

## The Effectiveness of Dhikr Therapy as a Non-Pharmacological Intervention to Reduce Anxiety in the Elderly: Literature Review

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**ABSTRACT**

**Background & Objective:** Anxiety is one of the most common psychological problems experienced by the elderly, influenced by physical decline, chronic illness, and reduced social support. Spiritual interventions, such as dhikr therapy, are increasingly considered as complementary strategies to improve psychological well-being. This study aims to systematically review the effectiveness of dhikr therapy as a non-pharmacological intervention in reducing anxiety among the elderly. **Method:** A systematic literature review was conducted using the PRISMA approach. Articles were searched through Google Scholar, PubMed, ScienceDirect, and Publish or Perish with the keywords "dzikir therapy," "elderly," and "anxiety reduction." Inclusion criteria were journal articles in English or Indonesian, published in the last five years, with clear methodology. Fourteen studies were included in the analysis. **Result:** Most studies employed quasi-experimental and pre-posttest designs with samples ranging from 10 to 50 elderly participants. The findings consistently demonstrated that dhikr therapy effectively reduced anxiety levels, improved psychological well-being, self-esteem, sleep quality, and overall quality of life. In addition, dhikr therapy contributed to better blood pressure control and reduced depression in elderly with comorbid conditions. **Conclusion:** Dhikr therapy is an effective, simple, and low-cost non-pharmacological intervention to reduce anxiety and enhance mental health among the elderly. Further studies with larger sample sizes, randomized controlled designs, and physiological

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measurements are recommended to strengthen the evidence base.

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## Introduction

Old age is a natural phase in the human life cycle that cannot be avoided and is inevitably experienced by every individual. According to Indonesian Law No. 13 of 1998 concerning the Welfare of the Elderly, older adults are defined as individuals, both male and female, who have reached the age of 60 years or older (Wisnusakti & Sriati, 2021). According to the classification established by the World Health Organization (WHO), old age is divided into several categories, namely middle age ages 45–59 years, elderly ages 60–74 years, old ages 75–90 years, and very old ages for individuals over 90 years old (Siregar et al., 2023).

In 2020, it was estimated that there were 727 million people aged 65 and over worldwide. This number is projected to more than double by 2050, reaching over 1.5 billion people. The percentage of elderly in the global population is expected to increase from 9.3 percent in 2020 to 16.0 percent in 2050. By the middle of this century, one in six people in the world will be aged 65 and above (United Nations, 2020). Based on data obtained from the Central Statistics Agency of East Kalimantan Province, the elderly population in 2023 was 336,440 people (BPS, 2023).

In general, a person undergoing the aging process experiences various biological, psychological, social, and spiritual changes that affect their overall quality of life. The natural aging process, combined with the burden of chronic diseases, physical limitations, and reduced social support, often triggers psychological problems such as stress, anxiety, depression, loneliness, and sleep disturbances (Rosyidah et al., 2023).

In the context of the elderly, spiritual needs become an inseparable aspect in efforts to maintain psychological well-being and quality of life, as spirituality plays a role in providing inner peace, life meaning, and coping with the inevitable changes in life (Simbolon & Simbolon, 2023).

One form of spiritual intervention that has received attention is dzikir therapy. Dzikir, as an Islamic religious practice involving the repetition of praises to God, specific readings, and inner reflection, is believed to have relaxation effects, reduce sympathetic nervous system activation, and enhance a sense of calm and emotional control. Although the detailed mechanisms still need further investigation, some recent empirical studies indicate that dzikir therapy can have a positive impact on certain indicators of elderly well-being (Rosyidah et al., 2023).

Although several studies have discussed the benefits of dhikr therapy for the elderly, there are still limitations in the existing literature. Most studies were conducted with relatively small sample sizes, using a pre-post design without a control group, and have not compared the intervention results with other non-pharmacological therapy methods. Additionally, the mechanisms of dhikr therapy in affecting the psychological, spiritual, and physiological dimensions of the elderly have rarely been studied comprehensively. These limitations indicate a knowledge gap that needs to be bridged through more systematic literature reviews. Therefore, the preparation of this literature review is expected to integrate existing scientific evidence, assess the strengths and weaknesses of previous studies, and provide a basis

for recommendations for the development of nursing practice as well as future research regarding the effectiveness of dhikr therapy in the elderly.

Thus, the purpose of this literature review is to examine the effects of dhikr therapy on the elderly as a non-pharmacological intervention in improving the mental health of the elderly, as well as to provide a deeper understanding of the mechanisms of dhikr and the conditions or situations most suitable for applying this intervention to achieve more optimal results.

## Objective

The objective of this literature review is to provide a comprehensive and systematic evaluation of the effectiveness of dhikr therapy as a spiritual, non-pharmacological intervention in reducing anxiety among the elderly. This review not only seeks to integrate and critically synthesize the body of scientific evidence published within the last five years, but also to examine the broader psychological, physiological, and spiritual outcomes that have been reported in relation to dhikr practices in geriatric populations.

In addition, the study aims to identify the methodological strengths and weaknesses of previous research, highlight potential gaps in the current knowledge base, and analyze the extent to which dhikr therapy contributes to improvements in mental health, self-esteem, sleep quality, and overall quality of life in older adults. By consolidating these findings, this literature review further intends to generate practical recommendations that can support the development of evidence-based nursing interventions, while also outlining directions for future studies, particularly those employing larger sample sizes, randomized controlled trials, and standardized intervention protocols. Through these efforts, the review aspires to advance the understanding of dhikr therapy not only as a cultural and religious practice but also as a scientifically informed approach to holistic elderly care.

## Method

This study employed a systematic literature review design guided by the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) framework. The purpose of this method was to collect, evaluate, and synthesize relevant scientific evidence regarding the effectiveness of dhikr therapy as a non-pharmacological intervention to reduce anxiety among the elderly.

The literature search was carried out through four electronic databases, namely Google Scholar, PubMed, ScienceDirect, and Publish or Perish, using the keywords "dhikr therapy," "elderly," "anxiety," and "non-pharmacological intervention."

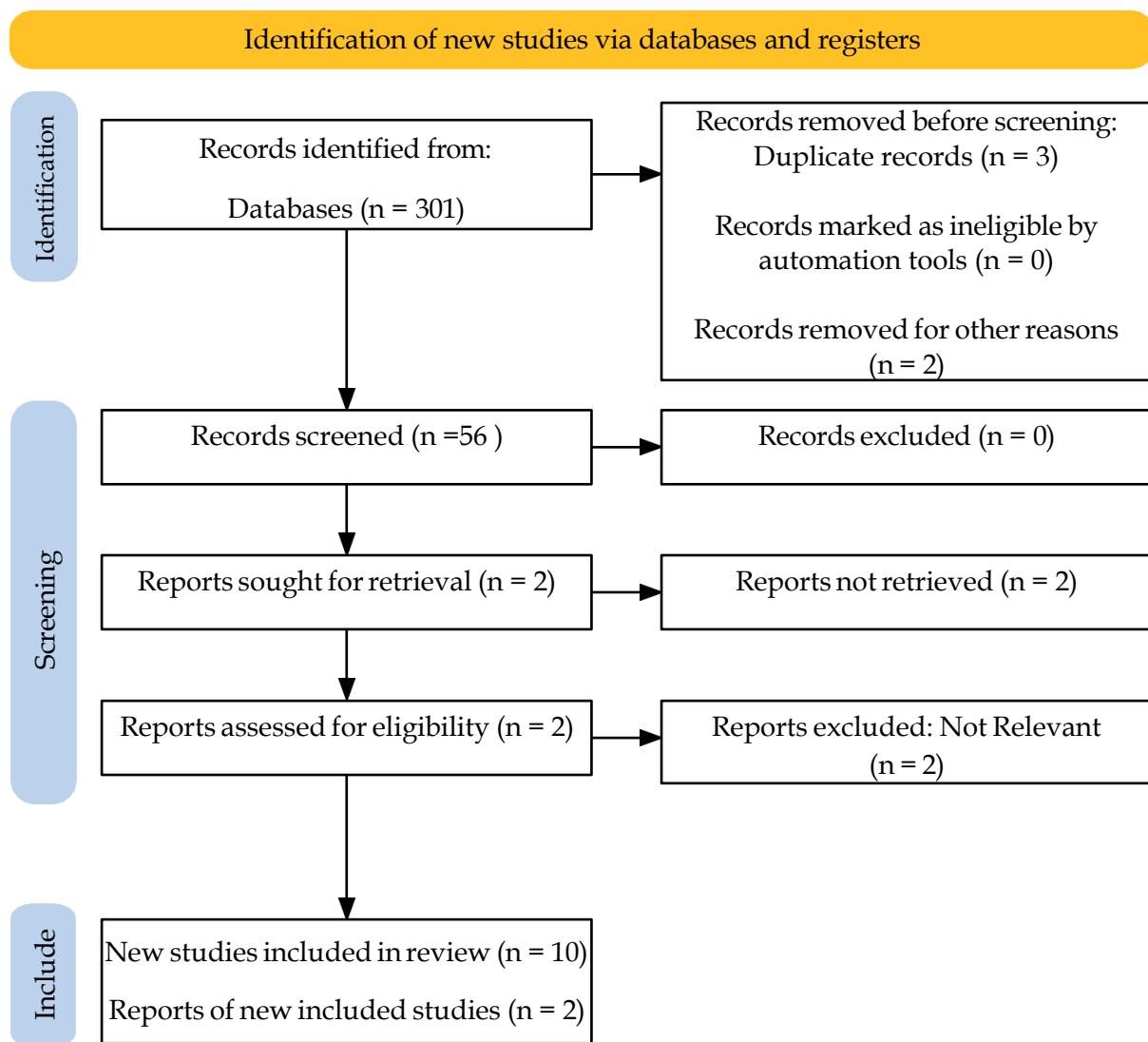
The inclusion criteria consisted of journal articles published within the last five years (2020–2025), written in English or Indonesian, having a clear research methodology, and discussing the effect of dhikr therapy on psychological conditions among the elderly. The exclusion criteria included studies not involving elderly participants, irrelevant topics, articles without comparable results, or those unavailable in full text.

The article selection process followed the PRISMA, including identification, screening, eligibility, and inclusion stages. From an initial total of 301 articles, 56 were screened based on title and abstract, and finally 10 studies met the inclusion criteria and were included in the review.

Each study was assessed for methodological quality using the JBI Critical Appraisal Checklist, ensuring that only studies meeting acceptable quality standards were included. The extracted data were analyzed using a descriptive thematic approach, grouping findings according to the influence of dhikr therapy on various psychological aspects of the elderly, such as anxiety, stress, depression, and quality of life.

The articles were thoroughly reviewed to ensure their suitability for the research objectives. Articles that did not have comparable research results or used methods irrelevant to this research topic were excluded. The articles that passed the selection were used as the basis for compiling this literature review. In this study, 14 journal articles were used, which had been screened and considered relevant to the research topic intended to be conducted.

**FIGURE 1.** Article selection process



## Results

The results from the search across four databases yielded 301 records, with 300 registrations and 3 duplicates deemed ineligible, and 2 removed for other reasons. Subsequently, 56 were screened and none were rejected; further, 2 were requested to be included and 2 were not included. The eligibility assessment continued with 2 excluded for being irrelevant and 2 new studies added to the review. The total number

of new studies included: 10 new research reports; 2 could be concluded, although there were irrelevant reports among those requested, but in total, eleven new studies were included in the review during the identification and screening process, resulting in articles aligned with the research objectives.

TABLE 1. Article Summary

Article	Design	Sample	Data Collection Procedure		Results
			Results		
(Abdi Kamaruzzama n and Ulfah Hidayati, 2024)	Mixed-methods, quasi-experimental + semi-structured interviews	N = 5	Geriatric Anxiety Scale Questionnaire & in-depth interviews.	Dhikr therapy + progressive muscle relaxation	significantly reduced anxiety; 60% experienced a decrease from moderate to mild, improved sleep, and significant social support.
(Siti Hikmah, Aisyah, Dinda Amalia Dewi, Nanda Ridwan Setiyaji, 2024)	Qualitative with Focus Group Discussions (FGDs)	N = 5	FGDs, interviews, dhikr therapy intervention.	Dhikr therapy	reduces anxiety, fear, and sadness, increases optimism, feelings of patience, gratitude, and spiritual closeness.
(Heny Nurmayunita, Amin Zakaria, Hengky Irawan, 2022)	Pre-experiment, One-group pretest-posttest	N = 32	Psychological Well-being Scale (SPWB) questionnaire, Wilcoxon test.	Self-Esteem Scale (RSES) Questionnaire	There is a significant effect of dhikr therapy on the psychological well-being of the elderly (p=0.000).
(Heny Nurmayunita and Amin Zakaria, 2021)	Pre-experiment, One-group pretest-posttest	N = 21	Rosenberg Self-Esteem Scale (RSES) Questionnaire	After dhikr therapy, the majority of respondents experienced a decrease in anxiety to mild/no anxiety.	There is a significant effect of dhikr therapy on the self-esteem of the elderly (p=0.000).
(Refina Anggraini and Kartinah, 2024)	Case study	N = 10	Interviews & Observations, HARS Instrument.		
(Mawardi, 2024)	Pre-experiment, One-group pretest-posttest	N = 38	HARS Questionnaire, Observation of the implementation of dhikr therapy.	Dhikr therapy	reduced the average anxiety of the elderly (p=0.000).
(Jumriah, Muh. Nadjib Bustan and Fatmah Afrianty Gobel, 2025)	Quasi-experimental, Pretest-Posttest Control Group Design	N = 30	Blood pressure & stress questionnaire, Wilcoxon test.	Dhikr therapy	significantly reduced blood pressure and stress in elderly with hypertension (p=0.000).

(Nur and Oktaria, 2022)	Azizah Lenny	Pre-experiment, one group pretest-posttest	N = 32	Geriatric Depression Scale (GDS) questionnaire, Wilcoxon test.	Dhikr significantly reduced depression in the elderly (p=0.000).
(Yayang Muhammad Shidiq and Sitti Rahma Soleman, 2023)		Descriptive, case study	N = 2	Pittsburgh Sleep Quality Index (PSQI) questionnaire, 7-day dhikr intervention.	Dhikr therapy reduced sleep quality scores (from poor to better), improving sleep quality in the elderly.
(Rosmin Ilham, Hamna Vonny Lasanuddin and Miranti Abdullah, 2023)		Qualitative descriptive	N = 5	Interviews, observations, physical examinations, documentation.	Before the intervention, 80% of elderly people experienced moderate stress and 20% experienced severe stress; after dhikr therapy, 80% experienced mild stress and 20% experienced moderate stress.
(Febrina Henny, 2021)		Pre-experiment, one-group pretest-posttest	N = 21	Rosenberg Self-Esteem Scale (RSES) questionnaire	There was a significant effect of dhikr therapy on the self-esteem of the elderly (p=0.000).
(Siti Aminah Waluyo, Puji Lestari, Nabila Aprillia, 2022)		Quasi experiment, One Group Pretest-Posttest	N = 34	interviews using the WHOQOL-BREF questionnaire	Dhikr therapy significantly improved the quality of life of the elderly (p=0.000), with improvements in the physical, psychological, social, and environmental domains.

## Discussion

The findings of this systematic literature review highlight the significant role of dhikr therapy as a spiritual-based intervention in reducing anxiety and promoting mental health in the elderly. Anxiety in older adults is often associated with the natural aging process, including declining physical function, chronic illness, and social isolation. These factors increase vulnerability to psychological distress, making non-pharmacological interventions essential in nursing practice.

Dhikr, an Islamic spiritual practice involving the repetition of God's names or praises, provides a calming effect through rhythmic recitation, breathing regulation, and focused mindfulness. This process has been shown to activate the parasympathetic nervous system, leading to relaxation, decreased heart rate, and lowered stress hormone levels. From a psychological perspective, dhikr enhances coping ability, increases optimism, and fosters a sense of spiritual closeness that reduces feelings of fear and uncertainty.

Several studies included in this review consistently demonstrated positive outcomes. For example, reported that dhikr therapy significantly improved psychological well-being, found that dhikr reduced anxiety symptoms measured by HARS. Similarly, showed its physiological benefit in reducing blood pressure and stress levels among elderly with hypertension. These findings support the notion that dhikr therapy not only improves psychological outcomes but also contributes to better physical health through stress regulation.

In terms of self-esteem and social support, highlighted that dhikr increased self-worth and strengthened social bonding within religious communities. This is crucial, as elderly individuals often experience a decline in self-esteem due to dependency on others. Dhikr practice provides a meaningful spiritual engagement that enhances their sense of dignity and value.

The review also indicates that dhikr positively impacts sleep quality. Sleep disturbances are common in the elderly, often linked to anxiety and depression. By promoting inner peace and reducing cognitive hyperarousal, dhikr therapy enhances restfulness and sleep efficiency. This demonstrates its multidimensional benefit on both mental and physiological domains.

## Conclusion

This literature review concludes that dhikr therapy is effective in reducing anxiety and improving overall mental health among the elderly. Beyond psychological benefits, it also enhances self-esteem, sleep quality, and physiological outcomes such as blood pressure regulation. Given its simplicity, accessibility, and cultural relevance, dhikr therapy can be recommended as a complementary non-pharmacological intervention in geriatric nursing practice.

Future research should focus on randomized controlled trials with larger samples, standardized intervention protocols, and integration of objective physiological measures to provide stronger empirical evidence. Additionally, comparative studies with other mindfulness or relaxation techniques could broaden understanding of its relative effectiveness.

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