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THE EFFECT OF HEALING TOUCH THERAPY AND DZIKR ON THE QUALITY OF LIFE OF TYPE 2 DIABETES MELLITUS

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ABSTRACT

Type 2 Diabetes Mellitus (T2DM) is one of the most common non-communicable diseases and remains a major global health challenge. This chronic metabolic disorder develops progressively and requires lifelong treatment and self-management. According to the World Health Organization (WHO, 2023), the global prevalence of diabetes continues to increase, affecting millions of people worldwide and contributing substantially to morbidity, mortality, and healthcare costs. Beyond its physical complications, T2DM can negatively affect patients' psychological well-being, social functioning, and overall quality of life. Improving the quality of life of patients with T2DM has therefore become an important objective of diabetes management. In addition to pharmacological treatment, complementary therapies such as healing touch and dzikir have gained attention for their potential benefits in enhancing physical comfort, reducing stress, promoting relaxation, and improving spiritual well-being. These interventions may contribute to better adaptation to chronic illness and ultimately improve patients' quality of life. Therefore, this study aimed to analyze the effect of healing touch and dzikir therapy on the quality of life of patients with Type 2 Diabetes Mellitus. Specifically, the study sought to identify patients' quality of life before and after receiving healing touch and dzikir therapy and to compare changes in quality of life between the intervention group and the control group. This research was conducted on DM patients at Kayen Health Center, Kayen District, Pati Regency. This study uses a quantitative approach. The quantitative approach is used to see the causal relationship between the independent variable and the dependent variable. Based on its level of explanation, this study is an associative type of research with a causal relationship pattern. The study involved 44 respondents divided into an intervention group (n=22) and a control group (n=22) with relatively homogeneous characteristics. The average quality of life score in the intervention group increased from 68.36 to 93.36 (a difference of 25.00 points), while in the control group it increased from 68.36 to 69.41 (a difference of 1.05 points). The paired t-test results showed a significant increase in the intervention group ($p<0.001$), while in the control group it was not significant ($p=0.489$). Comparison between the two groups also showed a significant difference ($p<0.001$), indicating that healing touch and dhikr therapy are effective in improving the quality of life of patients with Type 2 Diabetes Mellitus. Healing touch therapy and dhikr have been proven effective in improving the quality of life of Type 2 Diabetes Mellitus patients. The average quality of life score in the intervention group increased from 68.36 to 93.36, while the control group did not show any significant improvement. Statistical test results indicated a significant effect of healing touch therapy and dhikr on the quality of life of Diabetes Mellitus patients. 2 ($p<0,001$). The study involved 44 respondents divided into an intervention group (n=22) and a control group (n=22) with relatively homogeneous characteristics. The average quality of life score in the intervention group increased from 68.36 to 93.36 (a difference of 25.00 points), while in the control group it increased from 68.36 to 69.41 (a difference of 1.05 points). The paired t-test results showed a significant increase in the intervention group ($p<0.001$), while in the control group it was not significant ($p=0.489$). Comparison between the two groups also showed a significant difference ($p<0.001$), indicating that healing touch and dhikr therapy are effective in improving the quality of life of patients with Type 2 Diabetes Mellitus.

Keywords: dhikr; healing touch; quality of life; spiritual therapy; type 2 diabetes mellitus

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INTRODUCTION

Type 2 Diabetes Mellitus (Type 2 DM) is one of the non-communicable diseases that continues to be a major health issue worldwide. This disease is chronic, develops gradually, and requires long-term care and management. According to the World Health Organization (WHO, 2023), non-communicable diseases account for about 74% of all global deaths, with diabetes mellitus being one of the main contributors due to the long-term complications it causes. WHO also reports that more than 422 million people worldwide have diabetes, and most of these cases are Type 2 DM. The high incidence of Type 2 DM is closely related to unhealthy lifestyles, poor diets, lack of physical activity, and increasing psychological stress. The increase in the number of people with diabetes globally is also affirmed by the International Diabetes Federation (IDF). In the 10th edition of the IDF Diabetes Atlas report, it is stated that by 2025 there will be around 537 million adults aged 20–79 years living with diabetes. This number is expected to continue to increase to 643 million people in 2030 and reach 783 million people by 2045 (International Diabetes Federation, 2025).

Indonesia is one of the countries with the highest number of diabetics in the world. Based on IDF report data, Indonesia ranks fifth in the world in the number of diabetics after China, India, the United States, and Pakistan. It is estimated that the number of people with diabetes in the adult population in Indonesia reaches around 20.4 million people, and most of them are Type 2 DM The high prevalence of diabetes shows that the disease is not only a health problem, but also has an impact on social and economic aspects, especially related to the decline in the quality of life of individuals, families, and communities (International Diabetes Federation, 2025).

Pati Regency as one of the regions in Central Java Province as well as Pati Regency shows that diabetes mellitus is one of the chronic diseases with a high number of visits to first-level health service facilities, especially health centers (Pati, 2017). The high number of visits reflects that diabetes is still a significant health burden for the people of Pati Regency, so a more effective, holistic, and focused health service strategy is needed to improve the quality of life of patients. Based on data from the Chronic Disease Management Program (Prolanis) of the Kayen Health Center in 2024, there are 120 patients with Type 2 Diabetes Mellitus who are registered and undergoing routine monitoring. This number shows that Diabetes Mellitus is one of the chronic diseases that requires continuous health services in the work area of the Kayen Health Center. This condition indicates the need for disease management efforts that not only focus on controlling blood glucose levels, but also on improving the quality of life of patients.

A spiritual approach is one of the important aspects of holistic nursing care, especially in patients with chronic diseases such as Type 2 Diabetes Mellitus. Dhikr is a spiritual activity in the form of repetition of certain words that aim to get closer to God and foster inner peace. The practice of dhikr has been proven to provide a relaxation effect, reduce stress and anxiety levels, and improve the psychological well-being of patients (Koenig, 2018). In patients with chronic diseases, the spiritual calm obtained through dhikr plays a role in increasing self-acceptance of disease conditions, strengthening coping mechanisms, and positively impacting the overall quality of life (Prasetyo et al. n.d.2023).

Based on the results of an initial survey conducted by researchers at the Kayen Health Center in January 2026 on 10 patients with Type 2 Diabetes Mellitus, data was obtained that 6 patients (60%) admitted that they often felt anxious about the development of the disease and the possibility of complications, 7 patients (70%) stated that they often felt stressed because they had to undergo treatment in the long term, and 5 patients (50%) complained of difficulty sleeping due to thinking about their health condition. In addition, 8 patients (80%) stated that they had never received structured spiritual assistance or dhikr therapy as part of disease management efforts. The results of the survey showed that psychological and spiritual aspects are still problems experienced by Type 2 Diabetes Mellitus patients at the Kayen Health Center, so interventions are needed that can help

improve the patient's inner peace, coping ability, and quality of life by analyzing the effect of healing touch and dhikr therapy on the quality of life of Type 2 Diabetes Mellitus patients at the Kayen Health Center. In particular, this study aims to identify the quality of life of patients before and after the administration of healing touch and dhikr therapy and analyze the differences in quality of life between the intervention group and the control group.

METHOD

This study was carried out on DM patients at the Kayen Health Center, Kayen District, Pati Regency. This study uses a quantitative approach. A quantitative approach is used to look at the causal relationship between independent variables and bound variables. Based on the level of explanation, this study is a type of associative research with a form of causal relationship. Causal relationships are causal relationships, where there are independent variables (influencing variables) and bound variables This research was carried out at the Kayen Health Center, Kayen District, Pati Regency. This study uses a quantitative approach with a quasi-experimental design using a pretest-posttest control group design. The population in this study is all Type 2 Diabetes Mellitus patients registered in the Chronic Disease Management Program (Prolanis) of the Kayen Health Center in 2024 as many as 120 patients. The research sample was selected using a purposive sampling technique based on the inclusion and exclusion criteria that have been set by the researcher. The number of research samples was 40 respondents which were divided into two groups, namely 20 respondents in the intervention group and 20 respondents in the control group.

Data collection was carried out using quality of life questionnaires given before the intervention (pretest) and after the intervention (posttest). The intervention group was given healing touch and dhikr therapy according to the research procedure, while the control group only received routine services provided by the health center. The data that has been collected is analyzed using a computer statistical program. Univariate analysis was used to describe the characteristics of respondents and the distribution of research variables. Bivariate analysis used the Paired t-test to determine the difference in quality of life before and after the intervention in each group, and the Independent t-test to determine the difference in quality of life between the intervention group and the control group. The level of statistical significance was set at a p value < 0.05.

RESULT

Based on table 1 of respondent characteristics, it is known that the number of respondents in the intervention group and the control group was 22 respondents each. Based on the age, the majority of respondents in both groups were in the age range of 51-60 years, namely 17 respondents (77.2%) while respondents with the age of 40-50 years were 5 respondents (22.7%). There were no respondents aged 61-70 years in either study group. This suggests that most of the respondents are in early old age who have a higher risk of complications due to diabetes mellitus. Based on the characteristics of the respondents, the gender distribution in the intervention group and the control group showed the same proportion, consisting of 11 male respondents (50%) and 11 female respondents (50%) respectively. Based on education level, the majority of respondents had the last education of elementary school (SD) as many as 8 respondents (36.4%), while respondents with junior high and high school education each had 7 respondents (31.8%).

Based on the length of time they suffered from Diabetes Mellitus, most of the respondents had suffered from the disease for 4 years as many as 4 respondents (18.2%). This shows that the majority of respondents have experienced Diabetes Mellitus for a long period of time. Based on occupation, the majority of respondents worked as housewives (IRT) as many as 7 respondents (31.8%), while other occupations included farmers, traders, laborers, self-employed, and drivers with a relatively equal number. Overall, the characteristics of respondents in the intervention group and the control group showed a relatively balanced distribution so that it could minimize differences in basic characteristics between the study groups.

Based on Table 2, this study involved 44 respondents who were divided into two groups, namely 22 respondents in the intervention group and 22 respondents in the control group. The intervention group was given touch and dhikr therapy, while the control group only received routine therapy as recommended. Measurement of the quality of life of Type 2 Diabetes Mellitus patients was carried out before (pretest) and after (posttest) intervention to determine changes in quality of life in both groups. Based on the results of the analysis, in the intervention group, the average quality of life of type 2 diabetes mellitus patients experienced a significant increase, from 68.36 in the pretest to 93.36 in the posttest, with a difference of 25.00 points. Meanwhile, in the control group, the average quality of life did not experience any significant changes, from 68.36 in the pretest to 69.41 in the posttest, with a difference of 1.05 points. These results showed that the improvement in quality of life in the intervention group was greater than in the control group. After the distribution of pretest and posttest data is known, the data is then tested for differences. The results of the normality test (in chapter 3) refer to the distribution of quality of life data in patients with type 2 diabetes mellitus with normal contribution, so the test used is the uj t-test. The test results are shown in the table below. Based on table 3, the results of the analysis showed that in the intervention group there was a significant improvement in quality of life scores between pretest and posttest, with an average difference of 25.00 points (t=16.149; p<0.001; CL95%:22,000-28,000). In contrast, in the control group, no significant difference was found between the pretest and posttest with an average difference of 1.05 points (t=0.701; p=0.489; Cl 95%:-0.257-0.526). Furthermore, significant comparison results (t=6.885; p<0.001), which confirms that healing and dhikr therapy is more effective in improving the quality of life of patients with type 2 diabetes mellitus than the control group

Table 1.
Respondent Characteristics

Karakteristik	Intervensi (n=22)		Kontrol (n=22)	
	f	%	f	%
Usia responden				
40-50 tahun	5	22,7 %	5	22,7 %
51-60 tahun	17	77,2 %	17	77,2 %
61-70 tahun	-			
Jenis kelamin				
Laki-laki	11	50 %	11	50 %
Perempuan	11	50 %	11	50 %
Pendidikan				
SD	8	36,4 %	8	36,4 %
SMP	7	31,8 %	7	31,8 %
SMA	7	31,8 %	7	31,8 %
Lama diabetes mellitus				
2 tahun	2	9.1%	2	9.1%
3 tahun	3	13.6%	3	13.6%
4 tahun	4	18.2%	4	18.2%
5 tahun	3	13.6%	3	13.6%
6 tahun	2	9.1%	2	9.1%
7 tahun	2	9.1%	2	9.1%
8 tahun	2	9.1%	2	9.1%
9 tahun	2	9.1%	2	9.1%
10 tahun	1	4.5%	1	4.5%
11tahun	1	4.5%	1	4.5%
Pekerjaan				
IRT	7	31.8 %	7	31.8 %
Petani	4	18.2 %	4	18.2 %
Pedangang	4	18.2 %	4	18.2 %
Buruh	4	18.2 %	4	18.2 %
Wiraswasta	2	9.1 %	2	9.1 %
Supir	1	4.5 %	1	4.5 %

Table 2.
Results of the Test on the Effect of Healing Touch Therapy and *Dhikr* on the Quality of Life of Patients with Type 2 Diabetes Mellitus

Variabel	Waktu	mean	Min-maks	selisih	SD	Se
Kelompok Intervensi	Pretest	68.36	63-74	25,00	3,140	0,670
	Posttest	93,36	88-99	25,00	3,140	0,670
Kelompok kontrol	Pretest	68,36	63-74	1,05	3,140	0,670
	posttest	69,41	64-75	1,05	3,140	0,676

Table 3.
Results of Paired t-test Statistical Analysis on Pretest and Posttest Quality of Life Scores in the Intervention Group Receiving Healing Touch Therapy and *Dhikr*

Variabel	Waktu	Mean	Selisih	t	p-Value	Mean Difference	6,149
Intervensi							
skor kualitas hidup	Pretest	68,36	-25,00	16,149	0,000	25,000	22,000:28,000
	posttest	93,36					
Kontrol							
Skor kualitas hidup	Pretest	68,36	-1,05	0,701	0,489	1,045	-0,257:0,526
	posttest	69,41					
Perbandingan kualitas hidup kelompok intervensi dan kontrol				6,885	0,000		

DISCUSSION

The Effect of Healing Touch and Dhikr Therapy on the Quality of Life of Type 2 Diabetes Mellitus Patients

The results of the study showed that healing touch and dhikr therapy had a significant influence on the quality of life of type 2 Diabetes Mellitus (DM) patients at Prolanis Kayen Health Center, Pati Regency. Based on the results of the paired t-test, the intervention group experienced a significant improvement in quality of life after being given healing touch and dhikr therapy. The average quality of life score increased from 68.36 before the intervention to 93.36 after the intervention, with a difference of 25.00 points. The results of the statistical analysis showed a p-value of 0.000 ($p<0.05$), which means that there was a significant difference between the conditions before and after the intervention. On the other hand, in the control group that only received routine therapy according to the health service program, no significant changes were found. The average quality of life score only increased by 1.05 points with a p-value of 0.489 ($p>0.05$). In addition, the results of the independent t-test showed a p-value of 0.000 ($p<0.05$), which indicates a significant difference between the intervention group and the control group. These findings prove that healing touch and dhikr therapy is effective in improving the quality of life of type 2 DM patients.

Type 2 diabetes mellitus is a chronic disease that requires continuous management throughout the patient's life. The disease not only impacts the physical condition, but also affects the psychological, social, and spiritual aspects of the patient. Various complaints that are often experienced, such as fatigue easily, sleep disturbances, pain or tingling in the extremities, limited physical activity, and concerns about the risk of complications, can lead to a decrease in quality of life. This condition not only affects an individual's health status, but also has an impact on the ability to carry out social roles, maintain productivity, and achieve overall well-being.

According to the World Health Organization (WHO, 2023), quality of life is an individual's perception of his or her position in life that is influenced by his culture, value system, life goals, expectations, standards, and attention. Quality of life encompasses four main domains, namely

physical health, psychological condition, social relationships, and the environment. In type 2 DM patients, these four domains are often disrupted due to complex and long-term disease management demands. Therefore, efforts to improve quality of life are not enough to focus only on controlling blood glucose levels, but also to pay attention to the psychological, social, and spiritual aspects of the patient.

The improvement of quality of life in the intervention group can be explained through the working mechanism of healing touch therapy and dhikr that complement each other. Touch healing therapy is a form of complementary therapy that uses therapeutic touch to help create the body's energy balance. This intervention provides a relaxation effect that is able to reduce muscle tension, increase comfort, improve sleep quality, and reduce the level of fatigue that patients with chronic diseases often experience. When the body is in a relaxed state, the activity of the sympathetic nervous system decreases so that the body becomes calmer and more comfortable. The improvement of physical condition contributes to improving the patient's ability to carry out daily activities and increasing a positive perception of his quality of life.

In addition to providing physical benefits, dhikr also plays an important role in improving the psychological and spiritual well-being of patients. Dhikr is a form of spiritual approach that helps individuals get closer to God, increase gratitude, foster patience, and strengthen acceptance of the disease conditions experienced. Through dhikr activities that are carried out regularly, patients can gain inner peace and reduce the psychological burden that arises due to chronic diseases. A more stable psychological condition allows patients to be better able to adapt to illness, undergo regular treatment, and maintain motivation in self-care.

From the perspective of psychoneuroimmunology theory, positive psychological conditions are closely related to the functioning of the nervous system, endocrine system, and immune system. When individuals experience calm and emotional comfort, the production of stress hormones such as cortisol will decrease so that the body is able to maintain physiological balance better. Reducing stress levels can also improve the body's ability to adapt to chronic diseases. Thus, the combination of healing touch therapy and dhikr provides benefits that are not only felt in the physical aspect, but also in the psychological and spiritual aspects which ultimately contribute to improving the overall quality of life of the patient.

The results of this study are in line with research (Sulistiyawati et al., 2025) which shows that psychological and educational interventions are able to significantly improve the quality of life of type 2 DM patients. The study explained that patients who received psychological support had better adaptability in dealing with chronic diseases. In addition, research (Susilowati, 2024) also states that self-management and psychosocial support have a close relationship with the quality of life of type 2 DM patients. Patients who receive good emotional and spiritual support tend to have a higher quality of life than those who do not receive such support.

The findings of this study reinforce the concept of holistic nursing that emphasizes the importance of meeting the needs of patients as a whole, including biological, psychological, social, and spiritual aspects. Treatments that focus only on physical aspects are often not able to provide optimal results in improving the quality of life of chronic disease patients. Therefore, the integration of complementary therapies such as healing touch and dhikr can be an effective alternative intervention to support the successful management of type 2 Diabetes Mellitus.

According to the researchers, the improvement in quality of life that occurred in the intervention group suggests that type 2 DM patients require a more comprehensive treatment approach. In addition to medical treatment and health education, patients also need psychological and spiritual support to help them adapt to the illness they are suffering from. With the existence of healing touch

and dhikr therapy, patients can achieve a more comfortable physical condition, a more stable psychological condition, and a better spirituality, so that their quality of life improves optimally.

Identifying the quality of life of patients with type 2 diabetes mellitus before being given healing touch therapy and dhikr

The results showed that the average quality of life score of type 2 Diabetes Mellitus (DM) patients before being given healing touch and dhikr therapy in the intervention group was 68.36. The same score was also obtained in the control group with an average score of 68.36. The similarity of the mean scores in both groups showed that the initial condition of the respondents was at a relatively equal or homogeneous level. Thus, the changes that occur after the implementation of the intervention can be interpreted as an influence of the therapy given, not due to differences in initial characteristics between the two study groups.

The average value of quality of life that is in the suboptimal category indicates that most respondents still face various problems related to type 2 diabetes mellitus. As a chronic disease that lasts a lifetime, diabetes not only impacts the physical condition, but also affects the psychological well-being, social relationships, and spiritual aspects of the patient. This condition causes the quality of life of sufferers to often decline if the disease is not managed optimally.

Low quality of life in type 2 DM patients can be influenced by various factors. These factors include the length of time you have been suffering from the disease, the presence of accompanying complications, limitations in the ability to carry out daily activities, changes in lifestyle that must be lived, and the demand for continuous treatment and disease control. Patients are also required to maintain a diet, do regular physical activity, monitor blood sugar levels, take medication as recommended, and conduct regular health checkups. These demands are often a burden in itself that can affect the patient's perception of his or her quality of life.

In addition to physical problems, psychological aspects are factors that greatly affect the quality of life of type 2 DM patients. Many patients experience anxiety related to disease progression, concern about possible complications, and uncertainty about future health conditions. Fear of disability, organ dysfunction, and dependence on the help of others can cause prolonged stress. If these psychological conditions are not handled properly, the patient will be more susceptible to emotional disturbances which ultimately have an impact on a decrease in quality of life.

Tamrin's (2020) research states that Diabetes Mellitus patients with low levels of disease management compliance tend to have a poorer quality of life than patients who are able to carry out self-care consistently. Compliance in controlling blood glucose levels, running a diet, doing physical activity, and following treatment programs are important factors in maintaining the quality of life of diabetics. also explained that type 2 DM patients generally experience a decrease in quality of life, especially in the physical and psychological domains due to the burden of chronic diseases that must be faced over a long period of time.

Poor psychological conditions can cause a decrease in patient motivation in managing the disease. Patients who experience stress, anxiety, or emotional exhaustion tend to have low adherence to medication or recommended lifestyle changes. As a result, blood sugar level control becomes less than optimal and the risk of complications increases. In contrast, patients who have adaptive coping ability tend to be better able to accept disease conditions, manage stress, and maintain a better quality of life. Several studies have shown that effective coping mechanisms are positively associated with improved quality of life in patients with chronic diseases, including type 2 Diabetes Mellitus.

The characteristics of the respondents in this study can also be a factor that affects the quality of life. Most of the respondents were in the elderly age group and had suffered from Diabetes Mellitus for many years. Increasing age causes a decrease in the body's physiological functions which can worsen the health condition of diabetics. In addition, the longer a person lives with diabetes, the greater the risk of complications of both microangiopathy and macroangiopathy that can interfere with daily activities. This condition makes it easier for patients to experience fatigue, decreased mobility, impaired physical function, and dependence in doing certain activities.

Social factors also play a role in determining the quality of life of patients. The support of family, social environment, and health workers can help patients cope with the various challenges that arise due to chronic illness. Patients who receive good emotional and social support generally have higher levels of self-confidence, better motivation to undergo therapy, and more effective adaptability than patients who receive less support. Therefore, the patient's quality of life is influenced not only by the physical health condition, but also by the social environment that supports the treatment and recovery process. According to the World Health Organization (WHO, 2023), quality of life is an individual's perception of his or her position in life which is influenced by physical health conditions, psychological states, social relationships, levels of independence, and the environment in which the individual lives. Based on this concept, the low quality of life found in respondents before being given the intervention shows that type 2 Diabetes Mellitus has had a fairly wide impact on various aspects of the patient's life.

Based on the results of this study, it can be concluded that before being given healing touch therapy and dhikr, patients with type 2 Diabetes Mellitus still have a less than optimal quality of life. This condition is influenced by various factors, including physical disorders due to chronic diseases, psychological stress that arises during the treatment process, the length of time you have been suffering from diabetes, the risk of complications, and various lifestyle changes that must be undergone. These findings show the importance of interventions that not only focus on controlling physical conditions, but also pay attention to psychological, social, and spiritual aspects to improve the overall quality of life of patients.

Identifying the quality of life of type 2 diabetes mellitus patients after being given healing touch therapy and dhikr

The results showed that after being given healing touch and dhikr therapy, there was a considerable improvement in quality of life in the intervention group. The average quality of life score increased from 68.36 before the intervention to 93.36 after the intervention, with a difference of 25.00 points. In contrast, in the control group that only received routine services, the improvement in quality of life score was only 1.05 points. The considerable difference in score improvement between the two groups shows that healing touch and dhikr therapy makes a positive contribution to improving the quality of life of type 2 Diabetes Mellitus patients.

The improvement in quality of life that occurred in the intervention group can be explained through the working mechanism of healing touch therapy which is able to provide a physical and psychological relaxation effect. Healing touch is a complementary therapy that uses therapeutic touch consciously to help balance the body's energy, increase comfort, and reduce physical and emotional tension. Touch given during therapy can stimulate the body's relaxation response through decreased sympathetic nervous system activity and increased parasympathetic nervous system activity. This condition causes the body to become more relaxed, heart rate more stable, muscle tension decreases, and a feeling of comfort and calmness appears.

In patients with type 2 Diabetes Mellitus, relaxation conditions have an important role because prolonged stress can increase the secretion of the hormones cortisol and catecholamines which have an impact on increasing blood glucose levels. When stress levels are successfully controlled, the

body becomes better able to maintain physiological balance so that the patient's health condition can improve. Relaxation obtained through healing touch therapy can also help reduce complaints such as fatigue, pain, sleep disturbances, and physical discomfort that diabetic patients often experience. Improvement of these conditions ultimately contributes to improving the patient's quality of life.

In addition to having a physical impact, touch healing therapy also affects the psychological aspect. Patients who undergo therapy generally feel calm, reduced anxiety, and increased sense of comfort during the treatment process. A better psychological condition will improve the patient's ability to adapt to the chronic illness he suffers from. When patients are able to manage stress and anxiety effectively, adherence to medication, diet, and physical activity also tends to improve. This is one of the factors that support the improvement of the overall quality of life.

In addition to healing touch, dhikr intervention also contributes greatly to improving the quality of life of respondents. Dhikr is a form of spiritual therapy that is carried out by remembering and repeating the name of Allah so that it can foster inner peace, increase gratitude, and strengthen one's spiritual beliefs. In the perspective of holistic nursing, the spiritual aspect is an important part that needs to be considered because it is closely related to the psychological condition and the individual's ability to cope with illness.

The regular implementation of dhikr can help patients achieve a state of mental relaxation characterized by reduced anxiety, fear, and emotional distress. Patients with chronic diseases often feel worried about disease progression, possible complications, and uncertainty about future health conditions. Through dhikr, patients gain peace of mind so that they are able to accept the condition of the disease better. This feeling of calm and peace can reduce the psychological burden which has been one of the causes of declining quality of life for people with type 2 Diabetes Mellitus.

In theory, spiritual activities such as dhikr can affect the neuroendocrine system through increased sense of comfort and calmness. This condition helps suppress the stress response so that the production of stress hormones becomes more controlled. When stress decreases, it will be easier for patients to concentrate on taking treatment, maintaining a diet, and doing activities that support diabetes management. Therefore, spiritual interventions not only provide benefits to the psychological aspect, but also have the potential to have a positive impact on the patient's physical condition.

The results of this study are supported by research by Wahyuningsih and Tamimi (2021) which states that dhikr therapy is effective in reducing stress levels in Diabetes Mellitus patients. The reduction in stress levels has an impact on increasing psychological comfort and the patient's ability to manage their illness. Similar findings were also reported in Research (N Q Ratio et al., 2020) which explained that dhikr can help reduce anxiety, increase inner peace, and improve the psychological condition of diabetic patients. The improvement of psychological conditions is one of the factors that contribute to improving the quality of life of sufferers.

The research of Handayani et al. (2022) shows that there is a significant relationship between the level of spirituality and the quality of life of Diabetes Mellitus patients. Patients who have a good level of spirituality tend to have more effective coping skills, higher levels of optimism, and stronger motivation to undergo treatment. This condition makes it easier for patients to adapt to the chronic diseases they suffer from so that the quality of life can be maintained and even improved.

The results of this study are in line with the research of Akbar et al. (2023) who stated that the combination of relaxation therapy and spiritual approaches is able to improve the physical and psychological condition of type 2 Diabetes Mellitus patients. The combination of these two

approaches is considered more effective than interventions that focus only on the physical aspect because they are able to meet the patient's needs holistically. In the context of nursing, a holistic approach is very important because patients not only need medication to control blood sugar levels, but also psychological and spiritual support to be able to live life optimally.

The improvement in quality of life that occurred in the intervention group in this study showed that healing touch and dhikr therapy was able to provide benefits on various dimensions of quality of life, including physical, psychological, social, and spiritual aspects. Patients become more relaxed, calmer in dealing with illness, have better motivation to maintain their health, and are better able to accept the conditions they experience. These positive changes have an impact on increasing patients' perception of their quality of life.

Based on the results of research and theoretical support as well as previous research, it can be concluded that healing touch and dhikr therapy is an effective complementary intervention in improving the quality of life of patients with type 2 Diabetes Mellitus. This intervention works through physical relaxation mechanisms, psychological stress reduction, and increased spiritual calmness so that it can help patients achieve better overall health conditions. Therefore, healing touch and dhikr therapy can be considered as a form of companion therapy in nursing services for type 2 Diabetes Mellitus patients.

Analyzing the Effect of Healing Touch and Dhikr Therapy on the Quality of Life of Type 2 Diabetes Mellitus Patients

The results of the study showed that healing touch and dhikr therapy had a significant influence on improving the quality of life of type 2 Diabetes Mellitus (DM) patients. Based on the results of the analysis using the paired t-test, a p-value of 0.000 ($p<0.05$) was obtained in the intervention group. These results show a significant difference between quality of life scores before and after being given healing touch therapy and dhikr. The average quality of life score in the intervention group increased by 25.00 points, indicating that the intervention was able to provide positive changes to the patient's condition.

On the other hand, in the control group that only received routine services according to the Diabetes Mellitus management program, no significant changes were found. The results of the analysis showed a p-value of 0.489 ($p>0.05$) with an average improvement in quality of life of only 1.05 points. These findings show that the routine services provided have not been able to improve the quality of life of patients optimally. In addition, the results of the independent t-test between the intervention group and the control group showed a p-value of 0.000 ($p<0.05$), which means that there was a significant difference between the two groups after the treatment was given. Thus, it can be concluded that healing touch and dhikr therapy has proven to be effective in improving the quality of life of type 2 DM patients.

The improvement in quality of life in the intervention group can be explained through a holistic approach applied in healing touch and dhikr therapy. Both therapies not only focus on the physical aspect, but also touch on the psychological and spiritual dimensions of the patient. In the concept of holistic nursing, health is seen as a condition that includes physical, mental, social, and spiritual balance. Therefore, interventions that are able to meet these various dimensions have the potential to provide more optimal results than interventions that only focus on physical aspects. Healing touch therapy is a complementary therapy that uses therapeutic touch to help increase comfort, reduce tension, and improve the body's energy balance. Touch given during therapy can trigger a relaxation response that causes the activity of the sympathetic nervous system to decrease and the parasympathetic nervous system to increase. This condition produces physiological effects in the form of decreased muscle tension, improved sleep quality, stabilization of heart rate, and the appearance of a feeling of comfort and relaxation. In patients with type 2 diabetes, relaxation

conditions are very important because prolonged stress can increase levels of the hormone cortisol which affects the increase in blood glucose levels. In addition to providing physical benefits, healing touch also helps reduce the psychological stress that diabetic patients often experience. Chronic illnesses that must be managed for a lifetime often cause anxiety, fear of complications, and emotional exhaustion due to a long treatment process. When patients feel calmer and more comfortable, their ability to cope with illness improves, so the perception of quality of life also increases.

The findings of this study are also supported by a study (Sukarmin et al., 2025) which shows a significant relationship between diet and exercise patterns with postprandial blood glucose levels in patients with Diabetes Mellitus (p=0.000). The study explained that good disease management through a healthy lifestyle can help control the patient's physiological condition and reduce the risk of complications. Improving physical condition can support improving patient welfare and contributing to a better quality of life. This shows that improving the quality of life of diabetic patients requires a comprehensive approach, not only through medical treatment but also through supportive interventions that are able to improve the physical and psychological condition of patients. On the other hand, dhikr acts as a spiritual therapy that provides inner peace and strengthens an individual's relationship with God. Dhikr activities help patients focus on the spiritual aspect so that it can reduce the fear, anxiety, and despair that often arise due to chronic illnesses. According to the psychospiritual adaptation theory, individuals who have good spirituality tend to be more able to accept disease conditions, have a higher life expectancy, and show more effective coping skills than individuals with low spirituality.

Dhikr can also affect the central nervous system through the mental relaxation process it causes. When a person dhikr with full appreciation, the body will experience a calm state that can reduce the stress response. The reduction in stress has an impact on reducing anxiety, increasing comfort, and improving the patient's psychological condition. A more stable psychological condition will increase the patient's motivation to carry out treatment, maintain a diet, engage in physical activity, and comply with diabetes management programs recommended by health professionals. The results of this study are also supported by a study (Sukarmin et al., 2023) that explores the spiritual experiences of hypertensive patients during therapy. The research shows that spiritual activities through worship and dhikr are believed to be able to increase calmness, reduce stress, and increase confidence in the success of therapy. In addition, spiritual activities are also seen as a form of relaxation that helps patients better adapt to the chronic disease conditions they are experiencing. These findings strengthen the results of this study that dhikr therapy plays a role in improving the psychological and spiritual condition of patients so that it has an impact on improving the quality of life.

The findings show that the improvement in the quality of life of Diabetes Mellitus patients is not only influenced by the improvement of physical condition, but also by the psychological condition of the patient in dealing with the chronic disease he suffers. The results of this study are in line with research (Susilowati, 2024) which states that psychological and educational interventions are able to significantly improve the quality of life of type 2 Diabetes Mellitus patients. The study showed that patients who received psychological support had better adaptability to chronic diseases so that their quality of life improved. These findings strengthen the results of the study that psychological aspects are one of the important factors that affect the quality of life of people with diabetes.

The results of this study are also supported by various nursing theories that emphasize the importance of a holistic approach in providing care to patients with chronic diseases. According to holistic nursing theory, the fulfillment of physical needs alone is not enough to achieve optimal degrees of health. Patients also need psychological, social, and spiritual support to be able to adapt to the condition of the disease they are experiencing. Therefore, the application of complementary

therapies such as healing touch and dhikr can be an alternative intervention that supports the successful management of type 2 Diabetes Mellitus.

The findings of this study have important implications for nursing practice. Nurses as caregivers not only play a role in providing health education and pharmacological therapy, but can also apply complementary interventions oriented towards improving the patient's quality of life. An approach that takes into account the physical, psychological, social, and spiritual aspects at the same time will help patients achieve better health conditions and improve overall well-being.

Based on the results of research, supporting theories, and previous research, it can be concluded that healing touch and dhikr therapy is an effective complementary nursing intervention in improving the quality of life of type 2 Diabetes Mellitus patients. The combination of these two therapies is able to provide benefits through increased physical relaxation, reduction of stress and anxiety, increased spiritual calm, and strengthening the patient's ability to adapt to the chronic illness he suffers. Thus, healing touch and dhikr therapy can be recommended as part of a holistic nursing approach to improve the quality of life of type 2 Diabetes Mellitus patients.

CONCLUSION

The results showed that the quality of life of Type 2 Diabetes Mellitus patients in the intervention group before being given healing touch and dhikr therapy had an average score of 68.36. After being given intervention, there was a significant increase, namely the average quality of life score increased to 93.36. Meanwhile, the control group showed no meaningful change, with an average score increase of only 1.05 points. Based on the results of statistical tests, a p-value of 0.000 ($p < 0.05$) was obtained, which shows that there is a significant influence of healing touch and dhikr therapy on improving the quality of life of Type 2 Diabetes Mellitus patients.

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