EFFECT OF TRANQUIL PRAYER ON HEALTH: DEVELOPMENT OF A NEW INSTRUMENT TO MEASURE TRANQUILITY

Yusuf Alam Romadhon1), Mohammad Fanani2)

1) Doctoral Program in Medicine, Faculty of Medicine, Universitas Sebelas Maret
2) Department of Psychiatry, Faculty of Medicine, Universitas Sebelas Maret

ABSTRACT

Background: Tranquil prayer or Khushoo, breeds Khauf (fear) that restrains a Muslim from pernicious satanic whispers to refrain him from falling into sins of transgressors. Calmness deeply correlates with Salah though not confined to it yet in the remembrance of Allah hearts beseech tranquility. Salah is spiritual and physical act in where, nearly all muscles of human body become more active than any kind of physical exercise without muscle fatigue and induces serenity on body and soul. Scientist evidence also supports the notion that even moderate intensity activities, when performed daily, can have some long-term health benefits. This study aimed to develop a new instrument to measure tranquility to be used in the subsequent study on the assessment of the effect of tranquil prayer on health.

Subjects and Method: This was a literature review study including 3 steps: (1) Literature review and qualitative study to find out and operationalize key concepts, (2) Development of items on operationalized key concepts, (3) Preliminary study and statistical analysis.

Results: The main concept of tranquil prayer included: (1) Tranquil status, (2) Prerequisite and attachment of God, (3) Spiritual atmosphere, (4) Tranquil effects. The development of items was revised by religious experts and psychiatrists to obtain content validity.

Conclusion: Tranquil prayer can be measured by tranquil status, prerequisite and attachment of God, spiritual atmosphere, tranquil effects.

Keywords: tranquil prayer, instrument

Correspondence:
Yusuf Alam Romadhon. Doctoral Program in Medicine, Faculty of Medicine, Universitas Sebelas Maret, Surakarta 57126, Central Java.
Email: yar245@ums.ac.id. Mobile: 08122593562.

https://doi.org/10.26911/theicph.2018.02.35