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The Effect of Relaxation Therapy, Benson and Murotal Al-Qur'an Surah Ar Rahman, on the Sleep Quality of Hypertensive Patients in The Kaliwungu Kudus Health Center Area

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ABSTRACT

Purpose: This study aims to analyze the effect of combining Benson relaxation therapy with the recitation of Surah Ar-Rahman of the Qur'an on sleep quality in hypertensive patients.

Research Method: This study uses a quasi-experimental design with a control group approach. A total of 40 respondents were divided into two groups: the intervention group, which received a combination of Benson relaxation therapy and Surah Ar-Rahman murottal, and the control group, which received no treatment. Respondents' sleep quality was measured using the Pittsburgh Sleep Quality Index (PSQI) instrument.

Results and Discussion: The results showed a significant improvement in sleep quality in the intervention group after therapy, while the control group showed no significant change. Statistical analysis yielded a p-value of 0.000 ($p < 0.05$), indicating that the combination of Benson's relaxation therapy and recitation of Surah Ar-Rahman from the Qur'an significantly improved sleep quality in hypertensive patients. These findings suggest that the combination of therapies can serve as a safe, easy-to-apply, non-pharmacological intervention to improve sleep quality in hypertensive patients.

Implications: The practical implication of these findings is that healthcare professionals can incorporate Benson therapy and the recitation of Surah Ar-Rahman as a non-pharmacological intervention in the management of hypertension. This method is easy to implement both in healthcare facilities and independently at home, thereby helping to improve sleep quality, reduce stress, and support patients' blood pressure control.

Keywords: ar rahman; benson relaxation therapy, murotal; al-qur'an; sleep quality; hypertension patients.

Introduction

Hypertension is a growing global health problem. According to data from the World Health Organization (WHO), more than 1.28 billion people worldwide have high blood pressure, and this number is expected to continue to rise as lifestyle and dietary patterns change (WHO, 2023). According to Riskesdas (2018), the prevalence of hypertension in Indonesia is 34.1% (around 63,309,620 inhabitants), up from 25.8% in 2013. Meanwhile, Prevalence in Central Java is 37.57% (Basic Health Research (Riskesdas), 2018). Moreover, at the Kaliwungu Kudus Health Center in 2023, 19,174 visits were

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recorded (Kudus Regency Health Office, 2023). Hypertension has a wide impact on health, not only in the form of increased blood pressure, but it can also lead to various serious complications such as heart disease, stroke, and kidney failure (Zakaria et al., 2022). Based on a review of 15 studies, hypertension increased the risk of ischemic stroke by 3.45 times and hemorrhagic stroke by 3.66 times. This risk increases drastically in uncontrolled hypertension, which is up to 3,848 times. The duration of hypertension also has an effect, with a risk of stroke of 15.6% in men and 12.9% in women after 15 years of hypertension (Saifullah et al., 2024).

Sleep quality is one of the needs that must be met well in hypertensive patients. Poor quality can affect the body's physiological mechanisms in regulating blood pressure. During adequate, quality sleep, the autonomic nervous system is in balance, with predominance of parasympathetic activity that helps lower heart rate and blood pressure. On the other hand, sleep disorders such as short, frequent waking up, or restlessness can increase sympathetic nerve activity, the secretion of stress hormones such as cortisol and adrenaline, and peripheral vascular resistance. This condition causes a persistent increase in blood pressure and disrupts the circadian rhythm of blood pressure, which normally decreases at night (nocturnal dipping) (Ningtyas, 2025). The study of 60 respondents found a significant relationship between sleep quality and the incidence of hypertension. Of the 43 respondents who experienced hypertension, 86.5% had poor sleep quality. On the other hand, of the 17 respondents who did not experience hypertension, the majority (52.2%) had good sleep quality. Statistical analysis showed that the value of p = 0.003 and the Odds Ratio (OR) was 6,982 (95% CI: 2,004–24,322), indicating that individuals with poor sleep quality had nearly seven times greater risk of developing hypertension than those with good quality sleep (Rahmadhani Kaban et al., 2022). Another study found that the proportion of poor sleep quality increased with the severity of hypertension. In patients with grade I hypertension, as many as 33 people (66.0%) had poor sleep quality. Meanwhile, in patients with grade II hypertension, the proportion increased to 77.8% (14 people) (Eswarya et al., 2023). These findings suggest that poor sleep quality plays a significant role in increasing the risk of hypertension, so improving sleep patterns needs to be part of hypertension prevention and management strategies

Various methods have been developed to improve sleep quality, ranging from cognitive therapy to sleep medications to relaxation techniques. However, the use of sleeping pills is often associated with the appearance of side effects as well as potential dependency that can pose a risk of addiction (Ramadhani et al., 2023). Therefore, non-pharmacological interventions are safer and recommended alternatives, one of which is through the Benson relaxation technique. Herbert Benson developed this technique to help individuals achieve a state of deep relaxation that can reduce physiological stress. The application of Benson's relaxation is effective in reducing pain, sleep disorders such as insomnia, and lowering anxiety levels (Hidayat & Amir, 2021). In addition to relaxation techniques, spiritual approaches such as Qur'anic murottal therapy also provide calming effects that can improve psychological conditions and promote relaxation (Ramadhani et al., 2023). One of the surahs often used is Surah Ar-Rahman because the beautiful chanting of its verses is believed to foster gratitude, calm emotions, and strengthen patients' spiritual balance (Aini et al., 2024).

Several studies have supported the effectiveness of Benson's relaxation therapy in improving sleep quality and lowering blood pressure in hypertensive patients. Sutrisno & Nursalam (2022) reported that the application of the Benson Relaxation Technique (BRT) significantly improved sleep quality and reduced blood pressure. These results reinforce the finding that Benson's relaxation lowers sympathetic nervous system activity, creating a physiologically calmer state. Other studies have shown that the combination of BRT and Murotal al-Qur'an can significantly reduce fear and improve sleep

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quality in high-pressure patients (Ramadhani et al., 2023). The results of the initial survey on six hypertensive patients at the Kaliwungu Health Center showed that all respondents experienced sleep disturbances when their blood pressure was >150 mmHg. The reported disorders included 2 patients experiencing insomnia due to poor sleep, often waking up at night, difficulty sleeping, and feeling tired when waking up. These findings suggest that hypertensive patients in the region are in dire need of non-pharmacological interventions to help improve sleep quality.

Literature Review and Hypothesis Development

Benson's Relaxation

Benson relaxation is a technique developed by Dr. Herbert Benson, primarily aimed at reducing stress and improving mental and physical health. This technique is simple but highly effective: repeat a word, phrase, or sentence with a calming effect while focusing on deep, slow, and regular breathing. This process helps the body enter a state of natural relaxation, called the relaxation response, which is the direct opposite of the stress or "fight or flight" response that the body often experiences in stressful conditions (Setyorini et al., 2024). Benson relaxation is a respiratory relaxation response method that involves the patient's belief factor, creating an internal environment that can help patients achieve higher levels of health and well-being (Full, 2024).

Murrotal Al-Qur'an Surah Ar-Rahman

Qur'an murottal therapy is a type of voice therapy. The effects of sound therapy are psychological and neurological. The rhythm can improve the nervous system, leading to improvements in the body's mechanisms in the elderly. This improvement in sleep quality is also due to increased parasympathetic activity. Murottal Al Qur'an can spur the parasympathetic nervous system, which has the opposite effect to the sympathetic nervous system. So that there is a balance in the two autonomic nervous systems (Siregar et al., 2023). Murottal Surah Ar-Rahman is the practice of listening to the recitation of Surah Ar-Rahman, which has calming and therapeutic effects. This surah not only conveys the beauty of reciting the Qur'an but also conveys a profound message about the importance of gratitude and acceptance of Allah's will. By listening to this reading, one can feel calmer, less anxious, and more at peace when dealing with various life situations (Graduation et al., 2024).

Sleep Quality

Sleep is an important physiological process in humans that helps maintain health and sustain biological, physiological, social, and cultural functions. Sleep can affect health and quality of life. Low sleep quality is an indicator of many medical diseases, and there is a strong link between physical, psychological, and sleep health (Haryati, 2020). Sleep disorders are a group of conditions characterized by disturbances in the amount, quality, or timing of an individual's sleep. An older adult will take longer to fall asleep (lying in bed for a long time before falling asleep) and have less or shorter sleep time (Hasibuan, 2021)

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Hypertension

Hypertension is a manifestation of a multifactorial hemodynamic imbalance in the cardiovascular system; thus, no single factor can explain its mechanism. High blood pressure, or hypertension, is a condition in which a person's blood pressure is above normal, as indicated by elevated systolic and diastolic readings (Mayasari, 2021). Hypertension is a vascular disorder that results in increased pressure on the walls of blood vessels due to narrowing caused by various factors, the most common being arterial plaques. Hypertension is a condition in which systolic blood pressure exceeds 140 mmHg and diastolic blood pressure exceeds 90 mmHg. The blood vessel pressure of hypertensive patients will increase over a long period of time due to the condition of the problematic blood vessels (Sukarmin et al., 2023)

The Effect of Benson and Murotal Al-Qur'an on Sleep Quality in Hypertensive Patients

According to research conducted by Rahmat (2021), entitled The Effect of Benson Relaxation Techniques on Sleep Quality in the Elderly, " the results of the Independent T-Test analysis obtained a P-value = 0.000 (0.000< 0.05). Thus, benzodiazepine-induced relaxation affects sleep quality in the elderly. From this study, it is hoped that the benzon relaxation technique can be a non-pharmacological therapy in providing nursing care to elderly patients who experience sleep disorders.

Research Method

This study is a quantitative study with a quasi-experimental design, using a pre- and post-test control group approach. The number of hypertensive patients in the Kaliwungu Kudus Health Center's working area is 40. Based on the sample calculation, the sample size was 39.85, rounded up to 40 respondents, divided into 2 groups: a control group of 20 and an intervention group of 20. Data collection in this study was conducted after obtaining ethical approval and research permits from the relevant parties. The data collection process is carried out in two stages, namely before and after the intervention. The instruments used in this study were questionnaires on respondent characteristics, benzon therapy with a combination of murotal Qur'an surah Ar-rahman, and a sleep quality questionnaire. The data analysis methods used are univariate analysis and bivariate analysis.

Results and Discussion

Analysis Results

Table 1. Age Characteristics of Respondents

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Characteristics	Intervention n=20		Controls n=20	
	f	%	f	%
Gender				
Women	20	100	20	100
Jobs				
IRT	17	85	12	60
Self-employed	2	10	4	20
Labor	1	5	4	20
Education				
Not in school	3	15	3	15
SD	13	65	9	45
Junior High School	4	20	4	20
High School	0	0	4	20
Marital Status				
Married	13	65	10	50
Widow	7	35	10	50
Riwyat Hypertension				
Have a history of hypertension	20	100	20	100
Age				
Red	59		54	
SD	7.582		6.939	
Min-Max	45-75		44-68	

Source: *Primary data 2025*

Based on Table 1 of gender, all respondents in the intervention and control groups were women (100%). The average age of respondents in the intervention group was 59 years (SD 7,582; range 45–75 years), while in the control group it was 54 years (SD 6,939; range 44–68 years). Occupation: most respondents in the intervention group were housewives (IRT), namely 17 (85%), while in the control group, 12 (60%). By education level, in the intervention group, most respondents had completed elementary school (13, 65%), followed by junior high school (4, 20%), and 3 (15%) were not in school. In the control group, most respondents were also elementary education, namely 9 respondents (45%), followed by junior high and high school, 4 respondents each (20%), and 3 respondents who were not in school (15%). By marital status, most respondents in the intervention group were married (13, 65%), while widows accounted for 7 (35%). In the control group, married and widowed respondents numbered 10 (50% each). Based on the history of hypertension, all respondents in the intervention group and the control group had a history of hypertension, with as many as 20 respondents (100%). This shows that respondents are a high-risk group, so nonpharmacological companion interventions are needed to help control blood pressure.

Distribution of Sleep Quality Respondent Answers

Table 2. Distribution of Respondent Answers (n=20)

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Groups	Categories	Median	±SD	Min	Max
Intervention Groups	Before Intervention groups	10.00	2.109	6.00	14.00
	After Intervention groups	3.00	1.380	2.00	7.00
Control group	Before the control group	8.00	1.761	6.00	13.00
	After the control group	8.00	1.165	6.00	11.00

Source: *Primary data 2025*

Based on the results in table 2 regarding the sleep quality of hypertensive patients in the intervention group and control group, results were obtained in the intervention group before being given Benson relaxation therapy and the murotal of the Qur'an Surah Ar-Rahman, the median value of sleep quality was 10.00 with a standard deviation of ±2.109, a minimum value of 6.00, and a maximum of 14.00. A relatively high median value indicated that most respondents experienced poor sleep quality prior to the intervention. After the intervention, the median decreased to 3.00, with a standard deviation of 1,380, a minimum of 2.00, and a maximum of 7.00. This median decrease indicates a significant improvement in sleep quality after therapy. Meanwhile, in the control group, before treatment, the median sleep quality was 8.00, with a standard deviation of 1,761, a minimum of 6.00, and a maximum of 13.00. This value illustrates that respondents in the control group also experience poor sleep quality. After a period of observation without intervention, the median sleep quality remained at 8.00, with a standard deviation of 1.165, a minimum of 6.00, and a maximum of 11.00. The absence of a median change suggests that the control group's sleep quality did not improve.

Normality Test

Based on the results of the Shapiro–Wilk normality test in Table 4.3, the pre-test intervention group showed a p-value of 0.376 (> 0.05), indicating that the data were normally distributed. Post-test: P-value = 0.017 (< 0.05), so the data is not normally distributed. Pre-test group: p-value = 0.154 (> 0.05), so that the data is distributed normally. Post-test: P-value = 0.011 (< 0.05), so the data is not normally distributed. Overall, there was a mix of normally and abnormally distributed data in both groups. Since one or more parts of the data are not normally distributed ($p < 0.05$), the analysis for the difference test uses non-parametric tests: the Mann-Whitney test for comparing the two groups and the Wilcoxon test for the before-and-after comparison within the group.

Table 3. Normality Test

		Shapiro-Wilk		
	Categories	Statistic	Df	Sig.
Intervention groups	Pre-test intervention group	.951	20	.376
	Post-test intervention group	.879	20	.017
Control group	Pre-test intervention group	.930	20	.154
	Post-test intervention group	.869	20	.011

Source: *primary data 2025*

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Table 4. Analysis of the Effects of Benson Relaxation Therapy and Murotal Al-Qur'an Surah Ar Rahman on Sleep Quality in Hypertensive Patients

Statistical Test	Groups	N	Mean Rank	Sum of Ranks	p-value
Mann–Whitney (before)	Intervention	20	24.48	489.50	0.029
	Controls	20	16.53	330.50	
Mann–Whitney (after)	Intervention	20	10.80	216.00	0.000
	Controls	20	30.20	604.00	
Wilcoxon	Intervention	20	10.50	210.00	0.000
	Controls	20	5.88	47.00	0.039

Source: *Primary data 2025*

Based on the results of the Mann-Whitney test, the intervention group had a mean rank of 24.48 and a sum of ranks of 489.50, while the control group had a mean rank of 16.53 and a sum of ranks of 330.50. The statistical test yielded a p-value of 0.029 ($p < 0.05$), indicating a significant difference in sleep quality between the intervention and control groups before treatment. In the post-test results, the intervention group had a mean rank of 10.80 and a sum of ranks of 216.00, while the control group had a mean rank of 30.20 and a sum of ranks of 604.00. The results of the Mann–Whitney test showed $p = 0.000$ ($p < 0.05$), indicating a highly significant difference in sleep quality between the intervention group and the control group after receiving Benson relaxation therapy and the Qur'an murotal Surah Ar-Rahman.

Based on the Wilcoxon Test in the intervention group, 20 respondents (100%) had negative ranks, with a mean rank of 10.50, and a sum of ranks of 210.00; there were no positive ranks or ties. This showed that all respondents experienced improved sleep quality after the intervention. The p-value = 0.000 ($p < 0.05$) indicates a significant difference in sleep quality before and after the intervention. In the control group, negative ranks were obtained for 8 respondents (40%), positive ranks for 2 respondents (10%), and ties for 10 respondents (50%), with a mean rank of negative 5.88 (sum of ranks 47.00) and a mean rank of positive 4.00 (sum of ranks 8.00). These results showed that changes in sleep quality among the control group were uneven, with some respondents improving, others worsening, and others not changing. The p-value of 0.039 ($p < 0.05$) indicated a significant difference, but with a smaller effect than in the intervention group. Overall, the intervention group's p-value (0.000) was smaller than the control group's (0.039), indicating that the intervention had a stronger effect on improving sleep quality in hypertensive patients.

Discussion

The results of this study show that. After therapy was administered to the intervention group, the median sleep quality decreased to 3.00, with a standard deviation of 1.380, a minimum of 2.00, and a maximum of 7.00. This decrease in the median value indicated a significant improvement in sleep quality following the administration of Benson relaxation therapy and the Qur'anic murottal. In the control group, before treatment, the median sleep quality was 8.00, with a standard deviation of 1.761, a minimum of 6.00, and a maximum of 13.00. After a period of observation without intervention, the

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median sleep quality remained at 8.00, with a standard deviation of 1.165, a minimum of 6.00, and a maximum of 11.00. The lack of change in median values indicates that, without relaxation interventions, the sleep quality of hypertensive patients does not improve.

Based on the Mann–Whitney test, the p-value was 0.029 ($p < 0.05$), indicating a significant difference in sleep quality between the intervention and control groups before treatment. In the post-test results, the Mann–Whitney test showed $p = 0.000$ ($p < 0.05$), indicating a highly significant difference in sleep quality between the intervention group and the control group after receiving Benson relaxation therapy and the Qur'anic murotal Surah Ar-Rahman. The Wilcoxon test results for the intervention group showed a p-value of 0.000 ($p < 0.05$), indicating a significant difference in sleep quality before and after the intervention. In the control group, the p-value was 0.039 ($p < 0.05$), indicating a difference, but with a smaller effect than in the intervention group. Overall, the intervention had a stronger effect on improving sleep quality in hypertensive patients. Benson relaxation causes the body to respond by producing alpha wave frequencies in the brain, which can cause feelings of happiness, joy, and confidence, so that it can suppress the release of the hormones cortisol, epinephrine, and norepinephrine, which are powerful vasoconstrictors in blood vessels when Benson relaxation therapy is carried out. The murottal therapy of the Qur'an, Surah Ar-Rahman, itself encompasses several aspects, including the influence of the sympathetic and parasympathetic nervous systems on health (Dwi Mulianda, 2021).

The results of this research are in line with those carried out by Isti (2023) with the title The Effect of Murottal Al-Qur'an Therapy Surah Ar-Rahman on the Quality of Sleep of the Elderly, the elderly who were given Murottal Al-Qur'an therapy, as many as 20 respondents, 18 respondents (90%) had poor sleep disorders, and 2 respondents (10%) had very poor sleep disorders. Some older adults complain about frequent urination. Urine, lots of thoughts, environment. The results of the data analysis using the Wilcoxon test showed a ρ value of 0.000, so the alternative hypothesis (Ha) was accepted, indicating that Murottal Al-Qur'an therapy surah Ar-Rahman affects the quality of sleep among the elderly at the Budhi Dharma Orphanage Nursing Home in Yogyakarta. (Isti, 2023). Sound waves from YouTube-tuned murottal readings can affect brain wave activity, particularly by increasing alpha waves, which are associated with relaxed, calm states. This calming effect can reduce anxiety, stress, and even pain, and also improve sleep quality. In addition, for Muslim patients, the Qur'an murottal also provides a sense of spirituality and closeness to God, which can strengthen inner peace and psychological resilience (Alvian, 2025).

According to research conducted by Tifany, (2025) with the title Effect of the Combination of Benson and Murottal Al-Qur'an Relaxation on Lowering Blood Pressure and Anxiety in Hypertensive Patients, the results of the blood pressure distribution of the majority of the pretest intervention group suffering from Pre-Hypertension (systolic TD 120 – 139 mmHg, diastolic TD 80 – 89 mmHg) a total of 15 respondents (53.6%), 7 respondents (25.0%) suffered from stage 1 hypertension and 6 respondents suffered from stage 2 hypertension. The posttest results showed that 25 (89.3%) respondents had pre-hypertension, and 1 (3.6%) had stage 1 hypertension (systolic TD 140–159 mmHg, diastolic TD 90–99 mmHg). The results of the Wilcoxon Signed-Rank Test for pretest and posttest blood pressure values ($p = 0.003$; $p < 0.05$) indicate changes in blood pressure in the treatment group of hypertensive patients. Distribution of pretest results in the control group: the majority of patients with stage 1 hypertension (systolic TD 140 – 159 mmHg, diastolic TD 90 – 99 mmHg) were 20 respondents (71.4%); pre-hypertension, 5 respondents (17.9%); and stage 2 hypertension, 3 respondents (10.7%). The posttest results were mostly stage 1 hypertension (22 respondents, 76.6%), with 6 (21.4%) in pre-hypertension.

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The results of the Wilcoxon Signed-Rank Test showed that, in the control group of hypertensive patients, there was no change in blood pressure ($p = 0.248$; $p > 0.05$). (Tifany, 2025).

Strengthened based on the results of the research conducted Tiorica, (2024) entitled The effect of murottal therapy of the Qur'an surah ar-rahman on improving the sleep quality of rectal cancer patients, The results of this study show that the sleep quality of rectal cancer patients before the therapy of the murottal Qur'an surah Ar-Rahman in the intervention group and the control group were all in the poor category. After murottal therapy of the Qur'an, Surah Ar-Rahman in the intervention group was mostly in the good category (72.2%), and in the control group was mostly in the bad category (66.7%). Reciting Surah Ar-Rahman improved sleep quality in rectal cancer patients at Murni Teguh Memorial Hospital in 2022 ($p = 0.021 < 0.05$). So it can be concluded that the murottal therapy of the Qur'an Surah Ar-Rahman improves the quality of sleep of rectal cancer patients. Suggestions: (Tiorica, 2024). In this study, researchers suggest that benzon relaxation therapy should be administered in the morning before meals and in the evening before bed, as it is more effective when given 2 hours before or after breakfast. After all, when the stomach is not digesting food, the sympathetic nerves will work more effectively during relaxation.

Conclusion

In the intervention group, the median sleep quality decreased to 3.00, with a standard deviation of 1.380, a minimum of 2.00, and a maximum of 7.00. This decrease in the median value indicated a significant improvement in sleep quality following the administration of Benson relaxation therapy and the Qur'anic murottal. In the control group, before treatment, the median sleep quality was 8.00, with a standard deviation of 1.761, a minimum of 6.00, and a maximum of 13.00. After a period of observation without intervention, the median sleep quality remained at 8.00, with a standard deviation of 1.165, a minimum of 6.00, and a maximum of 11.00. The lack of change in median values indicates that, without relaxation interventions, the sleep quality of hypertensive patients does not improve.

Based on the Mann–Whitney test of the pre-test data, $p = 0.029$ ($p < 0.05$) indicated a significant difference in sleep quality between the intervention and control groups before treatment. In the post-test results, the Mann–Whitney test showed $p = 0.000$ ($p < 0.05$), indicating a highly significant difference in sleep quality between the intervention group and the control group after receiving Benson relaxation therapy and the Qur'an murotal Surah Ar-Rahman. The Wilcoxon test results for the intervention group showed a p-value of 0.000 ($p < 0.05$), indicating a significant difference in sleep quality before and after the intervention. In the control group, the p-value was 0.039 ($p < 0.05$), indicating a difference, but with a smaller effect than in the intervention group.

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