjects felt calmer when they had to deal with the object they feared of. Responses such as hysteria, tenderness and tingling indicated by the subject before being given the intervention decreased. The subject no longer cried when he had to be confronted with the object he feared. In addition, the subject felt that the relaxation of dhikr received from this study could be applied to the anxiety felt by the subject as well as from the specific phobia they had.

Tryphobilia: fear of tiny holes
Aliuropobia: fear of cat
Ichthyophobia: fear of fish
Hemophobia: fear of blood
Katsaridaphobia: fear of cockroach

TABLE VII. WILCOXON STATISTICAL TEST (RSP-RATE FOR NEXUS BIO-FEEDBACK)

| Sig.Value | p < 0.05 | Description |
|-----------|----------|-------------|
| 0.009     | p < 0.05 | Significant |
IV. CONCLUSION

Based on the results of statistical analysis on the measurement of the Severity Measure for Specific Phobia-Adult scale shows a decrease in scores before and after participating in dhikr relaxation which has a significant sig value amounting to 0.005 (p < 0.05). Similarly, the measurements using the Nexus-10 Biofeedback Unit showed a decrease in HR-BVP and respiration frequency before and after following the relaxation of dzikir with a sig value equal to 0.047 (p < 0.05) and sig value amounting to 0.009 (p <0.05). Then it can be concluded that relaxation dhikr is effective in reducing specific phobias so that it can be used to reduce anxiety felt by early adults in order to be able to move according to their role without having to experience anxiety about certain objects.

The future studies are expected to use the two group pre-posttest research design in order to compare the results of the control group and the experimental group. In addition, there is a need to develop a module of dhikr relaxation research as well, but it still needs to be done especially about the steps and dzikir phrases used.

V. ACKNOWLEDGMENT

We would like to thank the many people who helped the study. This study was supported by The Center of Lembaga Penelitian dan Pengabdian Masyarakat Sunan Kalijaga State Islamic University Yogyakarta which has become the leading sector for the implementation of this research. Thank you also to the researchers, dean of the Faculty of Social Sciences and Humanities, Center for Neuroscience and Spiritual Health / CNET State Islamic University, and Faculty of Social Sciences and Humanities of Sunan Kalijaga State Islamic University Yogyakarta. In addition, thanks to the research assistant at Raden Intan UIN Lampung: Mustamira Sofa Salsasbila, S.Psi., M.Si.

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