

# Exploring Murottal Al-Qur'an Therapy with Jiharkah Tone for Managing Anxiety During Perimenopause

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## Abstract

Anxiety is common among perimenopausal women due to significant hormonal changes, which can worsen menopausal symptoms and reduce quality of life. This study explores the effectiveness of Murottal Al-Qur'an therapy with the Jiharkah tone in reducing anxiety in perimenopausal women. Using a quasi-experimental design with a single-group pre-test and post-test approach, 30 Muslim women aged 45-55 years with moderate to high anxiety were recruited from PKK groups in Malang. The Hamilton Anxiety Rating Scale (HAM-A) measured anxiety levels before and after the 4-week intervention, during which participants listened to Surah Ar-Rahman with the Jiharkah tone for 30 minutes daily. Results showed a significant reduction in anxiety levels, with the average score decreasing from 38.57 to 26.13, a mean difference of 12.433 points ( $t = 14.175, p < 0.001$ ). This study concludes that Murottal Al-Qur'an therapy with the Jiharkah tone is an effective non-pharmacological intervention for reducing anxiety in perimenopausal women. Limitations such as the single-group design, small sample size, and short intervention period indicate the need for further research using randomized controlled trials, larger samples, and long-term studies to confirm these findings and explore other Qur'anic tones.

**Keywords:** anxiety, Al-Qur'an murottal therapy, Jiharkah tone, perimenopause.

## 1. Introduction

Perimenopausal women typically experience a psychological disorder called anxiety. Bremer et al. (2019) suggests that the nature of anxiety in the menopausal period may be distinct from that of other life stages, likely due to the extreme hormonal fluctuations that accompany this period and affect both mood and emotional reactivity (Ma et al., 2017; Freeman & Sammel, 2016). This can in turn impact quality of life further, and contribute to high levels of severe menopause-related symptoms (hot flushes and sleep disturbance) likely exacerbated by untreated symptoms of anxiety (de Kruif et al., 2016; Núñez-Pizarro et al., 2017). Additionally, untreated anxiety can predispose to other mental health disorders like depression which can further decrease the quality of life in women experiencing perimenopause (Rozali et al., 2022).

As anxiety profoundly disturbs the harmony of mind and body, addressing anxiety in women entering menopause, is very necessary. For example, Spiritual-based therapies: can listen to the recitation of the Qur'an (murottal), have been shown to be effective in reducing anxiety in various health conditions (Moulaei et al., 2023). Listening to the Qur'an recitation can reduce anxiety and stress in patients with medical diseases (Moulaei et al., 2023). On the other hand, Agustiyowati et al. (2022) found that murottal therapy could control anxiety in patients with chronic kidney disease undergoing haemodialysis. Additionally, Rozali et al. (2022) has ascertained how listening, reading and

memorizing the Qur'an had massive benefits on both the physical health and mental health of the Muslim.

Murottal Al-Qur'an- an intonation and intonation that must be done in a specified tone, gives rise to a " calm and restful atmosphere" (Abdekhoda & Ranjbaran, 2022). Recent research symptoms of murottal by Aprilini et al. (2019) also hope that murottal can reduce the anxiety level of students with insomnia and sleep quality in the elderly (Oktora & Purnawan, 2018). Moreover, Ifdil et al. (2022) found that stress, anxiety, and depression levels were reduced by means of murottal therapy. Some other studies have also demonstrated the efficacy of murottal therapy in different health related situations. For example, Hamranani et al. (2023) in a research that murottal therapy was able to decrease the levels of anxiety in cesarean section surgery. Our results consistent with a study by Pramesona & Taneepanichskul, (2018), that religious interventions can alleviate depressive symptoms and enhance the quality of life among nursing home residents. Additionally, (Yuniarti et al. (2019) reported that Murottal was proven to be effective in reducing anxiety in preoperative patients, based on the research conducted by Mawardi et al. But, the important thing to mention is that all of these studies weren't specifically dealing with the Jiharkah tone. Argaheni et al. (2021) argued that variety of tones within murottal can affect the therapy's effectiveness.

The study aims to investigate the effect of murottal Al-Qur'an therapy with Jiharkah tone on reducing anxiety in pre-menopausal women. Previous research has shown that soothing sounds and certain tones in murottal therapy can have relaxation effects and substantial therapeutic effects. The aim of this study is to fill this gap in the literature by studying the effect of these less-studied tone variations of murottal. The result of this study is believed to be beneficial to practitioners of complementary therapy in the treatment of anxiety and improvement of quality of life of perimenopausal women (Rani et al., 2015; Abraham, et al., 2015; Isgandarova (2015).

## 2. Literature Review

### Perimenopause and Anxiety

Perimenopause is the period before reaching menopause and it represents the time of life when women experience this time of transition and the changes that occur to the menstrual cycle, as well as different symptoms. Perimenopause is the period of a few years preceding menopause in which estrogen and progesterone are already lower, usually in women aged 40-55 years. According to Ma et al. (2017), the period of life is frequently described as perimenopause starting with irregular menstrual cycles and ending with a 12-month absence of menses.

Perimenopause symptoms vary among women but can include hot flashes, difficulty sleeping, night sweats, and mood changes. In a similar study Freeman & Sammel (2016) inform that anxiety is the intestinal psychological symptom along perimenopause. Another said it "makes you gain weight", and reduces your libido. A study by de Kruif et al. (2016) confirmed that women with depression were common in perimenopausal women in association with sleep problems and anxiety symptoms leading to a high level of impairment in depressive illness. Hamilton Anxiety Rating Scale (HAM-A) was used for assessing anxiety which relates directly to the mental health problems faced by women (Ramdan, 2019).

One reason women's anxiety increases is due to hormonal changes, especially in estrogen and progesterone levels. Estrogen depletion that occurs during menopause can affect the balance of mood-modulating neurotransmitters, such as serotonin and norepinephrine, which can make things

even worse and trigger anxiety (Bremer et al., 2019). Increased anxiety is also directly correlated with more frequent and intense hot flashes in women who experience unstable hormone levels (Freeman & Sammel (2016). All of the women were in the perimenopausal stage and the women with anxiety and these without had worse scores in the quality of life and physical functioning, respectively (Núñez-Pizarro et al. (2017). Perimenopause is a high-risk period for mood disorders and anxiety, likely influenced by biological and psychosocial factors (de Kruif et al., 2016; Ma et al., 2017). Spiritual therapy with Al-Qur'an murottal has been shown to reduce anxiety and improve quality of life (Hamranani et al., 2023; Rosmiarti et al. (2020).

#### Murottal Al-Qur'an and Its Benefits for Mental Health

Murottal Al-Qur'an is the reciting of the Qur'an either alone or in congregation with tartil, which is a nice variation of intonation of either (Rahma & Damanhuri, 2015; Susilawati, 2019). The history of murottal Al-Qur'an rooted in cultural of Islam where the importance of reading the Qur'an correctly, tajwid and melodious voice accompanies the reading creating an interaction, a human emotion and psychological in listeners (Shayakhmetova, 2014).

Murottal Al-Qur'an has been known by many people as a positive element which has a significant positive contribution to mental health. When it comes to anxiety, Murottal Al-Qur'an is very popular, because it is said to be able to calm down. The results of the research by Abdekhoda & Ranjbaran (2022), showed that listening to murottal Al-Qur'an can reduce anxiety and stress. Furthermore, Agustiyowati et al. (2022) reported a significant effect of the use of murottal Al-Qur'an therapy on anxiety reduction of chronic kidney disease (CKD) patients under haemodialysis.

Murottal Al-Qur'an also has beneficial effects in terms of health, and there have been a number of studies on its effects on mental health in several groups of subjects. Aprilini et al. (2019) showed that listening to murottal Qur'an can reduce the sleeplessness level of students. Listening murottal Al-Qur'an is effective in reducing labor pain and anxiety of pregnant women consumed by pregnant women Argaheni et al. (2021).

The use of murottal Al-Qur'an methods has had a lessons of changed behavior shown to have a positive impact on human psychology. Murottal Al-Qur'an with regular and harmonious sound has effect that can affect brain waves, minimalize sympathetic nervous system activity and increase parasympathetic response, resulting in a feeling of relaxation and a decrease in anxiety levels (Rani et al., 2015). Furthermore, the religious aspect in murottal Al-Qur'an helps to improve emotional and mental health, lead to a more optimal psychological well-being (Rozali et al., 2022).

#### Special Tonalities in Murottal Al-Qur'an

In the sphere of Quranic recitation here are 7 modes of recitation: bayati, hijaz, shaba, Rast, Jiharka, sikka, and nahawan. Every mode has unique attributes, such as the mellowness of bayati, the sadness of nahawan, and the tranquility of Jiharkah. The reason behind this uniqueness in tonalities is very important from a therapeutic point of view. Differences in tonal of recitation can affect the therapeutic effect of the drug greatly. Benek et al. (2015) state that all types of Islamic rhythmic patterns are very effective in the treatment of mental and spiritual disorders. Rani et al. (2015) in one study, exposure to soothing sounds was found to evoke deep states of relaxation. Isgandarova (2015) delineates both personal experience and literature review regarding the healing power of tonal qualities in music-utilizing traditional music and illustrative Qur'an recitation as adjuncts for Islamic spiritual care. Generally, the particularities of the murottal Al-Qur'an tones contain significant therapeutic mental and spiritual potentials.

### **Murottal Al-Qur'an with Jiharkah Tone Therapy in Reducing Perimenopausal Anxiety**

Al-Qur'an is also considered by Muslims as a *syifa'* and *dawa'* for healing, both literally and metaphorically, a basis of psychological relief, and an information and enhancement support for improving various intangible aspects in health maintenance (Abdekhoda & Ranjbaran, 2022). Listening, Reading and Memorization of Al-Qur'an has a positive effect on physical and mental health (Rozali et al., 2022). Religious interventions such as murottal have been reported in reducing depression symptoms, improving the quality of life, and lowering anxiety levels (Hamranani et al., 2023; Moulaei et al., 2023).

The unique tonalities of murottal Al-Qur'an, such as the Jiharkah tone, further increase its therapeutic effects. The Jiharkah tone - a rhythmical, sublimely soothing melody - tunes the autonomic nervous system. Argaheni et al. (2021) reported that murottal Al-Qur'an therapy works in relaxation by focusing viewers to relax, so it was able to stimulate the brain and reduce stress, anxiety, and tension through soothing and rhythmic sound during therapy when listening to Al-Qur'an. This finding is consistent with those of Benek et al. (2015) who identified also the likelihood of potential therapeutic benefits of Islamic rhythmic patterns. The rhythmic and harmonious sounds of murottal can weaken the activity of the sympathetic nervous system and can increase the activity of the parasympathetic nervous system, two important things for reducing levels of anxiety. Wirakhmi et al. (2018) found that Murottal Al-Qur'an therapy can reduce blood pressure, heart rate, and breathing rate. Effects of this type correspond to reactions to murottal in stimulating the main senses of the brain in the production of neuropeptides that arise the feeling of calm and comfortable.

Women in perimenopause suffer more with anxiety because of hormonal changes and psycho-social adaptations. The Jiharkah tone in murottal Al-Qur'an therapy was found to be beneficial in reducing stress levels and anxiety (Argaheni et al., 2021). This calming and soothing nature of the Jiharkah tone can help to balance the overactivity of the sympathetic nervous system, and be of specific benefit to women during perimenopause. Murottal is believed to balance autonomic activity, thereby providing increased parasympathetic activity, improving overall well-being. A number of studies provide evidence that murottal Al-Qur'an therapy, particularly with Jiharkah pitch, may reduce anxiety in perimenopausal women. For the specific tonalities in murottal, such as Jiharkah, this alignment fit the therapeutic implications.

## **3. Method**

### **Research Design**

The research design used was a quasi-experiment with single group pre-test and post-test, which aimed to determine the effectiveness of therapy with Murottal Al-Qur'an Jiharkah tone through anxiety decrease in perimenopause women. Quasi-experimental study design was used to evaluate the effect of intervention: the pre-test and post-test design compared the level of anxiety before and after the intervention.

### **Research Subjects**

Research was carried out on perimenopausal Muslim women experiencing anxiety, recruited from PKK groups in Malang. The inclusion criteria were women aged between 45 and 55 years with a moderate or high score in the Hamilton Anxiety Rating Scale (HAM-A) and acceptance to participate in the study. Subjects on pharmacological therapy for anxiety or who had clinically recognized mental disorders were excluded. Results in total, 30 subjects (mean age 45-52 years, mean 47.9 years) were included. Among the education categories, high school graduates accounted for 19, bachelor's degree

holders for 8, and junior high school graduates for 3. There were 17 housewives, 6 teachers, and 7 employees in the employed group.

### Instruments

The primary instrument in this study is the Indonesian version of the Hamilton Anxiety Rating Scale (HAM-A) which has been validated in the study by Ramdan (2019), consists of 14 items, each with a 0-4 response option. The construct validity of the scale was from 0.529 to 0.727, the Cronbach's alpha value was 0.756. As therapeutic intervention, a recording of Surah Ar-Rahman - in Jiharkah tone was used, music was chosen due to the calming effect it produces. To be eligible for the study, questionnaires were administered to collect demographic and health history information, including age, marital status, educational attainment and health history, to ascertain that the participants met the inclusion criteria and to identify possible health conditions that might impact the study outcomes.

### Data Collection Procedures

Data collection was divided on phases to guarantee accuracy and quality. Participants were recruited online through PKK groups in Malang, the subjects of whom were females in the perimenopausal phase, aged 45-55 years old, and had anxiety. Women who had become menopausal, were receiving hormone replacement therapy, or had a history of psychiatric disorders other than anxiety were excluded. All participants gave informed consent. Basal anxiety levels and demographic data was gathered for all patients with the HAM-A before the intervention. All participants listened to the recitation of Surah Ar-Rahman in Jiharkah and for 30 minutes per day for 4 weeks at home according to guidance provided by the researchers. Subjected to the same intervention, they were re-evaluated using the HAM-A as well after 4 weeks of their therapy.

### Data Analysis

Quantitative statistical methods were employed for data analysis. Descriptive analysis described the characteristics of the subjects, and a paired t-test compared pre-test and post-test anxiety scores to determine the intervention's effectiveness. Analyses were conducted using SPSS statistical software with a significance level of  $\alpha = 0.05$ .

## 4. Result and Discussion

The t-test analysis shows that Al-Qur'an murottal therapy with the Jiharkah tone is significantly effective in reducing anxiety in perimenopausal women. The average anxiety score decreased from 38.57 to 26.13 after the intervention, with a mean difference of 12.433 points. The correlation between pre-test and post-test anxiety scores was 0.596 with a significance of 0.001, indicating a fairly strong and significant relationship.

**Table 1. Result of Descriptive Data**

		Mean	N	SD	S. E	Correlation	Sig.
Pair 1	Skor Anxiety Pre Test	38.57	30	5.302	.968	0.596	.001
	Skor Anxiety Post Test	26.13	30	5.387	.983		

The t-test results showed a t-value of 14.175 with a degree of freedom (df) of 29 and a significance of 0.000, indicating the reduction in anxiety scores is statistically very significant. The anxiety score reduction was consistent for 95% of the data (95% confidence interval for difference ranged from 10.639 to 14.227). Based on the whole research of the author, it is known that Al-Qur'an

murottal therapy with the Jiharkah tone is effective in reducing anxiety in perimenopausal women, so the hypothesis is accepted.

**Tabel 2. Result of Pair Sample t test**

		Mean	SD	S. E	Lower	Upper	t	df	Sig.
Pair 1	Skor Anxiety Pre-Test - Skor Anxiety Post Test	12.433	4.8	0.88	10.639	14.227	14.2	29	0.00

These findings are in line with numerous other studies examining the effectiveness of Murottal Al-Qur'an therapy in reducing anxiety. Among patients with different medical illnesses, Abdekhoda & Ranjbaran (2022) showed that listening to Murottal Al-Qur'an could decrease the stress and anxiety score. Agustiyowati et al. According to Agustiyowati et al. (2022) reported tha Murottal Al-Qur'an therapy is effective to lessen the anxiety of chronic kidney disease hemodialysis patients. The replication data sheds more light on the consistency of previous researches. One of them is to hear Murottal Al-Qur'an which was said to be able to reduce insomnia levels for students, and improve sleep quality for elderly (Oktora & Purnawan, 2018).

Murottal Al-Qur'an affects the psychological condition of its listeners through a combination of acoustic and emotional effects. Regular and harmonious sound of Murottal Al-Qur'an can affect brain wave, decrease sympathetic activity, and increase parasympathetic response that does relaxation and anxiety reduction (Rani et al., 2015). This effect being close to music therapy where relatively harmonic sounds and beats help to relax our minds and bodies (Isgandarova, 2015). Moreover, the religious content of Murottal Al-Qur'an offers, psychological well-being of the emotional and mental part is good (Rozali et al., 2022).

In addition, the distinctive Jiharkah tone in Murottal Al-Qur'an is one of the factors contributing to the effectiveness of this therapy. However, the Jiharkah tone, on the other hand, has a rhythmic and soothing melody that helps the autonomic nervous system to be regulated. Argaheni et al. (2021) proved that this therapy effectively helps lower stress anxiety, and tension by forcing one to focus on Al-Qur'an Murottal with the sound it makes. Similar to findings, Benek et al. (2015) also reported that there were potential therapeutic values in Islamic rhythms. Murottal will create a rhythm and harmony sound that can emphasize an advantage sympathetic nervous system and further leverage activities parasympathetic nervous system. This is important for decreasing anxiety levels. This phenomenon is due to the sensory stimulation derived upon hearing recitation, stimulating the brain to produce neuropeptides that induce feelings of peace and satisfaction. Moreover, it supports Kavurmaci et al. (2020) for the effects that music therapy provides to reduce the heart rate, body temperature, blood pressure, respiration rate, and to improve the sleep quality in the individual.

These results are simultaneously confirmed by a number of studies. Hamranani et al. (2023) who found that Murottal therapy reduced the anxiety level of cesarean surgery patients. Pramesona & Taneepanichskul (2018) have shown that religious intervention may be effective in reducing depressive symptoms and improving quality of life in elderly participants living in nursing homes. In addition, Pramesona & Taneepanichskul (2018) said that Murottal efficacious to decrease among pre-operative patients.

Nevertheless, there are reports that some studies deviate the aforementioned fact. For example, Rosmiarti et al. (2020) also reported no significant difference in utilizing murottal therapy and the anxiety level of cancer patients. It appears from this study that both social support and the severity of the disease may play a greater role in reducing anxiety in this patient population. Conclusion: The results of this study conclude that the administration of Murottal Al-Qur'an therapy

(Jiharkah tone) in perimenopausal women can reduce their anxiety. This study will help on enhancing the application of spiritually based therapy in more comprehensive clinical populations and inspire a more in-depth investigation on the therapeutic possibility of various Murottal Al-Qur'an modes.

## 5. Conclusion

Al-Qur'an Murottal Therapy with tone hijarkah can reduce anxiety in perimenopause women as presented in a study. The baseline mean anxiety score had a significant decrease which was suggestive of therapeutic benefits from this spiritual intervention. The study indicates that clinically, Murottal Al-Qur'an therapy might be delivered and calls for future research on the efficacy of other types of Murottal Al-Qur'an sounds. On the other hand, positive features of the study are no control but exposed group matched for other clinical and demographic features as the study group and sample size too small to be generalizable to people with stroke in general. Future work is needed to evaluate these effects on the long-term, and further investigations are indicated to elucidate the health promotion benefits of different Murottal Al-Qur'an tones.

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## Reference

- Abdekhoda, M., & Ranjbaran, F. (2022). The Holy Quran and Treatment of Mental and Physical Diseases. *Pastoral Psychology*, 71(4), 423–435. <https://doi.org/10.1007/s11089-022-01002-6>
- Agustiyowati, T. H. R., Endah, D. R., & Putri, T. A. R. K. (2022). The Effect of Murottal Al-Quran Therapy on Anxiety Level of Chronic Kidney Disease Patients Undergoing Hemodialysis. *Jurnal Keperawatan Komprehensif (Comprehensive Nursing Journal)*, 8(4). <https://doi.org/10.33755/jkk.v8i4.443>
- Aprilini, M., Mansyur, A. Y., & Ridfah, A. (2019). Efektivitas Mendengarkan Murottal Al-Quran Dalam Menurunkan Tingkat Insomnia Pada Mahasiswa. *Psikis : Jurnal Psikologi Islami*, 5(2), 146–154. <https://doi.org/10.19109/psikis.v5i2.2103>
- Argaheni, N. B., Sukamto, I. S., Nugraheni, A., Novika, R. G. H., Nurhidayati, S., Sari, A. N., Kusmawati, I. I., Maulida, L. F., Wahidah, N. J., Maulina, R., & Putri, N. R. (2021). The impact of murrotal Al-Qur'an on decreasing labor pain: A systematic review. *PLACENTUM Jurnal Ilmiah Kesehatan Dan Aplikasinya*, 9(3), 76–86.
- Benek, S. B., Bayram, R., Şakar, H., & Gümüştekin, K. (2015). An example for the application of music therapy in the medical history: Divrigi Darüssifa. *Acta Medica Anatolia*, 3(2). <https://doi.org/10.15824/actamedica.16068>
- Bremer, E., Jallo, N., Rodgers, B., Kinser, P., & Dautovich, N. (2019). Anxiety in Menopause: A Distinctly Different Syndrome? *Journal for Nurse Practitioners*, 15(5), 374–378. <https://doi.org/10.1016/j.nurpra.2019.01.018>

- de Kruif, M., Spijker, A. T., & Molendijk, M. L. (2016). Depression during the perimenopause: A meta-analysis. *Journal of Affective Disorders, 206*, 174–180. <https://doi.org/10.1016/j.jad.2016.07.040>
- Freeman, E. W., & Sammel, M. D. (2016). Anxiety as a risk factor for menopausal hot flashes: Evidence from the penn ovarian aging cohort. *Menopause, 23*(9), 942–949. <https://doi.org/10.1097/GME.0000000000000662>
- Hamranani, S. S. T., Daryani, Nurkhayati, F., & Sujadi. (2023). Murottal Therapy Reduce the Level of Anxiety in Patients Pre Operating Sectio Caesarea in Klaten Islamic General Hospital. *Pakistan Journal of Life and Social Sciences, 21*(1), 180–193. <https://doi.org/10.57239/PJLSS-2023-21.1.0015>
- Ifdil, I., Syahputra, Y., Fadli, R. P., Zola, N., Putri, Y. E., Amalianita, B., Rangka, I. B., Suranta, K., Zatrachadi, M. F., Sugara, G. S., Situmorang, D. D. B., & Fitria, L. (2022). The depression anxiety stress scales (DASS-21): an Indonesian validation measure of the depression anxiety stress. *COUNS-EDU: The International Journal of Counseling and Education, 5*(4), 205–215. <https://doi.org/10.23916/0020200536840>
- Isgandarova, N. (2015). Music in islamic spiritual care: A review of classical sources. *Religious Studies and Theology, 34*(1), 101–113. <https://doi.org/10.1558/rsth.v34i1.26326>
- Kavurmaci, M., Dayapoğlu, N., & Tan, M. (2020). Effect of music therapy on sleep quality. *Alternative Therapies in Health and Medicine, 26*(4), 22–26.
- Ma, M., Li, R. X., Xiao, X. R., Xu, Y., Chen, X. Y., & Li, B. (2017). A health survey of perimenopausal syndrome and mood disorders in perimenopause: A Cross-Sectional study in Shanghai. *International Journal of Clinical and Experimental Medicine, 10*(8), 12382–12403.
- Moulaei, K., Haghdoost, A. A., Bahaadinbeigy, K., & Dinari, F. (2023). The effect of the holy Quran recitation and listening on anxiety, stress, and depression: A scoping review on outcomes. *Health Science Reports, 6*(12). <https://doi.org/10.1002/hsr2.1751>
- Núñez-Pizarro, J. L., González-Luna, A., Mezones-Holguín, E., Blümel, J. E., Barón, G., Bencosme, A., Benítez, Z., Bravo, L. M., Calle, A., Flores, D., Espinoza, M. T., Gómez, G., Hernández-Bueno, J. A., Martino, M., Lima, S., Monterrosa, A., Mostajo, D., Ojeda, E., Onatra, W., ... Chedraui, P. (2017). Association between anxiety and severe quality-of-life impairment in postmenopausal women: Analysis of a multicenter Latin American cross-sectional study. *Menopause, 24*(6), 645–652. <https://doi.org/10.1097/GME.0000000000000813>
- Oktora, S. P. D., & Purnawan, I. (2018). Pengaruh Terapi Murottal Al Qur'an terhadap Kualitas Tidur Lansia di Unit Rehabilitasi Sosial Dewanata Cilacap. *Jurnal Keperawatan Soedirman, 11*(3), 168. <https://doi.org/10.20884/1.jks.2016.11.3.710>
- Pramesona, B. A., & Taneepanichskul, S. (2018). The effect of religious intervention on depressive symptoms and quality of life among Indonesian elderly in nursing homes: A quasi-experimental study. *Clinical Interventions in Aging, 13*, 473–483. <https://doi.org/10.2147/CIA.S162946>
- Rahma, Y., & Damanhuri, Z. (2015). Efektifitas Terapi Membaca Al-Quran. *Jom Psik Unri, 2*(2), 1372–1380.
- Ramdan, I. M. (2019). Reliability and Validity Test of the Indonesian Version of the Hamilton Anxiety Rating Scale (HAM-A) to Measure Work-related Stress in Nursing. *Jurnal Ners, 14*(1), 33–40. <https://doi.org/10.20473/jn.v14i1.10673>



- Rani, N. S. A., Mustapha, M., Rezac, F., & Ghani, M. A. A. (2015). Proceedings of Universiti Sains Malaysia International Conference on Social Sciences 2015. In *Brainwave theta signal responses during receptive auditory Quranic and non-Quranic stimulation: A pilot study* (Issue August).
- Rosmiarti, Ria, G., Maya, A., & Jamalluddin, S. B. (2020). Murotal Al-Quran therapy on decreasing labor pain and anxiety in maternity mothers first phase. *Enfermeria Clinica*, 30(2019), 110–114. <https://doi.org/10.1016/j.enfcli.2019.11.034>
- Rozali, C. W. M., Ishak, W. N. A., Mat Ludin, I, Warif, F. W. A., Che Roos, N. M., & Aishah, N. (2022). The Impact of Listening to, Reciting, or Memorizing the Quran on Physical and Mental Health of Muslims: Evidence From Systematic Review. *International Journal of Public Health*, 67(August), 1–10. <https://doi.org/10.3389/ijph.2022.1604998>
- Shayakhmetova, A. K. (2014). *Intoning the Qur'an as Musicological Problem postprimary in religious service : the word , its meaning and of its The if outweigh the music . However , on closer the sound discussion aspect acquaintance with the of Muslim worship we reveal a number of p.* 3(2014 7), 442–450.
- Susilawati, A. (2019). Pengaruh Terapi Murottal Al-Qur'an Surah Ar-Rahman terhadap Penurunan Tekanan Darah pada Lansia Penderita Hipertensi di PSTW Budi Luhur Kota Jambi. *Jurnal Akademika Baiturrahim Jambi*, 8(2), 1–5. <https://doi.org/10.36565/jabj.v8i2.5>
- Wirakhmi, I. N., Utami, T., & Purnawan, I. (2018). Comparison of Listening Mozart Music With Murotal Al Quran on the Pain of Hypertension Patients. *Jurnal Keperawatan Soedirman*, 13(3), 100. <https://doi.org/10.20884/1.jks.2018.13.3.813>
- Yuniarti, E. V., Rahmawati, I., & Munfadlila, A. W. (2019). The influence of recitation “murrotal” al-qur'an to anxiety level of pre-surgery patients. *Indian Journal of Public Health Research and Development*, 10(8), 901–904. <https://doi.org/10.5958/0976-5506.2019.02008.4>