Wudhu Spiritual Therapy Reduces Patient’s Emotional Risk of Violent Behavior

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Abstract: In the Limboto Health Centre working area, the behavioral changes of patients at risk of violent behavior were found to be that these patients had never received spiritual ablution therapy and were only given medication as prescribed or recommended. Mental disorders affect 970 million people worldwide. This study aims to determine whether ablution spiritual healing helps patients at risk of violent behavior in the Limboto Health Centre working area to control their emotions. Pre exploratory examination plan with one collection pretest-posttest configuration approach, the population of patients in danger of violent behavior in the working area of Limboto Community Group Welfare Centre, number of tests 15 people with complete examination procedures, information collected using the perception of signs and side effects sheet of patients in danger of violent behavior and tried using matched t-test measured parametric test. Results showed that before being given medication for otherworldly bathing treatment, all patients gave indications and side effects that generally appear in patients in danger of violent behavior. Still, after intercession, patients have the option to get mediation. control their feelings after being given bathing treatment given the consequences caused by paying attention to the symptoms and side effects. The p.value obtained from the paired t-test was 0.001 which is smaller than the value of 0.05. It was established in the Limboto Health Centre working area that the spiritual therapy of ablution helps patients at risk of violent behavior to control their emotions. Therefore, the health center is expected to support medical treatment to achieve more effective results in addition to using medical therapy which includes the administration of drugs

Keywords: emotions, risk of violent behavior, spiritual therapy, wudhu

INTRODUCTION

Psychological well-being is a state where individuals can grow genuinely, intellectually, deeply, and socially to develop their capacity, conquer pressure, be useful, and have choices to add to their local area. However, currently, the problem of psychological well-being is still an issue that needs special attention because the prevalence of mental health problems continues to increase. (Isnawati and Yunita, 2019). Based on information from the World Wellbeing Association (WHO) by 2022, 1 in every 8 people or 970 million people overall are living with mental disorders. By 2022, a common mental problem is that around 970 million people in the world will experience schizophrenia, with the proportion of female victims around 52.4% more than men around 47.6% (WHO, 2022). In Indonesia, the prevalence of families with mental disorders is 6.7 per million with the highest increase in cases in the Bali region at 11.1 per million and the least in the Riau Islands at 2.8 per million (Health Service of the Republic of Indonesia, 2018). Data from the Gorontalo Health Office in 2023 shows that the number of people with mental disorders in the Gorontalo region is 1,881 people, which is divided into each area, where Gorontalo City is 244 people, Gorontalo Government is 739 people, Bone Bolango Regime is 300 people,
Social isolation, auditory hallucinations, screaming, laughing to oneself, talking to oneself, anger, risk of violent behavior, fear, excessive suspicion, delusions, self-care deficits, excessive anxiety, and suicide risk are symptoms of mental disorders. Patients with serious and complex mental disorders characterized by cognitive, perceptual, emotional, and behavioral abnormalities may exhibit violent behavior as one of their symptoms (Tombokan et al., 2023). Behavioral changes such as hard pressure, threats, tense facial expressions, rudeness, embarrassment, difficulty calming down, frequent pacing, aggressiveness, overly enthusiastic content of speech, high voice, and excessive excitement are signs of abnormal behavior. Violence is another example of abnormal behavior. In addition, patients with violent behavior show muddled thinking in the context of conversation, poor problem-solving skills, decreased focus on time, place, and person, and anxiety (Septyaningtyas, 2019). The patient is unable to control his emotions which can harm himself and others, there is a change in the patient’s behavior and the risk of violent behavior. Therefore, to avoid the risk of violent behavior, correct implementation techniques are required, including otherworldly treatments based on the principles of the Qur’an and Assunnah, one of which is bathing.

Spiritual healing is one treatment option for patients at risk of violent behavior. Spiritual therapy is a form of therapy that is carried out to bring a person closer to their beliefs. Ablution spiritual therapy is one of the spiritual therapies taught. Ablution can help calm the mind, relax the body, reduce anxiety, stress, and anger, and stimulate the nervous system (Musleha et al., 2020). Ablution is one of the simple ways to unwind that you can do every day, even as part of your daily routine as a Muslim. Bathing is not just a method to purify oneself but also provides phenomenal care towards mental harmony. A sense of calm and peace is induced by splashing ablution water on various body parts. So that the brain will usually be restrained by the sensation of harmony. (Rahmawati, 2023). Ablution treatment in the other world is proven to have the ability to control the feelings of patients who are in danger of behaving violently, this is evidenced by research that has been done before, namely research (Musleha et al., 2022) which shows that after the mediation of deep bathing treatment for 6 meetings, there is a decrease in feelings in patients towards the danger of brutal behavior in Surakarta Mental Hospital.

Research led by Apriliani (2018) showed that after the provision of bath treatment for 10-30 minutes every day conducted for 4 days, the violent behavior of patients in RSJD might be reduced. Arif Zainuddin from Surakarta. The findings of a study conducted in the Kenari room of the Dadi Mental Hospital of South Sulawesi Province for one month (Ernawati et al., 2020) consisted of providing therapy twice a week. The measured experimental results obtained a p.value of 0.003 with α (0.05). Ha is accepted and H0 is rejected because p = 1. So for this situation, the implementation of otherworldly treatment on the patient’s ability to control the way of brutal behavior in the Kenari room of the Dadi Area Hospital of South Sulawesi. In the Limboto Health Centre Working Area, 15 patients were found to be at risk of violent behavior, based on preliminary studies. Based on the perception effect conducted by a specialist doctor on 5 patients who had signs and side effects of a fierce way of behaving, it was found that the patient began to show a fiery way of behaving, constantly angry, and the patient was angry to hit something. To vent, the patients also said that they felt like they were being controlled and could not rest. The scientists also led interviews with officials in charge of psychological health at the Limboto Community Group Welfare Centre and found that patients at risk of violent behavior were never given in-depth bathing treatment, patients were only given medication as recommended or advised.

METHODS

The research method used a pre-experimental design with a one-group pre-post-test design. This study conducted an estimation of the patient's feelings about the dangers of brutal behavior before being given bath treatment mediation using a perception sheet regarding signs and side effects and then re-estimated after bath therapy. This exploration was led on 12-16 December 2023, for 4 days. The population in this study was 15 people with malignant behavioral hazards in the working area of the
Limboto Community Group Welfare Centre. The sample used was patients taken from a population of 15 patients at risk of malignant behavior in the working area of the Limboto Community Group Welfare Centre. The researcher used non-probability sampling with a total sampling technique, where the sample was taken from the entire population that met the inclusion criteria (patients who were Muslim and patients who completed therapy), while patients who were not cooperative in therapy and patients who did not want to participate in the study were excluded. The tools used in this exploration were a perception sheet to see the ability to handle the patient’s feelings, the stakes of barbaric behavior, and the standard work technique (SOP) of deep bathing treatment carried out for 4 days.

Reciting the prayer before ablution, saying bismillah, washing both palms three times, rinsing the mouth three times, inhaling water into the nose three times, washing all visible parts of the face three times, washing both hands up to the elbows three times starting from the right and left three times starting from the left, washing the head three times, washing both feet three times starting from the right then the feet, and reciting the prayer after ablution are the first steps in this therapy. The test method used important information associated with the dependent variable, which was the ability to know the feelings of patients who were in danger of violent behavior because they had been straightened out by the doctor through the perception sheet of deep signs and side effects that appeared in patients, while the optional information was information about the number of patients who were in danger of violent behavior at the Limboto Community Group Welfare Centre. A paired t-test with a cut-off decision value of 0.05 was used in the bivariate analysis to determine the difference in patients' emotional control and risk of violent behavior related to signs and symptoms before and after receiving spiritual healing ablution. The univariate analysis examined the variables of patients' emotional control and risk of violent behavior before and after. Exploratory teachings carried out by scientists are educating consent by providing a consent structure to become a respondent, anonymity is done by not putting the respondent’s name on the observation sheet, confidentiality the researcher guarantees the confidentiality of the respondent, beneficence the research conducted can provide benefits to the respondent.

RESULTS

Characteristics of respondents of patients at risk of violent behaviour in the Limboto Health Centre working area is described at table 1.

Table 1. Characteristics of Respondents in the Limboto Health Centre Working Area

<table>
<thead>
<tr>
<th>Respondent Characteristics</th>
<th>Frequency (15)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>12</td>
<td>80</td>
</tr>
<tr>
<td>Female</td>
<td>3</td>
<td>20</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Late adolescence (17-25 years)</td>
<td>3</td>
<td>20</td>
</tr>
<tr>
<td>Early adulthood (26-35 years)</td>
<td>5</td>
<td>33.3</td>
</tr>
<tr>
<td>Late adults (36-45 years)</td>
<td>1</td>
<td>6.7</td>
</tr>
<tr>
<td>Early elderly (46-55 years)</td>
<td>6</td>
<td>40</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary School</td>
<td>11</td>
<td>73.3</td>
</tr>
<tr>
<td>Junior High School</td>
<td>4</td>
<td>26.7</td>
</tr>
</tbody>
</table>
The table 1 shows that most of the respondents are male, namely 12 respondents (80%). Most respondents were in early adulthood (46-55 years) as many as 6 respondents (40%) and about 1 respondent (10%) with late adulthood (36-45 years). The majority of respondents as many as 11 people (73.3%) had attended primary school before.

**Table 2. Emotion Control of Patients at Risk of Violent Behaviour Before Spiritual Ablution Therapy.**

<table>
<thead>
<tr>
<th>Emotion Control</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Minimum Score</th>
<th>Maximum Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre test</td>
<td>15</td>
<td>10.53</td>
<td>1.59</td>
<td>8</td>
<td>13</td>
</tr>
<tr>
<td>Post-test</td>
<td>15</td>
<td>7.00</td>
<td>1.60</td>
<td>4</td>
<td>9</td>
</tr>
</tbody>
</table>

Based on the table 2, the mean value of patients' ability to control emotions before Wudhu spiritual therapy was 10.53, with a standard deviation of 1.598, a minimum score of 8, and a maximum score of 13%. The mean value of patients' ability to control emotions following spiritual healing ablution is 7.00 with a standard deviation of 1.604, a minimum score of 4, and a maximum score of 9%.

**Table 3. Analysis of the Effect of Wudhu Spiritual Therapy in Controlling Emotions in Patients at Risk of Violent Behaviour in the Limboto Health Centre Working Area.**

<table>
<thead>
<tr>
<th>Cannulation pain</th>
<th>N</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>P-Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pretest</td>
<td>15</td>
<td>1.93</td>
<td>0.258</td>
<td>0.001</td>
</tr>
<tr>
<td>Posttest</td>
<td>15</td>
<td>1.13</td>
<td>0.352</td>
<td></td>
</tr>
</tbody>
</table>

The table 3 shows that the close-to-home control of patients before the other bath treatment is 10.53 with a standard deviation of 1.598 and the close-to-home control after the deep treatment bath is 7.00 with a standard deviation of 1.604 and gets a p-worth of 0.000 which means it means smaller than the α value of 0.05 so it tends to reason that there is an effect of the otherworldly bath treatment in controlling emotions in patients in danger of violent behavior in the area of functioning of the Limboto Community Group Welfare Center.

**DISCUSSION**

Emotion Control of Patients at Risk of Violent Behaviour Before Spiritual Ablution Therapy in the Limboto Community Health Centre Working Area the exploration results showed that before the deep bath treatment, the normal control ability near the home of patients at risk of violent behavior was 10.53 with the basic score obtained by the specialist being 8 and the most extreme score obtained by the analyst being 13. This is because based on the result of perception, it was realized that the patient's feelings were described with signs and side effects in the form of compromising behavior with a rate of 100 percent, the respondent swore with harsh words with a rate of 100 per cent, the patient spoke noisily with a rate of 100 per cent, the patient spoke cruelly with a rate of 47%, when near home the patient attacked others with a rate of 67%, the patient hurt themselves or others with a rate of 67%, patients damage the climate around them when they are private with a level of 60%, patients have a strong way of behaving or become wild with a level of 67%, when they are private many patients glare with a level of 60%, patients many patients have a sharp look with a level of 100%, most patients hands
are clenched with a level of 73%, jaws are clenched with a level of 47%, all patients have a red face with a level of 100% and many patients' body actions are firm when deep with a level of 67%.

The results of the search also showed that the highest score of deep control in terms of symptoms and side effects experienced was generally found in male respondents, namely 12 respondents, so it tends to look orientation, especially male respondents. less control close to home, compared to female respondents so that orientation There is a relationship with control close to home in patients in danger of malicious behavior. This is to the findings of Musleha et al. (2022) who found that on the first day of giving spiritual ablution therapy to patients at UPTD Puskesmas Metro who were at risk of violent behavior showed emotional symptoms such as harsh language, loud voices, aggressive/raging behavior, glaring, sharp stares, clenched hands, and rigid posture.

Supported by research findings Malfasari et al. (2020), it was found that due to the perception of signs and side effects of patients in danger of fierce ways of behaving in Tampan Mental Hospital, Riau Region, most were red and tense appearance, sharp gaze, clenched hands, clenched jaw, brutal discourse, high voice, compromising, throwing or hitting objects / other people.

The scientist assumes that the patient is in danger of a violent way of behaving, facing outrageous hatred and fear that is perceived to be harmful to him or because of a situation that he considers horrendous, so the patient exhibits coordinated behavior towards himself, specifically as signs and consequences of berating in unforgiving words, making loud noises, speaking abuse, self-harming, slander, glaring, the gaze becomes more sharpened due to anger, the jaw clenches, the face becomes red and the posture becomes rigid from the moment the patient's feelings are tense. In addition, when the patient is unable to control his emotions, he may exhibit behavior towards others, such as threatening or hurting others, and he may also exhibit behavior towards the environment, such as destroying things around him...

Emotional control of patients at risk of violent behaviour after piritual ablution therapy in Limboto Health Centre Working Area In-depth control of patients who were in danger of violent behavior after otherworldly bath treatment for 4 consecutive days showed that the typical score reduced from 10.30 to 7.00. This decrease in score occurred because some patients expressed intimidation with a level of 47%, some patients abused with harsh words with a level of 47%, and most patients spoke noisily with a level of 60%. While some patients spoke cruelly with a level of 47%, all patients did not pursue individuals. In another case, most patients hurt themselves or others at a level of 67%, some patients damaged the climate at a level of 40%, some patients acted forcibly or wildly at a level of 53%, some patients glared at a level of 40%, some patients had sharp eyes at a level of 53%, some patients had their hands clasped with clenched hands at a level of 47%, some patients had their jaws held at a level of 47%, all patients had red faces at a level of 100% and some patients had a firm posture at a level of 53%.

Based on the observation of signs and symptoms, it can be seen that the patients were able to control their emotions after receiving spiritual therapy of ablution. Bathing can switch off and also balance deep brain science so that you can think smoothly and again. Ablution can calm emotions, reduce anger, and ward off anger. Anger causes blood pressure to rise so that the heart has a greater ability to suck in blood. An angry person will have a red face because his face is covered in blood. Bathing will cool the face and nerves so that it lowers the pulse and makes feelings more stable (Amanullah, 2022).

The findings of this study are similar to Apriliani's (2018) study which found that patients reported feeling calm and able to control their emotions after undergoing ablution therapy for 10 to 30 minutes for four consecutive days. This is because patients have used ablution to control their anger. According to the findings of a recent study (Astuti et al., 2021), after four days of ablution water therapy, patients' moods improved, they felt calmer, their minds became calmer, their stress levels decreased, and their bodies became fresher and less tense.
Scientists believe that bathing can relax tense nerves, including relaxing the heart exhibition, which makes the patient feel more stable so that the patient gives indications and side effects with a controlled feeling, including less compromising behavior, less swearing with brutal words, less obvious commotion, less abrupt speech, less chasing others, less self-injury, less harm to the general climate or objects around the patient, less pushy behavior, less articulation, less sharp gaze, less hand grasping, less jaw grasping behavior, less red face and less tight posture after taking the otherworldly treatment bath for 4 consecutive days.

The results showed that the patient's emotional control before spiritual ablution therapy was 10.53 with a standard deviation of 1.598, and after spiritual ablution, therapy was 7.00 with a standard deviation of 1.604 with a p-value of 0.000. With this information, it can be concluded that the emotional control of patients at risk of violent behavior both before and after receiving spiritual ablution therapy; the mean value before and after decreased to 3.53. Based on these findings, patients were unable to control their emotions before receiving spiritual healing ablution, as evidenced by signs and symptoms such as aggressive behavior or tantrums, clenched jaws, flushed faces, rigid postures, threatening behavior, swearing with harsh words, talking loudly, speaking harshly, swearing with harsh words. This is evidenced by signs and symptoms such as aggressive behavior or tantrums, talking loudly, speaking rudely, attacking others, hurting oneself or others, and damage to the environment. Then, all patients were able to control their emotions after receiving the spiritual therapy of ablution, as evidenced by the less obvious signs and symptoms. This indicates a massive change and improvement in the patient's ability to cope with their feelings of being threatened with barbaric behavior before being given the deep bathing treatment and after being given the otherworldly bathing treatment.

As it incorporates Islamic psychotherapy through the use of water as a medium, the spiritual therapy of ablution can help reduce anger in patients at risk of violent behavior. Water can be a calming substance in the body, water has a calming substance if the water temperature is the same as the skin temperature, but if the water temperature is sequential it will cause an encouraging difference, this is the excitement that will strengthen the focus of needle therapy in each bath development. (2017 Yosep et al). Some points are directly related to the nerves and are found in every movement of the ablution members. These points are called acupuncture points because they are very sensitive to stimulation and can be found anywhere from head to toe. When presented for enhancement, these focuses will be very helpful and make a big difference. The feeling can be through washing, rubbing, sifting, and stroking, this recalls the development during bathing. There are 493 focuses on the body parts that are presented with water during bathing, considering 84 focus on the face, 95 focus on the hands, 64 focus on the head, 125 focus on the ears, and 125 focus on the feet. (Wulandari et al., 2024)

The findings of this study are comparable to the research of Wardani et al. (2020) who found that spiritual ablution therapy at Surakarta Mental Hospital was successful in calming patients at risk of violent behavior. According to research (Rani and Sulisetyawati, 2021), specifically the bathing arrangement is a powerful otherworldly treatment given to patients in danger of violent behavior at RSJD Dr. Arief Zainuddin of Surakarta. In addition, research conducted by (Rahmawati, 2023) was also strengthened. On the first day of implementation, nine criteria (or 37.5%) were met. On the next day after being given a bath treatment, there was a decrease in signs and side effects of gambling in an abominable way from 9 (37.5%) to 7 (29.1%), and on the last day, there was a decrease in symptoms and side effects of gambling in an abominable way. reduced signs and side effects of the danger of violent behavior from 7 (29.1%) to 4 (16.6%). Patients with aggressive or angry behavior, glaring, sharp gaze, clenched jaw, red face, and stiff posture can be hit on acupuncture points, namely 84 points on the face, 95 points on the hands, 64 points on the head, 125 points on the ears, and 125 points on the feet, which are directly related to innervation. If stimulated, these points can stimulate bioenergy which is useful in building equality or balance in the body (homeostasis).
CONCLUSIONS

The results of the review showed that before being given medication for otherworldly bathing treatment, all patients gave indications and side effects that generally appear in patients in the danger of fierce ways of behavior, but after intercession patients have the choice to get medication. control his feelings after being given bathing treatment given the consequences caused by paying attention to the symptoms and side effects. It is suspected that there is an effect of Wudhu Spiritual Therapy in controlling feelings in patients who are threatened with risk behavior in the working area of the Limboto Community Group Welfare Centre. For the health center agency, this examination is expected to provide data and reference to the local area welfare focus to determine appropriate strategies involving deep bathing treatment as a treatment to determine the feelings of patients who are in danger of welfare behavior in the area of functioning of the Limboto Community Group Welfare Centre, as well as utilizing prescription treatment, especially controlling drugs for otherworldly treatment. These ablutions can help medical treatments produce better results.

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