Impact of Surah Rehman in Management of Stress, Anxiety and Depression

Zainab waheed[1]*, Waleed Ahmed[2], Hira Butt[3], Fizza Tahir[4], Sadaf Amjad Khawaja[5], Maila Habib Piracha[6]

[1]Kabir Medical College, Peshawar, Pakistan
[2]Mercy Teaching Hospital, Peshawar, Pakistan
[3,5] Sharif Medical and Dental College, Lahore, Pakistan
[4,6] Institute of Dentistry, CMH Lahore Medical College, Lahore, Pakistan

*zwaheedpk@yahoo.com

ABSTRACT

The purpose of this study was to evaluate the impact of surah Rehman on coping with stress, anxiety, and depression in undergraduate medical students. A total of 80 students including both male and female participated in this study. At the pre and post level, two questionnaires were administered to measure the stress, anxiety and depression. The participants who had mild to moderate stress, anxiety and depression were randomly assigned to the experimental group and the control group. The experimental group listened to the recital of surah Rehman through video along its translation and control group was given relaxation technique. The group sessions were initially designed regularly with 30mins time duration and subsequent sessions were held on alternate days. After 2 months, the participants of the groups were assessed and compared their results. The results revealed that the experimental group participants showed a more positive response to listening to surah Rehman as compared to the control group. On post assessment, their mean and standard deviation scores on anxiety, depression and stress were significantly reduced. It was concluded that surah Rehman could be used as an effective non-pharmacological treatment for the management of anxiety, depression, and stress.

Keywords

Mental health, Stressor, Vulnerability, Prevention, Recitation

Introduction

Surah Rehman, its meaning is the most merciful and it is fifty-five surah of the Holy Quran comprising seventy-eight verses. It could be defined as Allah's words which were revealed in Arabic rhythmical form and brings more strength ((Ismail, Husain, Omar, & Mohamad, 2019) and have a gratifying effect on hearing, has an impressive expression (Vaghefi, Nasrabadi, Golpayegani, Mohammadi, & Gharibzadeh, 2015). In this surah, Allah has mentioned blessings and then asked from His followers "then which of your Lords blessings would you both deny?" (Ismail, Husain, Omar, & Mohamad, 2019). Listening to Surah's of the Quran has an impact on the physical and psychological health of people. A study reported that listening of Surah Rehman helps to reduce the symptoms of depression in females (Rafique, Anjum, & Raheem, 2019) as well as stress and anxiety (Bakar, Yazid, & Ishak, 2014) provide divine relaxation to people (Zulkarnain, Suwandi, & Wibowo, 2015). Sadness and depression occur due to emotional imbalance and recitation of the Quran provide them with a solution for restoring psychological health or in other way serve as treatment (Jones, 2013). People can be different in their behaviors, evaluation and coping patterns to deal with the life stressors such as physical problems, trauma, relationship issues, occupational and economic problems, modifications in various stages of life and psychological issues (Seiffge-Krenke, 2013). Recitation of different Surah of the Quran helps to safeguard and function as a barrier when susceptibility increases to distress. It provides direction, relief, safety to people and aids to cognitively coping the distressing situations. Quran has an impact on the management of the stressors and its consequences (Vaghefi, Nasrabadi, Golpayegani, Mohammadi, & Gharibzadeh, 2015). In the Quran, Allah mentioned that "Verily, through every difficulty, there is relief" (Khan, Mughul, Khan, 2013). Mediation, as practiced in Zikr (the remembrance or repetition of the divine unity, La Ilaha Illa Elah), is a potential method of relaxation. Zikr is

1386

mentioned in the Qur'an as having a calming effect on the believers ((Khan, Mughul, Khan, 2013): "Those who believe, their hearts being at rest in God's remembrance-in God's remembrance is at rest the hearts of those who believe and do righteous deeds; theirs is blessedness and a fair resort". An interventional study was administered in Lahore ((Rafique, Anjum, & Raheem, 2019), the experimental group was recommended to offer tahajjud prayer plus recitation of verses of Quran whereas the control group to do other house-hold activities. The results showed that twenty-five out of thirty-patients reported notable recovery from depression as compared to another group. Religious involvement is related by the cognitive changes induced by praying behavior, where a higher level of religious involvement is related to lower levels of distress and mental illness (James & Wells, 2003). Praying behaviors can be evoked in fearful situations, anxieties and this behavior facilitates them to manage such events in their life. Similarly, when people allocate their discomfort and miseries to external factors such as to the will of Allah and destiny, they experience relief and harmony in their life. There is a strong relationship between psychological disturbances and religious coping process (Smith, McCullough, & Poll, 2003). The purpose of this study was to assess Surah Rehman effectiveness on the management of stress, anxiety and depression in undergraduate medical students, which will be helpful for them to cope with their psychological problems.

Materials & methodology

The total number of the participants were 80 including both male (n=40) and female (n=40). The students who were suffering from severe depression or anxiety and taking any medications for any physical illness or mental illness were excluded. The age range of the students was 21-23years. The Perceived Stress Scale (PSS) and Depression, Anxiety and Stress Scale (DASS-21) questionnaires were used in this study for screening. It was an experimental study, conducted in a private medical college of Peshawar. Initially, the permission was taken from the authorities to conduct the study and consent was taken from the students for participation in

the study. After that the list of the students was made, having mild to moderate stress, anxiety and depression based on their scores on the questionnaire (PSS & DASS-21). Students were assigned randomly to the experimental and control group. In each group, there were 40 participants (both male and female). In the second phase, the students were instructed about the sessions and time duration. The clinical setting was prepared to be comfortable and relaxed for the participants with dim lights and having a proper audio-visual system. The confounding variables like noise, distractions and temperature were controlled. In the third step, the participants of both groups received the interventions. The experimental group listened to the surah Rehman with visual content and translation whereas the control group has taken relaxation technique with relaxing video and music at the background. In the initial two weeks, they were taking the sessions regularly, after that on alternative days up to 2 months sessions were administered to the participants. In the fourth phase, post-assessment was done through questionnaires (PSS & DASS-21). The student's feedback was taken and debriefed about the process. The data was entered in the SPSS version 22.0 and independent t-test was used to analyze the data.

Results

Table 1: It represents the mean & SD of Stress before and after the treatment.

Variable	Surah Rehman		Relaxation		T(df)	p-value	95% confidence interval		Cohen's d
	M	SD	M	SD			LL	UP	
Pre-Stress	16.5	1.13	16.9	1.28	-1.47(78)	>0.05	-.93	.13	0.331
Post-Stress	8.90	2.38	13.2	2.13	-8.64(78)	<0.001	-5.38	-3.36	1.903

Table 2: It represents the mean & SD of anxiety before and after the treatment.

n							

Variable	Surah Rehman		Relaxation		T(df)	p-value	95% confidence interval		Cohen's d
	M	SD	M	SD			LL	UP	
Pre-anxiety	16.55	1.25	16.52	1.39	0.08(78)	>0.05	-.56	.61	0.002
Post-Anxiety	9.1	1.98	13.2	1.68	-9.89(78)	<0.001	-4.89	-3.25	2.232

Table 3: It represents the mean & SD of depression before and after the treatment.

Variable	Surah Rehman		Relaxation		T(df)	p-value	95% confidence interval		Cohen's d
	M	SD	M	SD			LL	UP	
Pre-Depression	17.10	1.08	17.05	1.03	0.21(78)	>0.05	-.42	.52	0.047
Post-Depressio	10.4	2.07	13.2	1.68	-6.63(78)	<0.001	-3.64	-1.95	1.485

Discussion

Surah Rehman describes the attributes of Allah, His mercy and gifts to mankind. The word of Allah revealed to our prophet has excellent expression and points out how can His blessings be denied True believers draw strength from this Surah and gets relief from physical and mental pains. This certainly has an impact on physical and psychological health. Listening to this Surah helps in providing relief to individuals from anxiety, depression and other worries. The results of this study showed that surah Rehman is the most effective in the management of stress, anxiety and depression. The basic purpose of the Islamic system is to bring harmony and equilibrium in a life of its followers (Muslims) through modifying every aspect of life, repositioning the primacies and developing congruent connection among the creator (God) and ndividuals ((Ismail, Husain, Omar, & Mohamad, 2019). Holy Quran is the revelation of Allah which signifies that it has treatment and solution of all diseases and problems of this world ((Bakar, Yazid, & Ishak, 2014). The principals of Quran help the individuals to live physically and mentally healthy life (Sabry & Vohra, 2013). Eighty-four per cent of the world population marked as part of some religion (Stonawski, Skirbekk, Hackett, Potancokova, & Grim, 2014), and Muslims population among them is 1 billion (Esposito, Shahin,2016). In the Islamic perspective, those who are closer to the Creator (Allah) are far away from problems. Thriving mental health and well-being can be achieved through submission to Allah, and individuals feel peace and pleasure (Joshanloo, 2013). When this balance is disrupted, people become depressed, anxious and substandard psychological well-being. Islam provides solutions to restore mental health (Worthington et al., 2016). The followers of Islam have well-built faith that their religion relates to every aspect of life i.e., personal, social and political (Esposito & Shahin, 2016). The effectiveness of different Islamic beliefs was applied to the bio-psycho-social model to treat and manage the psychiatric illnesses, emphasizing the changes in psychotherapeutic procedures including cognitive (Sabry & Vohra, 2013). The

results of the present study also indicate that the stress level of the people who were listening to Quran gradually decreases (table no 1). A study conducted in Iran showed that the Quran s more effective in the management of stress as compared to listening to music (Heidari & Shahbazi, 2013). This study also suggested that before endoscopy patients should listen to Quran for reducing stress. The present study also showed that Quran recitation also reduced the symptoms of anxiety (table no 2). The results of the present study were also supported by another study conducted on the recitation of Holy Quran on mental and physical health also indicates that along regulating the heartbeat and blood pressure, it also lowers the anxiety levels of individuals (N & M, 2011). Similarly, another study reported that listening to the Holy Quran before c-section is effective to manage the anxiety of the patient (Jabbari, Mirghafourvand, Sehhatie, & Mohammad-Alizadeh-Charandabi, 2020) Quranic verses and recitation are effective in reducing the depressive signs and symptoms (Rafique, Anjum, & Raheem, 2019) and the present study also indicates it (table no 3). In another study, it was found that traditional therapies were less efficacious than religious therapies among Muslim population (Ghiasi & Keramat, 2018). The Muslim depressive disorder patients were given two treatment i.e. religiously integrated psychotherapy and traditional Cognitive Behavior Therapy. The results showed the efficacy of spiritual psychotherapy as compared to cognitive behavior therapy. The interventional group were listening to the Quran lectures and recitation daily and outcome was enhanced n depressive symptoms (Ebrahimi, Neshatdoost, Mousavi, Asadollahi, & Nasiri, 2013). In dealing with psychiatric problems n Muslims the Quran recitation and spiritual beliefs are more effective. Similarly, Islam based treatments showed more shreds of evidence in psychological issues (Betteridge, n.d). In managing the psychological health-related issues eighty per cent of people use religious coping strategies (Tepper, Rogers, Coleman, & Malony, 2001). The religion is crucial for relief and attainment of mental health (Hamdan, 2008). The present study established the fact that if Muslims are more connected to their religion their mental health will improve and they will be ready to face daily problems more effectively.

Conclusions

Surah Rehman is an effective treatment for mild to moderate stress, anxiety, and depression. There should be a study to find out whether listening to surah Rehman helps in the prevention of stress, anxiety and depression. It can also provide an opportunity to assess its effectiveness on diagnosed anxiety and depression patients.

Conflict of Interest

None to declare

References

[1] Bakar, A., Yazid, A., & Ishak, N. M. (2014). Depression, Anxiety, Stress, and Adjustments among Malaysian Gifted Learners: Implication towards School Counseling Provision. International Education Studies, 7(13), 6–13.

[2] Betteridge, S. (n.d.). Exploring the clinical experiences of Muslim psychologists in the UK when working with religion n therapy. University of East London.

[3] Ebrahimi, A., Neshatdoost, H. T., Mousavi, S. G., Asadollahi, G. A., & Nasiri, H. (2013). Controlled randomized clinical trial of spirituality integrated psychotherapy, cognitive-behavioral therapy and medication intervention on depressive symptoms and dysfunctional attitudes in patients with dysthymic disorder. Advanced Biomedical Research, 2(1), 53.

[4] Esposito, J. L., & Shahin, E. E. (2016). The Oxford handbook of slam and politics. Oxford University Press.

[5] Ghiasi, A., & Keramat, A. (2018). The effect of listening to Holy Quran recitation on anxiety: A systematic review. Iranian Journal of Nursing and Midwifery Research, 23(6), 411–420.

[6] Hamdan, A. (2008). Cognitive restructuring: An Islamic perspective. Journal of Muslim Mental Health, 3(1), 99–116.

[7] Heidari, M., & Shahbazi, S. (2013). Effect of Quran and music on anxiety n patients during endoscopy. Knowledge and Health, 8(2).

[8] Ismail, S., Husain, R., Omar, S. H. S., & Mohamad, N. (2019). MANZIL VERSES AND TRANQUILIZING EFFECT IN OPIATE DEPENDENTS. Malaysian Journal Of Islamic Studies (MJIS, 3(1), 12–26.

[9]   Jabbari, B., Mirghafourvand, M., Sehhatie, F., & Mohammad-Alizadeh-Charandabi, S. (2020). The effect of holy Quran voice with and without translation on stress, anxiety and depression during pregnancy: a randomized controlled trial. Journal of Religion and Health, 1;59(1):544-54.

[10]   James, A., & Wells, A. (2003). Religion and mental health: towards a cognitive-behavioural framework. British Journal of Health Psychology, 8(Pt 3), 359–376.

[11]   Jones, W. L. (2013). Ministering to minds diseased: a history of psychiatric treatment. Elsevier.

[12]   Joshanloo, M. (2013). A comparison of western and Islamic conceptions of happiness. Journal of Happiness Studies, 14(6), 1857–1874.

[13]   Khan, Z. H., Mughal, I., & Khan, Y. (2013). Combination of Psychological and Religious Intervention in Reducing Psychological Distress among University Students. Dialogue (Pakistan.

[14]   N, M. A., & M, A. (2011). The effects of music and Holy Quran on patients' anxiety and vital signs before abdominal surgery. Evidence Based Care, 1(1).

[15]   Rafique, R., Anjum, A., & Raheem, S. S. (2019). Efficacy of Surah Al-Rehman in managing depression in Muslim women. Journal of Religion and Health, 58(2), 516–526.

[16]   Sabry, W. M., & Vohra, A. (2013). Role of slam in the management of psychiatric disorders. Indian Journal of Psychiatry, 205.

[17]   Seiffge-Krenke, I. (2013). Stress, coping, and relationships in adolescence. Psychology Press.

[18]   Smith, T. B., McCullough, M. E., & Poll, J. (2003). Religiousness and depression: evidence for a main effect and the moderating influence of stressful life events. Psychological Bulletin, 129(4), 614–636.

[19]   Stonawski, M., Skirbekk, V., Hackett, C., Potančoková, M., & Grim, B. (2014). The size and demographic structure of religions in Europe. In Yearbook of International Religious Demography 2014 (pp. 131–142). BRILL.

[20]   Tepper, L., Rogers, S. A., Coleman, E. M., & Malony, H. N. (2001). The prevalence of religious coping among persons with persistent mental illness. Psychiatric Services (Washington, D.C.), 52(5), 660–665.

[21]   Vaghefi, M., Nasrabadi, A. M., Golpayegani, S. M. R. H., Mohammadi, M.-R., & Gharibzadeh, S. (2015). Spirituality and brain waves. Journal of Medical Engineering & Technology, 39(2), 153–158.

[22]   Worthington, E. L., Jr, Griffin, B. J., Toussaint, L. L., Nonterah, C. W., Utsey, S. O., & Garthe, R. C. (2016). Forgiveness as a catalyst for psychological, physical, and spiritual resilience in disasters and crises. Journal of Psychology and Theology, 44(2), 152–165.

[23]   Zulkarnain, E., Suwandi, T., & Wibowo, A. (2015). INDICATORS OF HEALTHY PRACTICE IN PHYSICAL, MENTAL, SOCIAL AND SPIRITUAL ASPECTS IN ELDERLY. International Journal of Academic Research, 7.