



**ORIGINAL RESEARCH PAPER**

**Nursing**

**THE INFLUENCE OF DZIKIR SPIRITUAL THERAPY ON THE SELF-ACCEPTANCE PHASE OF BREAST CANCER PATIENTS IN REGIONAL GENERAL HOSPITAL DR. RASIDIN PADANG**

**KEY WORDS:** Dzikir Spiritual Therapy, Acceptance Phase, Breast Cancer Patients

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**ABSTRACT**

Breast cancer is a malignancy originating from glandular cells, glandular channels and supporting breast tissue, not including breast skin. The purpose of this study was to determine the effect of dzikir spiritual therapy on the phase of self-acceptance in breast cancer patients. This type of research is Pre experiment with One group pre-test and post-test design, the population of all breast cancer patients and samples was 16. The data were analyzed by Univariate data analysis with frequency distribution and bivariate with t-test dependent test (paired t-test). The results of the study before giving dzikir spiritual therapy to the acceptance phase in breast cancer patients were and the average after giving dzikir therapy. There was an effect of giving dzikir spiritual therapy to the acceptance phase in breast cancer patients. The conclusion is that there is the effect of giving dzikir spiritual therapy to the acceptance phase in breast cancer patients.

**INTRODUCTION**

Breast cancer is a malignancy originating from glandular cells, glandular channels and supporting breast tissue, not including breast skin (Depkes, 2009). In addition to causing physical changes in breast, cancer can also cause drastic changes in psychological patients, the diagnosis of breast cancer in patients who require the sufferer to undergo treatments with side effects, the impact of hospitalization is given to the lives of patients at large, things like this might affect self-acceptance, one of which is spiritual psychotherapy or psychoreligious therapy. At present, the development of therapy in the world of health has developed towards a religious (psychoreligious) approach. One of the religious therapies is the implementation of Asmaul Husna dhzikir with audiovisual media. Remembrance is a way to get closer to God by remembering Allah, by doing dhikr makes the heart peaceful, calm and peaceful, creating adaptive coping, reducing stress.

**THE IMPORTANCE OF THIS RESEARCH**

It is expected that health workers, especially nursing staff can develop in the management of the phase of loss, especially the acceptance phase in breast cancer patients. Besides, it is expected that the public can use it as a reading material to deal with breast cancer patients.

**RESEARCH PURPOSES**

1. It aimed to study the effect of dzikir spiritual therapy on the acceptance phase in breast cancer patients.
2. It aimed to implement the effect of giving dzikir spiritual therapy to the acceptance phase in breast cancer patients.

**RESEARCH HYPOTHESIS**

The research hypothesis was that there was an effect of giving dzikir spiritual therapy to the acceptance phase in breast cancer patients.

**SUBJECT AND METHOD**

**RESEARCH DESIGN :**

This type of research is Pre Experiment with one group pre-test and post-test design, namely research that gives treatment in the form of Asmaul Husna remembrance therapy in breast cancer patients.

**RESEARCH PLACE**

This research was carried out in the surgical ward of the General Hospital of Dr. Rasidin Padang.

**SUBJECT**

The sampling technique used in this study was purposive

sampling. The number of samples was 10 respondents. The data were analyzed with statistical tests and sample inclusion criteria. The sample was breast cancer patients treated in the operating room at the General Hospital of Dr. Rasidin Padang.

**DATA COLLECTION TOOL QUESTIONNAIRE I:**

The researcher met the respondent and explained the purpose and benefits of the study. Then, she gave informed consent. Respondents agreeing to be respondents in the study, are asked to sign an informed consent sheet. Asmaul Husna therapy was conducted in the respondent's inpatient ward. The researcher conducted a pretest by giving respondents the Unusual Self Acceptance Questionnaire (USAQ) questionnaire sheet assisted by the researcher.

**TREATMENT**

Respondents listened to Asmaul Husna through the earphones/headsets of the video and saw Asmaul Husna's translation and they were guided by researchers to live up to and fully believe in the translation. The respondents were asked to recite Asmaul Husna slowly and slowly. Asmaul Husna began listening for 10 minutes. This activity was repeated for 3 days every morning.

**QUESTIONNAIRE II:**

Researchers conducted a post-test by giving respondents Unusual Self Acceptance Questionnaire (USAQ) questionnaire sheets which were helped to be filled out by researchers on the third day. Most of the respondents at the time of observation felt happy and comfortable with the provision of Asmaul Husna's dzikir spiritual therapy.

**VALIDITY AND RELIABILITY**

The questionnaire used in the research got a validity and reliability test before it was distributed to respondents. Then, the result of the test was used to reformulate the questionnaire that would be used as a final product of questionnaire.

**ETHICAL CONSIDERATIONS**

This study has several ethics in research that aims to ensure the confidentiality of respondents' identities, protect and respect the rights of patients in participating in research. The researcher gave consent sheets before the study, without name, confidentiality of the willingness and benefits of the treatment of spiritual dzikir therapy for breast cancer patients.

**EARLY RESEARCH**

The results of the study of respondents totaling 10 people had not been able to show good self-acceptance after suffering from breast cancer, they stated they could not accept the fact

that something had changed with her breasts, felt fear of changes in their breasts, felt fear that there would be changes in their husband after suffering breast cancer. The also felt ashamed of friends and the environment, feeling anxious and stressed hoping that if they did not get cancer. They have never known audio dzikir Asmaul Husna therapy to help overcome psychological problems that arise after suffering from cancer, they only focus on physical treatment.

**RESEARCH RESULT**

Based on the results of research conducted on November 5 to November 30 2018 with spiritual therapy dzikir as an independent variable and self-acceptance phase as the dependent variable with a sample of 10 people and the data processed by univariate and bivariate analysis, the results of the study are as follows:

**Table 4.1 Characteristics of Respondents by Age, Occupational Status, Marital Status, Duration of Pain, Surgery at the Hospital Dr.Rasidin Padang in 2018**

No	Characteristics	f	%
1	<b>Age</b>	3	30
	Early teenagers	1	10
	Early adulthood	2	20
	Late adulthood	1	10
	Early elderly	3	30
	Late elderly		
2	<b>Job Status</b>	4	40
	Worked	6	60
	Unworked		
3	<b>Marital Status</b>	4	40
	Married	6	60
	Unmarried		
4	<b>Length of sickness</b>	7	70
	Less than 1 year	3	30
	More than 1 year		
5	<b>Surgery</b>	7	70
	Treated	3	30
	Untreated		

Based on table 4.1 it can be seen that less than half (30%) of respondents are in their early teens and late elderly, more than half (60%) of respondents are unemployed, more than half (60%) of marital status respondents are unmarried, More than half (70) % respondents were sick for less than 1 year and more than half (70%) of respondents had surgery at Dr.Rasidin District Hospital 2018

**Table 4.2 Effects of Giving Spiritual Therapy of Dhikr Against Self Acceptance Phase in Patients with Breast Cancer in RSUD Dr.Rasidin Padang in 2018**

Variabel	Mean	Std Deviasi	Std Error Mean	95% CC of the difference		t	Sig
				upper	Lower		
<b>Pre test</b>	12,900	6,420	2,030	8,308	17,492	6,355	0,000
<b>Post test</b>							

Table 4.4 shows that the difference in the average self-acceptance of respondents in breast cancer patients in RSUD Dr. Rasidin Padang in 2018 before and after giving dzikir spiritual therapy was 12,900 with a standard deviation of 6,420. The statistical test results were obtained that p Value 0.000 means there is an effect of giving dzikir spiritual therapy to the phase of self-acceptance in breast cancer patients.

**DISCUSSION**

**1.AVERAGE PHASE OF SELF-ACCEPTANCE BEFORE GIVING SPIRITUAL THERAPY DHIKR IN BREAST CANCER PATIENTS**

The results of this study indicate that the average self-acceptance phase of respondents suffering from breast cancer in RSUD Dr. Rasidin Padang in 2018 before giving dzikir spiritual therapy was 56.80 with a standard deviation of

6.909, the highest self-acceptance was 72 and the lowest one was 48.

This study is in line with the research of Antry, A. R (2017) about the Effect of Dzikr Therapy on Self Acceptance in Elderly Social Services UPT Blitar Tulung Agung, where the results of the study found the average respondent's self-acceptance phase (self-acceptance) ) before giving dzikir therapy 104, 34. Self-acceptance (Self-acceptance) is an individual's ability to be able to accept the existence of oneself. The results of an analysis or assessment of yourself will be the basis for an individual to be able to decide in the context of acceptance of one's existence. Self-acceptance can be interpreted as an attitude of looking at oneself as it is and treating it well accompanied by a sense of pleasure and pride while continuing to strive for its progress (Matthews, 2011. According to an analysis of the researcher, it is known that the average respondent's answers related to the phase of self-acceptance (self acceptance) before the dzikir spiritual therapy is low at 56.80. This can be caused due to breast cancer. In addition to causing physical changes, breast cancer can also cause drastic changes in the patient's psychology that requires the sufferer to undergo treatments with the side effects resulting from the treatment, the impact of hospitalization and the impact that is given to the patient's life at large, things like this might be able to affect his acceptance. This is supported by the results of a questionnaire analysis that says that 50% of respondents disagree with statement, even though they are sick, still loved by those closest to them, 50% of respondents agree with statement, sometimes I feel myself as the saddest in the world, and 50% doubt over the statement, after suffering from illness I compared my self-esteem to the judgment of others. The lack of self-acceptance can be caused by the age of the patient where 30% of young adults and late elderly age where at this age patients have a stage of denial and anger so they have not reached the stage of self-acceptance... Furthermore, 60% of respondents do not work, 60% of respondents are not married, 70% have been suffering from illness for less than 1 year, and 70% of clients have surgery and this is also one of the factors that causes low self-acceptance.

**2.AVERAGE SELF-ACCEPTANCE (SELF-ACCEPTANCE) AFTER DZIKIR THERAPY IN BREAST CANCER PATIENTS**

The results of this study indicate that the average self-acceptance phase of respondents suffering from breast cancer in RSUD Dr. Rasidin Padang in 2018 after giving dzikir spiritual therapy was 69.70 with a standard deviation of 5.165, highest self-acceptance (79) and lowest 59.

The results of this study are in line with the research of Antry, AR (2017) on the Effect of Dhikr Therapy on Self Acceptance in Elderly Social Services UPT Blitar Tulung self-acceptance (self-acceptance) after giving dzikir therapy 131, 25. Self-acceptance is a stage The last is when we can accept the separation, even though it is not real happiness but the fact that we are aware that all will be well. This is the last stage the individual arrives at the condition of a living being. But lost the opportunity to start something new, to rebuild and learn new experiences. Pretending sometimes helps us get through times of loss. Smiling at others and laughing even though we think it's not funny but it can bring back happiness. Do everything just for fun. Increased acceptance of respondents is supported by the results of a questionnaire analysis in which 60% of respondents answered agree with the statement when I received a negative assessment of my current condition, I consider it an opportunity to improve my behavior and appearance and 60% of respondents answered agree with the statement have life goals that I hope I can still achieve, and 50% of respondents answered disagree to the statement I think is very bad to underestimate people who are sick like me.

### 3. THE EFFECT OF DZIKIR SPIRITUAL THERAPY ON THE PHASE OF ACCEPTANCE (SELF-ACCEPTANCE) IN BREAST CANCER PATIENTS

The results of this study indicate that differences in the average self-acceptance (self-acceptance) of respondents in breast cancer patients in Dr. Rasidin Padang in 2018 before and after giving dzikir spiritual therapy was 12,900 with a standard deviation of 6,420. The statistical test results obtained p Value 0.000 means that there is an effect of giving dzikir spiritual therapy to the phase of self-acceptance in breast cancer patients.

The influence of dzikir spiritual therapy on self-acceptance on the intervention of the first day and the third day, where on the first day the respondent's knowledge had an average of 56.80 and the third day on average increased to 69.70. This research is in line with research conducted by Antry, A. R (2017) concerning the Effect of Dhikr Therapy on Elder Self Acceptance at UPT Blitar Elderly Social Services in Tulung Agung, explained that the results of the study showed the results of t-test with  $Asymp. Sign. p = 0.015$ . means there is the effect of dhikr therapy on self-acceptance in the UPT Blitar Tulung Agung elderly social services. In breast cancer patients continuing life is not a form of betrayal, we cannot live for someone who is no longer with us. Often the individual experiences several stages repeatedly alternating between two or more stages which then return to one stage for several times before completion at these stages. Significantly he will complete these stages through the process. The grief process is very personal and is not rushed or extended. He should be aware that stages = stages will be passed until the acceptance process has been reached. Psychoreligious therapy is a form of psychotherapy that combines a modern mental health approach and a religious/religious aspect approach which aims to improve coping /problem-solving mechanisms (Yosep, 2010). WHO has determined the spiritual element (religion) as one of the 4 elements of health. The four elements of health are physical health, psychological health, social health and spiritual health (Hawari, 2008). Asmaul Husna dhikr contains deep meaning, has the power of relaxation that can reduce stress, raises confidence and optimism, so that someone is able to accept reality, cause strong control of self, can interpret life's events positively, not be easily angry, and believe that there is something regulate every event that happens in the universe (Bogar & Killacky, 2016). According to the analysis of researchers, after spiritual dzikir therapy is done it is expected that breast cancer patients can accept themselves as they are. In this study, it is known that there is an influence of the dzikir spiritual therapy on the self-acceptance phase in breast cancer patients. This is because self-acceptance increases after the dzikir spiritual therapy performed on breast cancer patients namely dzikir Asmaul Husna which gives a sense of peace and comfort to the patient. 69.70.

#### RESEARCH LIMITATIONS

In the results of this study, not all patients can reach the phase of self-acceptance because they still perceive differently even though the spiritual therapy of Dzikir Asmaul Husna is very helpful in self-acceptance.

#### CONCLUSION

In this research, there is an effect of giving dzikir spiritual therapy to self-acceptance phase in breast cancer patients

#### RECOMMENDATION

Through the leadership of the hospital and the field of nursing is expected to provide regular spiritual therapy to patients who are treated at the hospital. In addition, socialization and training so that all nurses have the ability to provide health education so that respondents' knowledge increases.

#### NURSING CONFLICT

During the course of this study, no conflicts were found

between nurses and patients and the patient's family.

#### REFERENCES

- American Cancer Society. (2011). Global Cancer Statistics. CA: A Cancer Journal for Clinicians Volume 61 Number 2 March/April 2011
- Bogar, C.B & Hulse-Killacky, D. 2006. Resiliency Determinants and
- Brunner & Suddarth, 2002, Buku Ajar Keperawatan Medikal Bedah, alih bahasa: Waluyo Agung., Yasmin Asih., Juli., Kuncara., I.made karyasa, EGC, Jakarta.
- Resiliency Processes Among Female Adult Survivors of Childhood Sexual Abuse. Journal of Counseling and Development. Vol. 84 (318-327)
- Depkes RI. ( 2009). Buku Saku Pencegahan Kanker Leher Rahim & Kanker Payudara. Direktorat Pengendalian Penyakit Tidak Menular Direktorat Jendral PP & PL. Jakarta
- Damey (2018), Pengaruh Terapi Dzikir Terhadap Kecemasan Kematian Pada Lanjut Usia di Panti Sosial Tresna Wredha GAU Mabayi Gowa Makasar
- Davey, Patrick. 2005. Medicine At A Glance. Alih Bahasa: Rahmalia. A, dkk. Jakarta: Erlangga
- Gruendemann & Fernsebner. (2005). Buku Ajar: Keperawatan Perioperatif; (Comprehensive Perioperative Nursing); Volume 1 Prinsip. Jakarta: EGC. 287-289
- Hawari. (2008). Psikiater Kanker Payudara, Dimensi Psikoreligi. Jakarta: Balai Penerbit FKUI.
- Kumala, Kusparayogi, Nashori (2017). Efektifitas Pelatihan Dzikir Dalam Meningkatkan Ketenangan Jiwa Pada Lansia Penderita Hiperfensi
- Kubler-Ross, E. (1998). Kematian Sebagai Kehidupan: On Death and Dying. Jakarta: Gramedia Pustaka Utama.
- Mangan, Y., 2009, Cara Sehat Mencegah dan Mengatasi Kanker, Agromedia Pustaka, Jakarta
- Notoatmodjo, S. (2010). Metode Penelitian Kesehatan. Jakarta: Rineka Cipta.
- Nursalam. (2011). Konsep dan penerapan metodologi penelitian ilmu keperawatan. Jakarta : Salemba Medika
- Perwataningrum, Prabandari, Sulistyarini, (2016). Pengaruh Terapi Relaksasi Zikir Terhadap Penurunan Tingkat Kecemasan Pada Penderita Dispepsia.
- Oemiati, R., E. Rahajeng dan A. Y. Kristanto. 2011. Prevalensi Tumor dan Beberapa faktor yang Mempengaruhinya di Indonesia. Badan Penelitian dan Pengembangan Kesehatan, Jakarta
- Otto, S. E. (2003). Buku Saku Keperawatan Onkologi. Jakarta: EGC
- Suryaningsih (2009) Kupas Tuntas Kanker Payudara. Yogyakarta : Paradigma Indonesia Tim Cancer Helps. (2010). Stop Kanker. Cet 1. Jakarta: Argo Media Pustaka.
- World Health Organization. Global Health Estimates 2015 Summary Tables: Deaths by Cause, Age and Sex, by WHO Region, 2000-2015; 2015.
- Yosep. (2010). Keperawatan Jiwa. Bandung : Refia Aditama