



DHIKR RATEEB SIRIBEE AND ITS EFFECT IN REDUCING ANXIETY AMONG THE MPTT-I ACEH CONGREGATION MEMBERS

**Safrilsyah^{1*}, Karjuniwati¹, Damanhuri¹, Fitriah M. Suud²,
Subhan¹, Mhd. Ricky Darusman¹, Wina Maghfirah¹**

¹Universitas Islam Negeri Ar-Raniry Banda Aceh

²Universitas Muhammadiyah Yogyakarta

*Correspondence email: safriyah@ar-raniry.ac.id

Abstract: The dissemination of information via social media has significantly impacted psychological issues such as stress, fear, and anxiety within society. This is exemplified by the MPTT-I congregation in Aceh, who frequently faces societal rejection regarding their dhikr practices. This study aims to evaluate the effectiveness of dhikr in alleviating anxiety among members of the Indonesian Sufism Study (MPTT-I & Dhikr Rateb Seribe). This study uses a quantitative, quasi-experimental method with a nonrandomized pretest-posttest control group design. The study involved 20 subjects, evenly divided into experimental and control groups. The data collection used the Greenberger and Padesky anxiety scale. The results indicated a significant reduction in anxiety among the MPTT-I congregation following the implementation of the Dhikr. These findings suggest that dhikr is effective in reducing anxiety within the MPTT-I & Dhikr Rateb Seribe community.

Keywords: Dhikr, Anxiety, MPTT-I Aceh

DOI: <http://dx.doi.org/10.20414/ujis.v28i1.1014>

Introduction

ANXIETY PROBLEM is a pervasive mental health concern affecting individuals globally, leading to significant distress and impairment in daily functioning. It manifests as a state of worry and fear about potential future events, often resulting in physiological symptoms. Anxiety disorders are among the most common mental health conditions, with a prevalence rate of

approximately 7.3% worldwide.¹ The symptoms of anxiety can range from mild to severe, including persistent worry, restlessness, fatigue, difficulty concentrating, irritability, muscle tension, and sleep disturbances.² These symptoms can significantly interfere with an individual's ability to function in daily life, impacting personal relationships, work performance, and overall quality of life.

Traditional therapeutic approaches for managing anxiety include cognitive-behavioral therapy (CBT) and pharmacotherapy. CBT is a well-established, evidence-based treatment that focuses on identifying and challenging maladaptive thought patterns and behaviors to reduce anxiety symptoms.³ Pharmacotherapy typically involves the use of medications such as selective serotonin reuptake inhibitors (SSRIs) and benzodiazepines, which can help alleviate anxiety symptoms by altering brain chemistry.⁴ While these approaches are practical for many individuals, they may need to be more suitable or sufficient for everyone. Consequently, there is growing interest in alternative and complementary methods for anxiety management, particularly those rooted in spiritual and religious practices.

Spirituality and religion have long been recognized as essential components of human experience, offering a sense of meaning, purpose, and connection. Various studies have

¹ AJ Baxter et al., "Global Prevalence of Anxiety Disorders: A Systematic Review and Meta-Regression," *Psychological Medicine* 43, no. 5 (2013): 897–910, <https://doi.org/10.1017/S003329171200147X>.

² American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders*, 5th ed. (American Psychiatric Publishing, 2013), <https://dsm.psychiatryonline.org/doi/book/10.1176/appi.books.9780890425596>.

³ Stefan G Hofmann et al., "The Efficacy of Cognitive Behavioral Therapy: A Review of Meta-Analyses," *Cognitive Therapy and Research* 36, no. 5 (2012): 427–40, <https://doi.org/10.1007/s10608-012-9476-1>.

⁴ David S Baldwin and Emma K Brandish, "Pharmacological Treatment of Anxiety Disorders," in *The Wiley Handbook of Anxiety Disorders* (Wiley, 2014), 865–82, <https://doi.org/10.1002/9781118775349.ch43>; David S Baldwin et al., "Evidence-Based Pharmacological Treatment of Anxiety Disorders, Post-Traumatic Stress Disorder and Obsessive-Compulsive Disorder: A Revision of the 2005 Guidelines from the British Association for Psychopharmacology," *Journal of Psychopharmacology* 28, no. 5 (2014): 403–39, <https://doi.org/10.1177/0269881114525674>.

highlighted the potential mental health benefits of engaging in spiritual and religious practices, including reduced levels of anxiety, depression, and stress.⁵ These practices can provide emotional support, foster a sense of community, and promote coping strategies that enhance psychological resilience.

In early March 2020, concerns about societal rejection and anxiety began to rise due to the unprecedented challenges posed by the COVID-19 pandemic.⁶ The pandemic exacerbated existing social anxieties and introduced new stressors, such as fear of infection, loss of loved ones, economic instability, and social isolation. Individuals increasingly felt the pressure and fear of being ostracized by society, particularly those who were infected or suspected of being infected with the virus.⁷ The anxiety of not fitting in or being excluded became a significant issue, affecting mental health and social dynamics.⁸ The fear of rejection permeated daily interactions and social relationships, highlighting the profound impact of societal acceptance on individual well-being.⁹

⁵ Harold G Koenig, Dana E King, and Verna Benner Carson, *Handbook of Religion and Health* (Oxford University Press, 2012); KI Paragment, JJ Exline, and JW Jones, "APA Handbook of Psychology, Religion, and Spirituality (Vol 1): Context, Theory, and Research" (American Psychological Association, 2013), <https://doi.org/10.1037/14045-000>.

⁶ AN Faiz, Suroso Suroso, and Muhammad Farid, "21st Century Phobia: The Role of Loneliness and Social Anxiety in Adolescent Nomophobia," *IJOSMAS* 4, no. 5 (2023).

⁷ Emma A Bäck et al., "A Social Safety Net? Rejection Sensitivity and Political Opinion Sharing among Young People in Social Media," *New Media & Society* 21, no. 2 (2019): 298–316, <https://doi.org/10.1177/1461444818795487>.

⁸ Margarita Alegria et al., "The Effect of Minority Status and Social Context on the Development of Depression and Anxiety: A Longitudinal Study of Puerto Rican Descent Youth," *World Psychiatry* 18, no. 3 (2019): 298–307, <https://doi.org/10.1002/wps.20671>.

⁹ Rosanne Cawley et al., "What Is the Relationship between Rejection and Self-Harm or Suicidality in Adulthood?," *Journal of Affective Disorders* 242 (2019): 123–34, <https://doi.org/10.1016/j.jad.2018.08.082>; Eddy M Elmer, Theo van Tilburg, and Tineke Fokkema, "Minority Stress and Loneliness in a Global Sample of Sexual Minority Adults: The Roles of Social Anxiety, Social Inhibition, and Community Involvement," *Archives of Sexual Behavior* 51, no. 4 (2022): 2269–98, <https://doi.org/10.1007/s10508-021-02132-3>; Annalee V Johnson-Kwochka, Laura G Stull, and Michelle P Salyers, "The Impact of Diagnosis and Religious

Anxiety is characterized by a state of worry about potential future events.¹⁰ This anxiety arises from a stress reaction to unpredictable and extraordinary events, leading to symptoms such as increased tension, restlessness, and physical ailments like headaches, diarrhea, itching, sleep disturbances, increased blood pressure, and rapid heart rate.¹¹ These physiological responses are part of the body's fight-or-flight mechanism, a survival strategy that prepares individuals to respond to perceived threats.¹² However, when this response becomes chronic, it can lead to significant health problems, including cardiovascular disease, gastrointestinal issues, and weakened immune function.¹³

Individuals cope with anxiety and social rejection in various ways, reflecting the diverse nature of human resilience and adaptability. For example, some people may use creative outlets like painting, writing, or music to process their emotions and find solace. Creative expression has been shown to reduce stress, enhance mood, and promote psychological well-being.¹⁴ Others might seek support through close friendships and social networks, engaging in deep conversations and shared activities to alleviate

Orientation on Mental Illness Stigma," *Psychology of Religion and Spirituality* 14, no. 4 (2022): 462–72, <https://doi.org/10.1037/rel0000384>.

¹⁰ Iliana Garcia and Jean O'Neil, "Anxiety in Adolescents," *The Journal for Nurse Practitioners* 17, no. 1 (2021): 49–53, <https://doi.org/10.1016/j.nurpra.2020.08.021>; Kanako Nakazawa et al., "Resilience and Depression/Anxiety Symptoms in Multiple Sclerosis and Neuromyelitis Optica Spectrum Disorder," *Multiple Sclerosis and Related Disorders* 25 (2018): 309–15, <https://doi.org/10.1016/j.msard.2018.08.023>.

¹¹ Jeremy Hogeveen and Jordan Grafman, "Alexithymia," in *Alexithymia*, 2021, 47–62, <https://doi.org/10.1016/B978-0-12-822290-4.00004-9>.

¹² Walter B Cannon, "Organization for Physiological Homeostasis," *Physiological Reviews* 9, no. 3 (1929): 399–431, <https://doi.org/10.1152/physrev.1929.9.3.399>.

¹³ George P Chrousos, "Stress and Disorders of the Stress System," *Nature Reviews Endocrinology* 5, no. 7 (2009): 374–81, <https://doi.org/10.1038/nrendo.2009.106>.

¹⁴ Heather L. Stuckey and Jeremy Nobel, "The Connection Between Art, Healing, and Public Health: A Review of Current Literature," *American Journal of Public Health* 100, no. 2 (February 2010): 254–63, <https://doi.org/10.2105/AJPH.2008.156497>.

feelings of anxiety and social rejection.¹⁵ Social support is a crucial factor in mental health, providing emotional, informational, and practical assistance that can buffer against the adverse effects of stress.¹⁶

However, the MPTT-I community in Gampong Miruk has adopted a different approach to coping with societal rejection and anxiety. The MPTT-I, or *Majelis Pengkajian Tauhid Tasawuf* Indonesia, is an Islamic spiritual organization founded by Abuya Sheikh H. Amran Waly Al-Khalidi. This community has turned to the practice of *Dhikr Rateeb Siribee*, a form of Islamic devotional practice involving the repetitive recitation of divine names and phrases. This practice is believed to foster a meditative state, enhance emotional well-being, and provide a sense of inner peace. This spiritual approach highlights the potential benefits of integrating religious practices into mental health strategies for communities facing societal stigma. Given the existing negative stigmas and the demonstrated benefits of *Dhikr Rateeb Siribee*, this study aims to investigate the effectiveness of this practice in reducing anxiety among the MPTT-I congregation. This research will contribute to the broader understanding of the intersection between spirituality and mental health, providing insights into alternative methods for anxiety management.

This study aims to evaluate the effectiveness of dhikr in alleviating anxiety among members of the Indonesian Sufism Study (MPTT-I & Dhikr Rateeb Siribee), particularly in the context of societal rejection. The research question guiding this investigation is: How effective is dhikr in reducing anxiety within this community?

A quantitative, quasi-experimental design was employed to address this question. Specifically, a nonrandomized pretest-posttest control group design was utilized, involving 20 participants. These participants were divided into two equal

¹⁵ EB Algorani and V Gupta, *Coping Mechanism* (StatPearls Publishing, 2023); Helen M. Stallman, "Health Theory of Coping," *Australian Psychologist* 55, no. 4 (August 1, 2020): 295–306, <https://doi.org/10.1111/ap.12465>.

¹⁶ Sheldon Cohen and Thomas A Wills, "Stress, Social Support, and the Buffering Hypothesis," *Psychological Bulletin* 98, no. 2 (1985): 310–57, <https://doi.org/10.1037/0033-2909.98.2.310>.

groups: an experimental group that participated in dhikr practices and a control group that did not receive the intervention.

The primary measurement tool for anxiety levels was the Greenberger and Padesky anxiety scale. Both pretest and posttest assessments were conducted to capture changes in anxiety levels. The comparison of pretest and posttest results within and between the two groups allowed for a thorough assessment of dhikr's impact on anxiety reduction.

In addition to the quantitative data collected through the anxiety scale, qualitative data were gathered through observations and interviews during dhikr sessions. These qualitative insights provided context and depth to the quantitative findings, highlighting participants' emotional experiences and reflections on their practice of dhikr. Observational data focused on the dynamics of the dhikr sessions, such as participants' behaviors and expressions. At the same time, interviews with key community members offered personal perspectives on the perceived impact of dhikr on anxiety and overall well-being.

While the primary focus of this research is quantitative, integrating qualitative observations and interview data enriches the understanding of how dhikr practices influence emotional and psychological states, thus providing a more comprehensive view of its effectiveness within the MPTT-I community.

The Origin of *Rateeb Sirebee Dhikr*

The name of the *Rateeb Sirebee* dhikr community originated when Abuya Amran Waly was returning from Banda Aceh to Labuhanhaji after attending a Tawhid *Tasawuf* study session. Upon reaching Gunung Geurute, he pondered the appropriate name for the dhikr assembly. Notable dhikr assemblies already existed, such as Syaikh Muda Tuanku Tgk. Samunzir's Majelis Zikrullah and Ustad Arifin Ilham's Majelis Az-Zikra were introduced in Depok, West Java in 2007. After careful consideration, the idea of establishing a dhikr assembly named *Rateeb Sirebee* emerged. In Acehnese, this name means "dhikr a thousand times" or "dhikr as much as possible." QS inspires the name. Al-Ahzab: 41, which states:

يَا أَيُّهَا الَّذِينَ آمَنُوا اذْكُرُوا اللَّهَ ذِكْرًا كَثِيرًا

"O you who have believed, remember Allah with much remembrance" (QS. Al-Ahzab: 41).

The phrase "much remembrance" in this verse guided the naming of *Rateeb Siribee*. Tgk. Abuya Amran subsequently met with MPTT leaders to form, develop, and promote the dhikr assembly. This meeting led to the establishment of *Rateeb Siribee*, which now has branches in various cities and districts throughout Aceh.

Tgk. Abuya Amran emphasized that the purpose of this dhikr assembly is to encourage people to draw closer to Allah, with no political agenda involved. *Rateeb Siribee* also aims to improve morality in a modern, individualistic society, where there is often a lack of concern for religious matters. This environment creates a longing for spirituality and religiosity to relieve worldly burdens. Abuya Amran Waly stated:

"We invite people to engage in dhikr so that their hearts will always remember Allah SWT. Nothing will enter their hearts except Allah SWT, and this mindfulness will prevent them from committing evil and encourage good and beneficial deeds, noble character, and compassion. By continuously engaging in dhikr, one can remember and be grateful for Allah's blessings. The way to express this gratitude is by remembering the giver of those blessings, Allah SWT, and recognizing that everything comes from Him" (interview on Monday, August 1, 2022).

In summary, the establishment of *Rateeb Siribee* is purely for moral purposes: to draw closer to Allah, improve morality, and recognize that everything comes from Allah SWT. It has no political affiliations or connections to any parties.

The *Rateeb Siribee* ritual was held during the Isra' Mi'raj celebration at Darul Ihsan Islamic Boarding School in Pawoh Village, Labuhanhaji, South Aceh, on May 7, 2023. The committee invited thirty villages affiliated with MPTT, and hundreds of congregants attended the event. Invitations were distributed in writing and verbally, and attendees were informed about the food arrangements requested by the Isra' Mi'raj committee and *Rateeb Siribee*. The event began at 20:00 WIB, and as people in white clothing started arriving at Darul Ihsan by the sea, they traveled by rickshaw, car, or on foot if they lived nearby. The venues were

filled with congregants and guests, all dressed in white. At around 21:31 WIB, Abuya Syekh H Amran Waly arrived at *shalawat badar*, and everyone honored him. After the prize distribution for the *Isra' Mi'raj* competition by TPA Hidayatullah, representatives from each sub-district reported on *Rateeb Siribee*'s progress. After these reports, Abuya Amran Waly delivered a brief *tawsiyah* on dhikr. The dhikr session began at 23:30 WIB and ended at 01:15 WIB¹⁷.

A different *Rateeb Siribee* ritual occurred at the *Ahlusunnah wal Jamaah* Mosque in Dalam Village on April 16, 2023. Unlike the usual evening sessions, this one was held during the day, with a majority female congregation. Organized by the *Wirid Yasin* or *Yasin Perwati* women's group, the event attracted participants from various regions, including Susoh Blang Pidie, Sawang, and Samadua, South Aceh. The women brought food, which was redistributed by the committee with bottled water. Despite the midday heat, the women came in groups from their villages by rickshaw, motorcycle, or pickup truck, dressed in clean white clothes to symbolize their readiness to participate in the dhikr. The event began with the recitation of the Qur'an, followed by *tausiyah*, and concluded with congregational Asr prayer at 15:45 WIB.

Meaningful of Rituals *Rateeb Siribee Dhikr*

The *Rateeb Siribee* congregants are characterized by their activities and attire. The dhikr sessions are marked by loud and enthusiastic recitations, especially during the *la ilaha illa Allah* chant. This loud recitation is meant to boost dhikr's spirit and ensure that negative inclinations are subdued, softening hardened hearts. "... the reason for the loud dhikr is to calm our wild inclinations. If someone has committed many sins, their heart becomes complicated, and this must be countered with solid dhikr to invigorate the heart, making it easier for those with gentle hearts accustomed to dhikr. "Those with strong inclinations need

¹⁷ Interview with Kasman Hs, Head Coordinator of *Rateeb Siribee* in Padang Bakau Village, July 12, 2023

rigorous dhikr to tame their wild hearts and feel enthusiastic about dhikr".¹⁸

The *Rateeb Siribee* dhikr includes several meaningful rituals:

- a. Turning off the lights during dhikr: The session begins with a tausiyah by an invited Tengku on the virtues of dhikr, followed by turning off the lights to enhance focus and concentration. Male congregants cover their heads with scarves to deepen their focus, even with open eyes. The dim lighting induces a state of reflection and repentance, leading to tears and emotional outbursts. While the men's section has dim lighting, the women's section remains lit to avoid inappropriate behavior (interview with Haris Yunardi, June 9, 2023). Some believe this symbolizes a plea for divine light, implying that dhikr brings spiritual illumination, making physical light unnecessary.¹⁹
- b. Wearing clean white clothing: Congregants often wear white, symbolizing purity. While not mandatory, Abuya Amran Waly highly recommends this. Wearing white shows respect and enhances the spiritual experience. Even newcomers not dressed in white are welcomed as long as their clothes are clean. "... it does not have to be white but must be clean. Just like when meeting officials, we dress well, so we should also dress appropriately for dhikr to show respect".²⁰ Similar practices are observed in the *Az-Zikra* assembly, where white clothing is believed to induce a deep sense of piety and is favored by Prophet Muhammad SAW.²¹

Dhikr Rateeb Siribee has been a cornerstone of the MPTT-I community's coping strategy. The practice involves the recitation of specific dhikr (remembrances of God) in a structured manner, beginning with *istighfar* (seeking forgiveness), *sholawat* (praising

¹⁸ Interview with Haris Yunardi, Head of Study Department at MPTT Labuhanhaji and *Rateeb Siribee* congregant, June 9, 2023

¹⁹ Aris Saefulloh, "Terapi Zikir Jamaâati Di Desa Luwoo Dan Tenggela Kabupaten Gorontalo," *Al-Ulum* 12, no. 1 (2012): 223–44, <https://journal.iaingorontalo.ac.id/index.php/au/article/view/98>.

²⁰ Interview with Kasman HS, July 12, 2023

²¹ Endang Mintarja, *Arifin Ilham: tarikat, zikir, dan Muhammadiyah* (Jakarta: Hikmah, 2004), 63–64.

the Prophet), and reading Al-Fatihah (the opening chapter of the Quran). The dhikr includes tasbih (glorifying God), *tahmid* (praising God), *tahlil* (declaring the oneness of God), takbir (proclaiming the greatness of God), *hauqalah* (acknowledging that there is no power except with God), *hasbalah* (relying on God), *ya latif* (invoking God's gentleness), and *lafadh baaqiyaaatuh* (phrases of remembrance). The session concludes with prayers and *sholawat* after the Isha prayer.

The spiritual benefits of dhikr have been documented in various studies. Dhikr can induce a state of mindfulness and relaxation, which can counteract the physiological effects of stress and anxiety.²² By focusing the mind on divine names and phrases, individuals can experience a reduction in negative thoughts and an increase in positive emotions. This practice can enhance self-awareness and spiritual growth, providing a more profound sense of purpose and connection to the divine.

Rateeb Seribee Dhikr in MPTT-I Community's View

The practice of Dhikr *Rateeb Seribee* is deeply rooted in Islamic tradition and spirituality. Dhikr, literally meaning "remembrance," involves the repetition of specific phrases or names of God to maintain a connection with the divine and foster spiritual growth.²³ The act of dhikr is not merely a ritualistic recitation but a profound meditative practice that can enhance mindfulness and emotional regulation. According to Destyani, praying and dhikr contain deep psychotherapeutic elements, offering therapeutic.²⁴

Their belief has also influenced the MPTT-I community's return to Dhikr *Rateeb Seribee* in divine providence. By submitting themselves to Allah, they reassure themselves that every test and challenge is done with Allah's permission. This surrender to a higher power can provide a sense of comfort and security,

²² Agus Jamaludin, "Konsep Zikir (Studi Analisis Al-Quran)," *Geneologi PAI: Jurnal Pendidikan Agama Islam* 7, no. 1 (2020): 29, <https://doi.org/10.32678/geneologipai.v7i1.2376>.

²³ MJ Ja'far Shodiq, *Dahsyatnya Dzikir Amalan Ringan* (Yogyakarta: Indonesia Lafal Press, 2015).

²⁴ A Z Destyani, "Pengaruh Terapi Zikir Terhadap Tingkat Kecemasan Pada Pasien Stroke" (PhD Thesis, Universitas Islam Indonesia, 2018).

reducing the burden of anxiety and fostering a sense of acceptance and resilience. A study conducted by Ulfah et al. supports this notion, indicating that dhikr can be an effective method for managing anxiety within families.²⁵ The spiritual practice of dhikr and the act of surrendering to Allah are seen as efforts to build confidence and trust in divine will, reinforcing the belief that all trials and calamities are under divine control.²⁶

The Council for the Study of Tauhid Sufism Indonesia (MPTT-I & *Dhikr Rateeb Seribee*) has been active for over two decades, officially registered with the Ministry of Law and Human Rights under No. 02 on October 17, 2016. With tens of thousands of congregants in Aceh and various other regions, including Southeast Asian countries, the MPTT-I has demonstrated the potential of integrating religious practices into mental health strategies for communities facing societal stigma.²⁷ The Ulee Kareng MPTT-I sub-district, active since 2017, is a testament to the widespread acceptance and practice of *Dhikr Rateeb Seribee* within the community.

The MPTT-I community has faced significant societal rejection and negative stigmas, which have impacted their mental well-being and led to heightened stress and anxiety. For example, members of MPTT-I have been stigmatized by people in their local communities, who view their dhikr practices as deviant or unorthodox. This stigma often manifests in social exclusion, where members are avoided, criticized, or gossiped about in public settings. In some cases, they may experience discrimination in religious or social events. Such treatment reinforces feelings of alienation and contributes to the stress and anxiety experienced by

²⁵ Ulfiah Ulfiah et al., "Metode Zikir Sebagai Upaya Keluarga Dalam Menghadapi Kecemasan Pandemi Covid-19," *LP2M UIN Sunan Gunung Djati*, 2020, <https://digilib.uinsgd.ac.id/30950/>.

²⁶ Muyasaroh Hanifah et al., "Kajian Jenis Kecemasan Masyarakat Cilacap Dalam Menghadapi Pandemi Covid-19," 2020; Irma Maya Puspita, Annisa' Wigati Rozifa, and A'im Matun Nadhiroh, "Gambaran Kecemasan Dan Kepatuhan Remaja Putri Terhadap Kebiasaan Baru Di Masa Pandemi COVID-19," *JOMIS (Journal of Midwifery Science)* 5, no. 1 (January 29, 2021): 52-61, <https://doi.org/10.36341/jomis.v5i1.1492>.

²⁷ Nasir Nurdin, "Tanggapi Dinamika Di Masyarakat, Pengurus MPTT-I Aceh Beri Penjelasan Terbuka Ke Publik," *SerambineWS.Com*, 2020.

the MPTT-I congregation. In response, they have turned to *Dhikr Rateeb Siribee* as a coping mechanism. This practice involves the repetitive recitation of divine names and phrases, which has been shown to induce a meditative state and promote emotional resilience.

From a psychological perspective, engaging in *Dhikr Rateeb Siribee*, a spiritual practice rooted in Islamic teachings, is believed to offer cognitive and emotional relief for members of the MPTT-I community. Through dhikr, individuals may achieve a state of mindfulness and spiritual connection, which can help reduce stress and anxiety by shifting focus away from societal rejection. This practice strengthens their faith and provides a coping mechanism to manage external pressures, thus contributing to improved mental resilience. The study will provide evidence for these effects through the analysis of anxiety levels measured before and after participation in dhikr. This approach underscores the value of incorporating religious practices into mental health interventions, particularly for communities experiencing social stigma. In light of the ongoing stigmatization and the observed positive effects of *Dhikr Rateeb Siribee*, this research seeks to assess how effective this practice is in alleviating anxiety within the MPTT-I congregation. The findings of this study will enhance our understanding of the relationship between spirituality and mental well-being, offering new perspectives on alternative strategies for managing anxiety.

Observing the anxiety experienced by MPTT-I Aceh

The approach used in observing the anxiety experienced by MPTT-I Aceh is quantitative. The research method used is a quasi-experimental method, which is a method that does not allow researchers to control the variables and experimental conditions fully. The design used was two groups (two group designs) in the form of a nonrandomized pretest-posttest control group design; namely, the first group was given treatment, and the second group was not. The group that was given treatment was called the experimental group, and the group that was not given treatment was the control group.

The population in this study is the MPTT-I congregation member. The sampling technique that will be used is purposive sampling. The criteria for the subjects in this study were domiciled in urban areas, occupation, age, and willingness to be the research sample. Based on these criteria, a sample of 20 people was willing to participate. The data was collected using a questionnaire in the form of a psychological scale about the variables studied, namely the anxiety variable. The answers on this scale are stated in four categories, namely, Strongly Agree (SS), Agree (S), Disagree (TS), and Strongly Disagree (STS). The anxiety scale is based on a Likert scale. The total number of items on this scale is 31 statements. This scale passes the content validity test conducted through expert judgment. After the item discriminatory test was carried out, the religiosity scale showed that of the 31 items tested, there were 19 items with a correlation coefficient above 0.30 with a range from -0.011 to 0.721, which resulted in an anxiety internal consistency reliability of 0.864. Examples of items on this scale include: "My palms are always sweaty when there are worshipers who want to shake hands." (Aspect of physical reaction); "I should leave the congregation than have to gather during a pandemic like now" (behavioral reaction aspect); "I feel that I will not be able to take care of myself and others" (Thought reaction aspect); and "My mood changes during the pandemic" (Mood reaction aspect).

The research data was analyzed through two steps of data collection. The first step taken to analyze the data of this research is the prerequisite test. This study carried out prerequisite tests, namely normality test and homogeneity test. The second step after the assumption test is fulfilled is the research hypothesis test. In order to test the hypothesis proposed in this study, namely that there is a difference between anxiety in the MPTT-I congregation who were given the dhikr and the MPTT-I congregation who were not given the dhikr, the data analysis technique used was the Independent Sample T-Test method. Analysis of the research data used a computer program, SPSS version 23.0, for Windows.

Discussion

The study was conducted among 20 members of the MPTT-I congregation, divided equally by gender and various age groups,

as detailed in the demographic breakdown. A key aim was to assess the effectiveness of Dhikr Rateeb Siribee, a spiritual practice, in reducing anxiety among participants. Table 1 provides a summary of anxiety scale data, both before and after the intervention, for the experimental and control groups.

In the experimental group, the average pretest anxiety score was 59.90, which significantly dropped to 32.60 after the dhikr treatment. This finding suggests that the spiritual practice of dhikr had a noticeable impact in alleviating anxiety, as indicated by the t-test results, showing a highly significant difference between pretest and posttest scores. Conversely, the control group, which did not receive the dhikr intervention, showed an increase in anxiety, with the average score rising from 49.20 to 55.50. This contrast highlights the specific benefit of the dhikr intervention in the experimental group.

The normality and homogeneity tests further validated the robustness of the data, confirming that the anxiety reduction observed in the experimental group is generalizable to the broader MPTT-I population. The Independent Sample T-Test also reinforced the significant difference between the groups, with a t-test value of -11.045 ($P < 0.05$), confirming that the dhikr treatment reduced anxiety compared to the control group.

These results align with prior research on the therapeutic effects of dhikr. For instance, previous studies on dhikr relaxation therapy demonstrated its efficacy in reducing anxiety in both dyspepsia patients and chronic kidney disease patients undergoing hemodialysis. In both cases, the dhikr practice helped alleviate anxiety, similar to the findings in the present study.

From a psychological perspective, the dhikr sessions in this study were designed to involve the repetition of religious phrases and provide participants with a deeper understanding of the meanings behind the dhikr. This cognitive approach enhanced the participants' engagement, fostering a positive mindset and a sense of spiritual submission. This alignment between cognitive, affective, and spiritual elements helped the participants cultivate inner peace and optimism, critical components in mitigating anxiety. The sense of surrender to a higher power, as emphasized in Islamic teachings and supported by the Quranic verse (Surah

Ar-Ra'd: 28), played a pivotal role in reducing feelings of fear and uncertainty among the participants.

The study's findings underline the psychological and spiritual benefits of integrating religious practices like dhikr into anxiety management strategies, particularly for communities facing social rejection. By fostering a sense of spiritual calm and cognitive understanding, dhikr provided participants with a valuable coping mechanism to handle anxiety and stress, demonstrating the broader mental health benefits of such spiritual interventions.

Conclusion

Based on the results of data analysis and the previous discussion, it can be concluded that the effectiveness of the dhikr has a very significant difference between the anxiety of the MPTT-I congregation before being given the dhikr and anxiety after being given the dhikr with a t-test coefficient value of -11.045 and $P = 0.000$. This shows a decrease in anxiety among the congregations of the Indonesian Tauhid Sufism Study Council (MPTT-I).

Dhikrullah, namely remembrance of Allah at all times and opportunities by reading the word tayyibah as well as observing and contemplating natural phenomena, has been proven to provide significant benefits for humans both in terms of psychological or mental health and will ultimately have a positive influence in the form of increasing mental energy. The Dhikr can also bring inner peace, especially for those who carry out the dhikr activities with solemnity and sincerity solely because of Allah SWT. This proves that Islam has provided the right therapy for overcoming inner anxiety and mental turmoil so that with the dhikr of Allah, the heart and soul become calm and peaceful.

Based on the results of this study, the researchers can suggest several things, namely, MPTT-I Jema'ah should always try to maintain and improve the dhikr so that they are far from or free from anxiety in this life. They invite the public always to follow the dhikr and broadcast it in the Council for the Study of Tauhid Sufism. The dhikr has many benefits. Therefore, further research is necessary on the effects of the dhikr. This research has confirmed that good the dhikr has an effect on anxiety. Further researchers are expected to pay attention to and add other aspects such as

level of education, biology, social, gender, environment, physical condition, and age. So that the treasures of Islamic psychology are more developed.

Reference

Alegria, Margarita, Patrick E Shrout, Glorisa Canino, Kiara Alvarez, Ye Wang, Hector Bird, Sheri Lapatin Markle, and others. "The Effect of Minority Status and Social Context on the Development of Depression and Anxiety: A Longitudinal Study of Puerto Rican Descent Youth." *World Psychiatry* 18, no. 3 (2019): 298–307. <https://doi.org/10.1002/wps.20671>.

Algorani, EB, and V Gupta. *Coping Mechanism*. StatPearls Publishing, 2023.

Association, American Psychiatric. *Diagnostic and Statistical Manual of Mental Disorders*. 5th ed. American Psychiatric Publishing, 2013. <https://dsm.psychiatryonline.org/doi/book/10.1176/appi.books.9780890425596>.

Bäck, Emma A, Hanna Bäck, Annika Fredén, and Nils Gustafsson. "A Social Safety Net? Rejection Sensitivity and Political Opinion Sharing among Young People in Social Media." *New Media & Society* 21, no. 2 (2019): 298–316. <https://doi.org/10.1177/1461444818795487>.

Baldwin, David S, Ian M Anderson, David J Nutt, Christer Allgulander, Borwin Bandelow, Johan A den Boer, David M Christmas, and others. "Evidence-Based Pharmacological Treatment of Anxiety Disorders, Post-Traumatic Stress Disorder and Obsessive-Compulsive Disorder: A Revision of the 2005 Guidelines from the British Association for Psychopharmacology." *Journal of Psychopharmacology* 28, no. 5 (2014): 403–39. <https://doi.org/10.1177/0269881114525674>.

Baldwin, David S, and Emma K Brandish. "Pharmacological Treatment of Anxiety Disorders." In *The Wiley Handbook of Anxiety Disorders*, 865–82. Wiley, 2014. <https://doi.org/10.1002/9781118775349.ch43>.

Baxter, AJ, KM Scott, T Vos, and HA Whiteford. "Global Prevalence of Anxiety Disorders: A Systematic Review and

Meta-Regression." *Psychological Medicine* 43, no. 5 (2013): 897–910. <https://doi.org/10.1017/S003329171200147X>.

Cannon, Walter B. "Organization for Physiological Homeostasis." *Physiological Reviews* 9, no. 3 (1929): 399–431. <https://doi.org/10.1152/physrev.1929.9.3.399>.

Cawley, Rosanne, Eleanor E Pontin, Jade Touhey, Kate Sheehy, and Peter James Taylor. "What Is the Relationship between Rejection and Self-Harm or Suicidality in Adulthood?" *Journal of Affective Disorders* 242 (2019): 123–34. <https://doi.org/10.1016/j.jad.2018.08.082>.

Chrousos, George P. "Stress and Disorders of the Stress System." *Nature Reviews Endocrinology* 5, no. 7 (2009): 374–81. <https://doi.org/10.1038/nrendo.2009.106>.

Cohen, Sheldon, and Thomas A Wills. "Stress, Social Support, and the Buffering Hypothesis." *Psychological Bulletin* 98, no. 2 (1985): 310–57. <https://doi.org/10.1037/0033-2909.98.2.310>.

Destyani, A Z. "Pengaruh Terapi Zikir Terhadap Tingkat Kecemasan Pada Pasien Stroke." PhD Thesis, Universitas Islam Indonesia, 2018.

Elmer, Eddy M, Theo van Tilburg, and Tineke Fokkema. "Minority Stress and Loneliness in a Global Sample of Sexual Minority Adults: The Roles of Social Anxiety, Social Inhibition, and Community Involvement." *Archives of Sexual Behavior* 51, no. 4 (2022): 2269–98. <https://doi.org/10.1007/s10508-021-02132-3>.

Faiz, AN, Suroso Suroso, and Muhammad Farid. "21st Century Phobia: The Role of Loneliness and Social Anxiety in Adolescent Nomophobia." *IJOSMAS* 4, no. 5 (2023).

Garcia, Iliana, and Jean O'Neil. "Anxiety in Adolescents." *The Journal for Nurse Practitioners* 17, no. 1 (2021): 49–53. <https://doi.org/10.1016/j.nurpra.2020.08.021>.

Hanifah, Muyasaroh, Y H Baharudin, N N Fadjrin, T A Pradana, and M Ridwan. "Kajian Jenis Kecemasan Masyarakat Cilacap Dalam Menghadapi Pandemi Covid-19," 2020.

Hofmann, Stefan G, Anu Asnaani, Imke J J Vonk, Alice T Sawyer, and Angela Fang. "The Efficacy of Cognitive Behavioral Therapy: A Review of Meta-Analyses." *Cognitive Therapy and Research* 36, no. 5 (2012): 427–40. <https://doi.org/10.1007/s10608-012-9476-1>.

Hogeveen, Jeremy, and Jordan Grafman. "Alexithymia." In *Alexithymia*, 47–62, 2021. <https://doi.org/10.1016/B978-0-12-822290-4.00004-9>.

Jamaludin, Agus. "Konsep Zikir (Studi Analisis Al-Quran)." *Geneologi PAI: Jurnal Pendidikan Agama Islam* 7, no. 1 (2020): 29. <https://doi.org/10.32678/geneologipai.v7i1.2376>.

Johnson-Kwochka, Annalee V, Laura G Stull, and Michelle P Salyers. "The Impact of Diagnosis and Religious Orientation on Mental Illness Stigma." *Psychology of Religion and Spirituality* 14, no. 4 (2022): 462–72. <https://doi.org/10.1037/rel0000384>.

Koenig, Harold G, Dana E King, and Verna Benner Carson. *Handbook of Religion and Health*. Oxford University Press, 2012.

Mintarja, Endang. *Arifin Ilham: tarikat, zikir, dan Muhammadiyah*. Jakarta: Hikmah, 2004.

Nakazawa, Kanako, Takamasa Noda, Kanako Ichikura, Tomoko Okamoto, Yuji Takahashi, Takashi Yamamura, and Kazuyuki Nakagome. "Resilience and Depression/Anxiety Symptoms in Multiple Sclerosis and Neuromyelitis Optica Spectrum Disorder." *Multiple Sclerosis and Related Disorders* 25 (2018): 309–15. <https://doi.org/10.1016/j.msard.2018.08.023>.

Nurdin, Nasir. "Tanggapi Dinamika Di Masyarakat, Pengurus MPTT-I Aceh Beri Penjelasan Terbuka Ke Publik." *Serambinews.Com*, 2020.

Paragment, KI, JJ Exline, and JW Jones. "APA Handbook of Psychology, Religion, and Spirituality (Vol 1): Context, Theory, and Research." American Psychological Association, 2013. <https://doi.org/10.1037/14045-000>.

Puspita, Irma Maya, Annisa' Wigati Rozifa, and A'im Matun Nadhiroh. "Gambaran Kecemasan Dan Kepatuhan Remaja Putri Terhadap Kebiasaan Baru Di Masa Pandemi COVID-19." *JOMIS (Journal of Midwifery Science)* 5, no. 1 (January 29, 2021): 52–61. <https://doi.org/10.36341/jomis.v5i1.1492>.

Saefulloh, Aris. "Terapi Zikir Jamaâati Di Desa Luwoo Dan Tenggela Kabupaten Gorontalo." *Al-Ulum* 12, no. 1 (2012): 223–44. <https://journal.iaingorontalo.ac.id/index.php/au/article/view/98>.

Shodiq, MJ Ja'far. *Dahsyatnya Dzikir Amalan Ringan*. Yogyakarta: Indonesia Lafal Press, 2015.

Stallman, Helen M. "Health Theory of Coping." *Australian Psychologist* 55, no. 4 (August 1, 2020): 295–306. <https://doi.org/10.1111/ap.12465>.

Stuckey, Heather L., and Jeremy Nobel. "The Connection Between Art, Healing, and Public Health: A Review of Current Literature." *American Journal of Public Health* 100, no. 2 (February 2010): 254–63. <https://doi.org/10.2105/AJPH.2008.156497>.

Ulfiah, Ulfiah, N. Kardinah N. Kardinah, Fenti Hikmawati, and Ujang Rohman. "Metode Zikir Sebagai Upaya Keluarga Dalam Menghadapi Kecemasan Pandemi Covid-19." *LP2M UIN Sunan Gunung Djati*, 2020. <https://digilib.uinsgd.ac.id/30950/>.