

Murottal Therapy Improves Sleep Quality for Elderly People with Insomnia

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ABSTRACT

Insomnia is the most common sleep disorder experienced by many people, especially the elderly, which can increase stress in a person so that they are easily angry which results in decreased work effectiveness. The purpose of this study is to Design in this study is Pre Experiment with a control group design approach for Randomized Control Group Design, pre experiment with pre-test and post-test pre Experiment design. The sample of elderly people with insomnia amounted to 32 elderly people with simple random sampling techniques and using the Independent T test. The results of the study showed severe insomnia in sleep quality in the elderly before being given murottal therapy as many as 17 respondents (53.1%) while the results of the study showed mild insomnia in sleep quality in the elderly after being given murottal therapy as many as 13 respondents (40.6%). The conclusion of the study obtained the results of sleep quality in the elderly before being given murottal therapy showed severe insomnia while after being given murottal therapy showed mild insomnia. It is hoped that further researchers can be used as input for the elderly regarding sleep quality that can result in insomnia.

Keywords: elderly; insomnia; murottal; quality; sleep

INTRODUCTION

Elderly or often known as elderly which means someone who is over 60 years old. Insomnia can be known as the most common sleep disorder experienced by many people in the world because at that time someone will have difficulty sleeping or having difficulty maintaining sleep and sleep quality will deteriorate (Sayekti & Hendrati, 2015). Insomnia can also increase stress in a person so that it is easy to get angry which results in decreased work effectiveness. This will continue to happen in the following days if someone cannot improve the quality and quantity of their sleep (Gryglewska, 2012).

Based on a survey by WHO, the prevalence of insomnia in America reaches 60-70 cases of adults. In Indonesia, the prevalence of insomnia is around 10%, which means 28 million people out of a total of 238 million Indonesians suffer from insomnia. Insomnia is the most common sleep disorder. Every year it is estimated that around 20-50% of adults report sleep disorders and around 17% experience serious sleep disorders (Amir, 2017). The prevalence of insomnia in Indonesia in the elderly is relatively high, which is around 67% of the population aged over 65 years. The results of the study showed that insomnia is mostly experienced by women, which is 78.1% aged 60-74 years (Sulistyarini & Santosa, 2016). The incidence of insomnia in the elderly in Indonesia reaches 67%, this is a problem that often arises compared to other health problems (Sayekti & Hendrati, 2015).

Insomnia can be treated in 2 ways, including using pharmacological and non-pharmacological therapy. Pharmacological therapy is known as therapy related to chemicals and the medical world which is often one of the most common treatments used in treating insomnia symptoms. The drugs used include sedative hypnotics, antihistamines, antidepressants, antipsychotics and anticonvulsants. But basically chemicals that enter the body will be detrimental to the body. Therefore, other treatments are needed to overcome insomnia symptoms with non-pharmacological therapy (Sayekti & Hendrati, 2015). Non-pharmacological therapies that can

reduce the level of insomnia include complementary therapies, for example massage therapy, 4 finger touch, relaxation, aromatherapy, muscle relaxation, and murottal therapy (Babaii, Abbasinia, Hejazi, Tabaei, & Dehghani, 2015). According to Purna (2016), murottal therapy or what is often known as Al-Quran therapy describes a recording of the sound of the Al-Quran which is modified or sung by a qori' or reader of the Al-Quran

The benefits of murottal therapy which is a non-pharmacological therapy that can be used to accelerate the healing process. According to Ahmad al-Qadhi, the results of his research have proven that the influence of the Qur'an on humans from a physiological and psychological perspective can reduce the tension of reflective nerves with quite significant results (Pratiwi, Hesneli, & Ernawaty, 2015). Insomnia is a sign of sleep disorders in the form of difficulty starting sleep or maintaining sleep even though you have the opportunity to sleep (Nur, 2012). In general, clinical symptoms due to sleep disorders can be in the form of decreased concentration, attention, slow responses, making mistakes or negligence. Abdurrachman said that listening to the recitation of the Qur'an is generally dominated by delta waves from electroencephalography (EEG) images that identify when the mind is relaxed so that it will cause a calm, peaceful and comfortable effect on someone who listens and then gives an effect that can induce someone to sleep easily (Fatimah & Noor, 2015).

The Quran explains to all mankind in this world about the purpose, obligations and benefits of the Quran itself. The Quran has explained that it is a healing book as in Surah Al-Isra' verse 82 "And We send down from the Quran that which is a cure and a mercy for the believers and it does not increase the wrongdoers except in loss". The Prophet Muhammad SAW has emphasized the importance of reading the Quran aloud as in His words "The comparison between a silent reader and (Qori) is like a bottle of perfume when it is closed and when it is opened. Listening to the reading of the Quran will affect high blood pressure to be low, a more stable heart rate, and cause muscles to become more relaxed (Baba Mohammadi, Sotodehasi, Koenig, Jahani, & Ghorbani, 2015). Therefore, Based on the researchers interested in analyzing the effect of murottal therapy on changes in sleep quality in elderly insomnia.

The great influence of murottal al-Qur'an in creating calm has been proven and has a significant impact on insomnia. Elderly people who listen to murottal al-Qur'an are expected to be calmer, more comfortable, and free from excessive worry. Murottal al-Qur'an also helps the elderly to be able to manage their emotions so that they do not change drastically. With the support of previous studies, researchers hope that providing therapy by listening to murottal al-Qur'an can help the elderly to improve good sleep quality. The elderly will be calmer, more comfortable, and free from excessive worry. Based on these problems, researchers try to study "The Effect of Murottal Therapy on Sleep Quality in Elderly with Insomnia at UPT Pesanggrahan PMKS Mojopahit Mojokerto".

METHOD

The science in this study is Pre Experimental with a control group design approach for Randomized Control Group Design. pre experimental with pretest and post-test pre Experimental designs. Are all experimental designs in which researchers are unable to change the conditions of the independent variables that we treat as part of the treatment or treatment. The sample of elderly people with insomnia amounted to 32 elderly people with simple random sampling techniques and using the Independent T test. If the results of the research analysis obtained a value of $p \leq 0.05$, H1 is accepted, which means that there is an effect of murottal therapy on sleep quality in elderly people with insomnia at UPT Pesanggrahan PMKS Mojopahit Mojokerto.

The method of data collection in this study was by collecting all prospective respondents at one time. Initial data collection consisting of gender, age, elderly people with insomnia, and seeking information on how to overcome insomnia experienced by the elderly at UPT Pesanggrahan PMKS Mojopahit Mojokerto. Then the researcher explained to prospective respondents about the purpose of the study and if they were willing to become respondents, they were invited to sign an informed consent, if the respondent was not willing, they would still respect the respondent's decision. The instrument used in data collection for the effect of murottal therapy on sleep quality in elderly insomnia at UPT Pesanggrahan PMKS Mojopahit Mojokerto. Is a sleep quality questionnaire (The Pittsburgh Sleep Quality Index). 11-19: no complaints of insomnia 20-27: mild insomnia, 28-37: severe insomnia, 38-44: very severe insomnia in the form of a cellphone and sound speaker.

RESULTS

Table 1.
Frequency Distribution of Respondent Characteristics Based on Gender (n=32)

Gender	f	%
Male	7	21,1%
Female	25	78,1%

Table 1 shows the results of the frequency distribution, the majority of whom were female, totaling 25 respondents (78.1%).

Table 2.
Frequency Distribution of Respondent Characteristics Based on Age (n=32)

Age	f	%
50-60 years old	17	53,1 %
61-70 years old	11	34,4%
71-80 years old	4	12,5%

Table 2 shows statistical frequency data on respondent characteristics based on age, where the majority of respondents were aged 50-60 years, totaling 17 respondents (53.1%).

Table 3.
Characteristics of Respondents Based on Education (n=32)

Education	f	%
Elementary school	26	81,3 %
Junior high school	4	12,5%
Senior high school	2	6,3%

Table 3 shows the results of the frequency distribution of respondents with elementary school education level totaling 26 respondents (81.3%).

Table 4.
Frequency Distribution of Respondents Based on Sleep Quality in the Elderly Before and After Being Given Murottal Therapy (n=32)

Sleep Quality	Before		After	
	f	%	f	%
No Insomnia	0	0 %	7	21,9%
Mild Insomnia	6	12,5%	13	40,6%
Severe Insomnia	9	28,1%	12	37,5%
Very Severe Insomnia	17	53,1%	0	0%

Table 4 shows that the quality of sleep of the elderly before being given murottal therapy, most respondents experienced severe insomnia, 17 people (53.1%) and after being given murottal therapy, most experienced mild insomnia, 13 respondents (40.6%).

Table 5.
Frequency Distribution of the Effect of Murottal Therapy on Sleep Quality in Elderly with Insomnia at UPT Pesanggrahan PMKS Mojopahit Mojokerto (n=32)

Before	After				Total
	No Insomnia	Mild Insomnia	Severe Insomnia	Very Severe Insomnia	
No Insomnia	0	0	0	0	0
Mild Insomnia	6	0	0	0	6
Severe Insomnia	1	8	0	0	9
Very Severe Insomnia	0	5	12	0	17
P value	0,000				

Table 5 shows that there is an effect of murottal therapy on sleep quality.

DISCUSSION

UPT Pesanggrahan PMKS Mojopahit Mojokerto is a shelter for the elderly in Mojokerto district and its surroundings. Currently, the shelter has 48 elderly people, and the elderly there generally have diseases such as hypertension, diabetes and sleep disorders or insomnia. From table 1. the results of the frequency distribution are mostly female, totaling 25 respondents (78.1%). At UPT Pesanggrahan PMKS Mojopahit Mojokerto. Based on table 2. the statistical frequency data of the characteristics of respondents based on age were obtained, most of the respondents were aged 50-60 years, totaling 17 respondents (53.1%), At UPT Pesanggrahan PMKS Mojopahit Mojokerto. Based on table 3. the results of the frequency distribution of respondents with elementary school education totaling 26 respondents (81.3%), At UPT Pesanggrahan PMKS Mojopahit Mojokerto. The elderly in the shelter from the total of 48 elderly people experienced sleep pattern disorders or called insomnia.

The results of the interviews obtained by the elderly who experience sleep disorders at night, the factors that affect the sleep of the elderly in the shelter are the environment, one of the elderly said he could not sleep at night because of the environment such as a hot and stuffy room so that the quality of sleep in the elderly is disturbed, causing the elderly in the shelter to not be able to rest well. With the case above, the author provides murottal therapy to several elderly who experience sleep disorders or insomnia. Based on table 4. it can be seen that the quality of sleep of the elderly before being given murottal therapy, most respondents experienced severe insomnia of 17 people (53.1%), at the UPT Pesanggrahan PMKS Mojopahit Mojokerto. And after being given murottal therapy, the elderly who experienced sleep disorders or insomnia experienced many changes so that the quality of sleep of the elderly was fulfilled and the elderly did not wake up at night. Based on table 5. it can be seen that the quality of sleep of the elderly after being given murottal therapy at UPT Pesanggrahan PMKS Mojopahit Mojokerto, the most experienced mild insomnia was 13 respondents (40.6%). From the results of the independent sample test, the Sig. <p value 0.000 <a 0.05 value was obtained, which means that there is an effect of murottal therapy on sleep quality. Which means that the hypothesis H1 is Accepted Ho is Rejected. Murottal works on the brain where when stimulated by murottal therapy, the brain will produce a chemical called neuropeptide.

CONCLUSION

From the research conducted, it can be concluded that murottal therapy can affect the quality of sleep in the elderly, which can reduce complaints of sleep disorders in the elderly at night.

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