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Analysis of Dhikr Therapy's Impact on Drug Recovery: A Study of Trainees' Psychospiritual Well-Being

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ABSTRACT: Drug addiction in Malaysia is a long-standing social issue that has negative implications for society. Various recovery methods have been introduced, including the Islamic psychospiritual approach, which is increasingly being applied in private rehabilitation centres. One of the private recovery centres that practises this approach is Pondok Remaja Inabah (1) Malaysia (PRI 1 Malaysia), which uses dhikr therapy as the primary method for recovery treatment. Although dhikr therapy in PRI (1) Malaysia has been proven to have a positive effect on trainees, its implementation and effects on the psychospirituality of trainees, especially on the elements of desire, spirit, heart and mind, are still poorly studied in depth. Therefore, this study aims to identify the implementation of dhikr therapy at PRI (1) Malaysia and examine its impact on the psychospiritual well-being of trainees.

This study employs a qualitative approach that includes a literature review, participatory observation, and interviews with five trainees. The data were analysed both inductively and deductively with the help of NVivo 15 software. The study's results indicated that dhikr therapy has an influence and a positive impact on the psychospiritual elements of the trainees, including enhancing their patience and noble character (desire), increasing diligence and enjoyment of worship (spirit), increasing divine awareness and tranquillity (heart), and contributing to mental stability and maturity of thought (intellect). This positive impact began to be felt within 40 days of consistently practicing dhikr therapy. The implications of this study show that the dhikr therapy of the Tarekat Qodiriyah Naqsyabandiyah (TQN) has the potential to be an alternative approach to drug rehabilitation. Therefore, dhikr practice should be made a permanent module in drug rehabilitation programs, and it is recommended that parties, such as AADK and private rehabilitation centres, strengthen treatment methods, including implementing dhikr therapy as part of a holistic psychospiritual intervention component.

1. INTRODUCTION

Drug addiction in Malaysia has emerged as a persistent and intricate issue impacting multiple strata of society. This issue adversely affects multiple facets of life, including escalating crime rates, undermining family structures (domestic conflict), facilitating the transmission of infectious diseases such as HIV/AIDS and hepatitis, and precipitating severe mental health

disorders such as depression and panic attacks. Several researchers have underscored these adverse ramifications; for instance, Shafie (2019) stated that drug addiction negatively affects emotions, leading to rage, irritation, and stress. Moreover, it induces alterations in attitudes and behaviours that can impact the social relationships and daily lives of addicts (Ibrahim et al., 2021). This problem imposes significant treatment and recovery expenses on the government and increases the likelihood of relapse among addicts (Sa'ari et al., 2020).

The government has crafted appropriate strategies and methods concerning the problem of drug addiction. These strategies include legal constraints to reduce the intake of drugs and rehabilitative care for people with addiction disorders. AADK (2017) outlines various rehabilitation methods and services, as detailed in *Buku Maklumat Dadah*. These treatment services consist of the Institutional Rehabilitation Services, which include the PUSPEN/Cure & Care Rehabilitation Centre (CCRC) and the AADK Cure & Care Clinic (C&C). These facilities conduct detoxification, therapeutic community (TC), methadone maintenance therapy (MMT), counselling programs, ISRA, and the Client Education Access Program (PAPK). Community rehabilitation services include *Pusat Integrasi Klien (PIK)*, the Cure & Care Services Centre (CCSC), and Caring Community House (CCH), which implement the treatment programs *Baitul Islah* and *Rumah Perantaraan* (*Buku Maklumat Dadah* 2017).

Along with the government, private entities, including drug rehabilitation centres, assist in the rehabilitation of drug addicts, primarily by utilising traditional methods rooted in Islamic principles and spirituality. This methodology is presently referred to as Islamic psychospiritual. Azmi and Wahab (2019) assert that recovery grounded in Islamic psychospirituality rehabilitates the body and fortifies spirituality, enhancing life's significance through religious values. Religious practices are acknowledged as effective means for sustaining recovery from addiction (Akib et al., 2023). The psychospiritual approach is comprehensive as it upholds human nature in fostering interactions with Allah SWT, other individuals, and the natural world (Jailani & Osman, 2015). This technique possesses distinctiveness, efficacy, and potency in addressing a range of ailments encountered by society, encompassing both spiritual and physical dimensions (Mazlan & Burhan, 2024).

Pondok Remaja Inabah Malaysia (1) is one of the private rehabilitation treatment institutes in Malaysia that employs the Islamic psychospiritual approach. Mansor et al. (2024) say that PRI (1) Malaysia is a place where people can recover from drug addiction using psychological methods based on Islamic Sufism, especially the practices of Tarekat Qodiriyah Naqsyabandiyah (TQN). This method aims to rehabilitate and direct sufferers of drug use towards a path that is pleasing to Allah SWT.

The Tarekat Qodiriyah Naqsyabandiyah, practised in Malaysia, is officially registered under the Negeri Sembilan Sufi Order Enactment 2005 by the Negeri Sembilan Mufti Department. This approval confers recognition and legal certification to the teachings of TQN for practice in Malaysia, including in PRI (1) Malaysia. Furthermore, rehabilitation treatment utilising the TQN technique commenced in 1980 at PRI (1) Malaysia (Shafie, 2006). In 2025, PRI (1) Malaysia will have surpassed forty years of existence. This evidence indicates that the TQN strategy possesses distinct qualities and has been embraced and implemented for an extended period in PRI (1) Malaysia.

PRI (1) Malaysia employs a drug recovery concept derived from Tarekat Qodiriyah Naqsyabandiyah, utilising an Islamic psychospiritual methodology rooted in Sufism and the Order (tarekat). In the context of Islamic psychospirituality, the Inabah philosophy prioritises the cultivation and welfare of the four principal elements—spirit, heart, intellect, and desire. The philosophy encompasses a rehabilitation therapy concept that emphasises repentance through increased devotion to Allah SWT. The Inabah rehabilitation therapy is based on the teachings of Islam, faith, and *ihsan*, which come from the Quran, Hadith, expert opinions, and reasoning (Mansor et al., 2024). This technique seeks not only to rehabilitate individuals from drug addiction but also to cultivate the trainee's identity to adhere to the commands of Allah SWT and the Messenger of Allah SAW.

The primary treatment employed by PRI (1) Malaysia is TQN dhikr therapy, an alternative healing method for individuals recovering from drug addiction. Arifin (1983) asserts that TQN dhikr, encompassing both *jahar* dhikr and *khafi* dhikr, can safeguard an individual's body and spirit from the enticements of the devil and carnal desires, which are the sources of spiritual afflictions and immoral behaviour. This dhikr serves to regulate individuals, particularly adolescents, from deviating into detrimental behaviours like substance misuse (Arifin, 1983). Dhikr therapy is conducted rigorously and within a specified timeframe (Hasim, 2018; Muliawan, 2017; Abd Ghani et al., 2017) at PRI (1) Malaysia, under the careful supervision and oversight of PRI (1) Malaysia instructors.

Previous research indicated that PRI (1) Malaysia yielded favourable outcomes for the number of trainees (ex-addicts in treatment) who effectively overcame drug addiction. Research by Abd Ghani et al. (2017) revealed that 7,000 adolescents

struggling with drug addiction received treatment at Pondok Remaja Inabah in Malaysia, with a 70% recovery rate attributed to the grace of Allah SWT (Abd Ghani et al., 2017). A study by Mansor (2019) revealed that the TQN dhikr practised at PRI (1) Malaysia contributed to the revitalisation of the soul and rehabilitation of drug users, positively impacting the trainees. This dhikr practice significantly impacted the trainees' souls, enabling them to entirely forsake narcotics and embark on a new life in accordance with the teachings of Islam and the commandments of Allah SWT (Mansor et al., 2023). This achievement demonstrates that the dhikr treatment approach exerts a spiritual influence on the learners.

The PRI (1) Malaysia's drug rehabilitation approach harmonises with the Malaysian government's strategy in the context of SDGs 2030, particularly on Goal 3 (Healthy Lives), which underscores the need to advance health and well-being at all levels. It also seeks to address drug addiction as an assault on both mental and physical health. In addition, Goal 16 (Peace, Justice, and Strong Institutions) is closely linked, as it supports efforts aimed at enhancing social order (United Nations, 2015), particularly by guiding trainees towards a dignified life.

Nevertheless, the enquiries are: How is the implementation of dhikr therapy conducted among trainees at PRI (1) Malaysia? What effects does dhikr therapy have on the psychospiritual well-being of trainees? This research, named "analysis of dhikr therapy's impact on drug recovery: a study of trainees' psychospiritual well-being", has been done in light of these enquiries. This study intends to (i) identify the implementation of dhikr therapy at PRI (1) Malaysia and (ii) examine its impact on the psychospiritual well-being of trainees. The studies seek to enhance the comprehension of therapeutic approaches in drug rehabilitation. Moreover, the research aims to aid all stakeholders, especially the AADK, in reformulating the recovery framework to enhance its functionality, adaptability, and efficacy in tackling the drug addiction epidemic from various perspectives.

2. LITERATURE REVIEW

2.1. Pondok Remaja Inabah (1) Malaysia

Pondok Remaja Inabah (1) Malaysia is a private rehabilitation centre addressing drug abuse and addiction through an Islamic psychospiritual approach. According to Shafie' (2010), PRI (1) Malaysia was established by Pak Guru Dato' Haji Mohd Zuki Shafie' in 1980 in Kampung Pulau Bidin, Mukim Telaga Mas, Alor Setar, Kedah. In 1996, PRI (1) Malaysia moved to "Jabal Suf", located in Kampung Paya, Mukim Padang Temak, 06300 Kuala Nerang, Kedah. PRI (1) Malaysia is officially recognised by the National Anti-Drug Agency (AADK) and the Ministry of Home Affairs (KDN) as a drug rehabilitation centre (Shafie', 2010). Subsequent to the founder's resignation in 2021, the leadership of the rehabilitation was taken over by his son, Tuan Haji Najdi Baqir bin Dato' Haji Mohd Zuki Shafie'.

The concept of rehabilitation therapy in PRI (1) Malaysia emphasises spiritual development based on Sufism to address the problems of drug addiction and juvenile delinquency. Spiritual illnesses that stem from sin cannot be treated through medication or violence but rather require a process of repentance and spiritual guidance. This therapy concept prioritises the appreciation of the science of Sufism, especially the practice of *zikrullah* (dhikr), which plays a role in combating desire and strengthening faith through the word tauhid. The *zikrullah* (dhikr) approach and the *talkin* (instruct and provide lessons) and *bai'ah* (agreement and pledge of allegiance) processes are designed to instill faith in the heart, thus creating a strong faith and producing positive behaviour that is balanced in terms of body, mind, and spirit (Shafie', 2006 & 2010).

Rehabilitation therapy uses the concept of "Inabah", which means "return", referring to the process of bringing someone back to Allah SWT by abandoning immorality and practicing noble character. This concept was introduced by Syekh Ahmad Sohibulwafa Tajul Arifin Q.S. as a treatment for drug abuse, juvenile delinquency, and spiritual illness with the goal of changing reprehensible character (*al-akhlak al-mazmumah*) to noble character (*al-akhlak al-mahmudah*) (Al-Jailany et al., 2011). This therapy is based on the holistic approach of TQN, which includes the Science of Monotheism (*Tauhid*), the Science of Islamic Jurisprudence (*Fiqh*), and the Science of Sufism (*Tasawwuf*), in line with the concepts of faith, Islam, and *ihسان* (Shafie', 2010).

The rehabilitation therapy curriculum at PRI (1) Malaysia is referred to as the "Inabah Method" curriculum. This curriculum was developed by His Excellency Al-Mukarrom Syekh Mursyid Kiai Haji Ahmad Sohibulwafa Tajul Arifin Q.S., the founder of PRI (1) Malaysia. According to the curriculum, Pak Guru Dato' Haji Mohd Zuki Shafie' used the teachings of the Tarekat Qodiriyah Naqsyabandiyah to help people recover from drug addiction and youth crime (Shafie', 2010).

The "Inabah Method" module comprises three primary therapeutic concepts: first, *mandi taubat* (repentance bath therapy); second, prayer therapy; and third, dhikr therapy (Shafie', 2006). In addition to the three main concepts, PRI (1) Malaysia includes

kebataman therapy and *manakib* therapy as extra practices within the Tarekat Qodiriyah Naqsyabandiyah (TQN) (Mansor et al., 2024). This study examines the application of dhikr therapy by PRI (1) Malaysia in the drug recovery of trainees.

2.2. The Concept of Dhikr Therapy in PRI (1) Malaysia

In the context of Inabah recovery, the dhikr therapy employed utilises specific forms of dhikr. Special dhikr denotes the practice of remembrance performed by Muslims inside a tarekat (order) or Sufi tradition (Subandi, 2009). In the Tarekat Qodiriyah Naqsyabandiyah, this dhikr signifies the heart's existence specifically with Allah SWT. This particular dhikr is categorised into two types: *jahar* dhikr and *khafi* dhikr (Alba, 2011). The Tarekat Qodiriyah Naqsyabandiyah specifically uses the loud dhikr (*Nafi Isbat*) with the phrase “*Lailahaillallah*” to express the belief in the oneness of Allah SWT, while the quiet dhikr uses the name of Allah SWT (*Ismu Zat*), which is “*Allah*” (Al-Sajjadi, 2015). The amalgamation of these two forms of dhikr becomes the fundamental principle in the practice of the order (Arifin, 1970).

Al-Qusyairi (2013) also asserts that dhikr is categorised into two types: verbal dhikr (*jahar*) and heart dhikr (*khafi*). Al-Qusyairi (2013) asserted that a servant who consistently engages in audible dhikr will perpetually affect the dhikr of the heart. Indeed, when an individual engages in dhikr with both the tongue and the heart concurrently, he is said to be embodying the essence of perfect dhikr in relation to his nature and spiritual condition. Furthermore, Al-Kurdi (2013) highlighted that verbal dhikr is articulated through sound and structured letters. Nonetheless, verbal dhikr is often challenging to perform consistently because of the hindrances posed by daily responsibilities. This technique differs from heart dhikr, which is more adaptable and may be performed at any moment.

This is a concise overview of the *jahar* dhikr and *khafi* dhikr therapies done in PRI (1) Malaysia:

a. *Jahar* Dhikr

Jahar dhikr is the vocalisation of the monotheistic declaration, comprising the negation “*Lailaha*” and the affirmation “*Illallah*”. When practiced continuously and persistently, dhikr can eradicate *syirik jali* (obvious shirk) (Al-Jailany et al., 2011) and encourage the heart to persist in seeking closeness to Allah SWT (Al-Kurdi, 2013). *Jahar dhikr*, also referred to as oral dhikr, is performed by articulating the dhikr phrase audibly and, at times, vociferously (Subandi, 2009), distinctly, and with structured letters (Al-Sajjadi, 2015 & Al-Kurdi, 2013).

Several requirements must be fulfilled to engage in dhikr (Arifin, 1970), as succinctly outlined below. Initially, one must get dhikr lessons (dhikr *talkin*) from the guru mursyid of the order. Secondly, consistently maintain an impeccable condition of purification. Third, shut one's eyes. Fourth, perform dhikr in a deliberate manner (without haste). Fifth, engage in dhikr fervently by performing the movements associated with the *latifah* of dhikr. Sixth, perform dhikr accompanied by a powerful and resonating rhythm. The seventh and final practice is dhikr, performed with a fervent and audible inner voice.

b. *Khafi* Dhikr

Khafi dhikr refers to the internal practice of repeatedly invoking “*Allah*” within the heart, without verbal or written expression. This inward dhikr remains mostly undisturbed by worldly distractions (Subandi, 2009 & Said, 2003). *Khafi* signifies concealed or obscure. *Khafi* dhikr refers to the remembrance of Allah SWT performed internally, involving the heart's contemplation rather than vocal expression, utilising the emotional experience (*zawq*) and its locus within the heart (Al-Sajjadi, 2015 & Al-Kurdi, 2013).

This particular dhikr was chosen as a recovery therapy in PRI (1) Malaysia due to the belief that the combination of *jahar* dhikr and *khafi* dhikr, practised in the Tarekat Qodiriyah Naqsyabandiyah, can facilitate the drug recovery process. The two dhikr serve objectives pertaining to the physical and spiritual realms. Arifin (1983) asserts that the practice of *jahar* dhikr and *khafi* dhikr can safeguard an individual's body and spirit from the enticements of the devil and carnal desires, hence averting the risk of succumbing to detrimental paths such as drug addiction. *Jahar* dhikr seeks to rejuvenate the heart and affirm the oneness of Allah SWT, whereas *khafi* dhikr focuses on cultivating honesty within the self (Mansor et al., 2020).

This study examines the therapy of explicit and implicit dhikr in PRI (1) Malaysia as a rehabilitation strategy that enhances the psychological and spiritual well-being of the trainees.

2.3. Islamic Psychospiritual

Psychospiritual is a fusion of the concepts psychological and spiritual. Psycho pertains to the soul, while spiritual pertains to spirituality. Islamic psychospirituality is a discipline that examines human psychology and spirituality through the lens of Islamic teachings and utilises the principles of Sufism. This Islamic psychospiritual idea was established by Imam al-Ghazali (Mansor et al., 2024).

Furthermore, the meaning behind the term psychospiritual is based on the views of several prominent scholars. Malik Badri, a professor of psychology at the International Institute of Islamic Thought and Civilisation (ISTAC) in Malaysia, employs the term "psychospiritual" in his psychological discourse. He explained the method of contemplation in the Quran for the purpose of achieving excellent mental health, which is commonly used by Sufis (Badri, 2000). Meanwhile, Islamic psychospiritual can be understood as a concept and morality of methods of treating mental, spiritual, emotional or moral diseases based on sources and practices in Islam which are sourced from the Quran, Sunnah, the practices of the righteous predecessors and knowledge that does not conflict with the principles of Sharia (Bakran, 2001). This aligns with the opinion of Sa'ari & Borhan (2006), who said that Islamic psychospirituality is a combination of concepts of human psychological and spiritual knowledge based on the sources of the Quran and Hadith, the practices of the righteous predecessors, and knowledge based on Islamic Sharia.

Islamic psychospiritual pertains to the examination of psychological and spiritual dimensions of mental processes and spiritual reflections from an Islamic viewpoint (Husain, 2005). Islamic psychospiritual is frequently regarded as synonymous with Islamic psychology. In Arabic, psychology is referred to as *Ilm al-Nafs* or *Ilm al-Rub*. Islamic psychospirituality, or Islamic psychology, is intricately connected to the soul, human behaviour, and happiness. To attain pleasure, therapeutic interventions are essential for the treatment and restoration of the soul, as well as its spiritual, mental, emotional, and behavioural aspects (Sa'ari, 2019). According to Sudrajat (2008), psychospiritual refers to religious psychology, which examines the impact of religion on an individual's attitudes and behaviours. Furthermore, psychospiritual refers to the human psychological capacity associated with spiritual existence (Jalaluddin, 2010). Psychospiritual underscores the transformation and self-improvement process rooted in the principles of faith and spirituality, which are intricately linked to psychological dimensions (Suryabrata, 1983 & Jaya, 1994).

Moreover, Islamic scholars, like al-Makki (1997), asserted that Islamic psychospirituality emphasises the Sufi methodology since it is regarded as a means of prevention, healing, care, and cleansing of the heart. This aligns with the concept of *maqamat* in the Sufi tradition, as the psychospiritual method is employed by Sufis to address internal afflictions (Jodi et al., 2014). The notion of Islamic psychospirituality was fundamentally developed by early Islamic scholars, including al-Ghazali (Akhir, 2008) and al-Makki (1997), through conceptual elucidations of the elements of desire, heart, spirit, and intellect.

The four aspects constitute the fundamental elements of the Islamic psychospiritual framework and underpin the spiritual development of every individual. Al-Ghazali (2000) examined the four principal elements of human composition that influence behaviour: *al-nafs* (desire), *al-qalb* (heart), *al-rub* (spirit), and *al-aql* (intellect), which elucidate humanity's capacity to acquire knowledge. Accordingly, the Islamic psychospiritual approach emphasises the cultivation, strengthening, and development of these four core elements of the human spiritual structure, as they play a vital role in fostering spiritual balance, personality development, moral character, and ethical conduct from an Islamic perspective (Mansor & Zain, 2025).

This study defines psychospiritual as al-Ghazali's idea encompassing the elements of the heart, spirit, desire, and intellect. This notion was chosen because of al-Ghazali's complete approach to the psychospiritual aspect of humanity and its significance in the religious context and personal self-development. This study examines the passion element, which concerns the trainee's desires and behaviours; the spirit element, which highlights their worship practices; the heart element, which addresses their feelings of divinity; and the intellect element, which pertains to their cognitive processes.

3. RESEARCH METHODOLOGY

This study uses a qualitative methodology to analyse the data and associated facts. A qualitative study is highly appropriate for conducting an in-depth exploration and understanding of the topic under investigation. Three methods of data gathering are employed: literature review, participatory observation, and interviews. Miles and Huberman (1994) assert that a qualitative study possesses an 'undeniable' aspect due to its use of several descriptive terms, rendering it more persuasive to the reader than numerical data. This study employed a literature review to gather information and analyse data from the Quran, Hadith, classical books, and scholarly papers pertaining to Islamic psychospirituality. Participatory observation was conducted alongside the

trainees to assess the implementation and impact of the dhikr therapy. The interview method was conducted with five trainees at PRI (1) Malaysia, who constituted the sample for this study.

The sample selection for this study employs purposive and snowball sampling strategies. The purposive sampling technique is employed to guarantee that the questioned respondents fulfil the goals and objectives of the study, as well as being endorsed by PRI (1) Malaysia through the examination of training records. The criteria for respondent selection encompass trainees who have undergone eight months of treatment at PRI (1) Malaysia. The snowball sampling technique is employed to pick respondents based on referrals from PRI (1) Malaysia. Chosen responses will refer to other individuals, facilitating a progression from one person to another.

In qualitative research, the required interview data is minimal in quantity. This aligns with Silverman's (2013) assertion that studies employing interviews, characterised by a limited number of cases and open-ended questions, are typically classified as qualitative research. The interview questions concentrate on the lived experiences of five trainees as they endeavour to recuperate through dhikr therapy and attain psychospiritual well-being.

This study employs a textual and document analysis methodology using NVivo 15 software. The NVivo 15 software will generate a tree node analysis, which entails a coding procedure using the source "code" to gather data based on topics or themes pertinent to the study. The data analysis is meticulously developed and scrutinised using specialised methodologies, mainly inductive and deductive reasoning. The inductive method is employed to derive the study's conclusions, while the deductive method is used to examine the verses in the Quran.

4. RESEARCH FINDINGS

The explanation proceeds with the principal findings of the study, specifically: (i) the implementation of dhikr therapy at Pondok Remaja Inabah and (ii) the impact of dhikr therapy on the psychospiritual well-being of trainees at Pondok Remaja Inabah (1) Malaysia. The initial discovery will elucidate the methodology for implementing dhikr therapy, encompassing both *jahar* dhikr and *khafi* dhikr, as well as the methodical integration of these practices into the everyday routines of trainees. The second finding will examine the impact of dhikr therapy on the psychospiritual well-being of trainees, particularly concerning the aspects of the heart (*al-qalb*), spirit (*al-ruh*), desire (*al-nafs*), and intellect (*al-aql*). The discourse can be comprehended as follows:

4.1. First, the Implementation of Dhikr Therapy at Pondok Remaja Inabah (1) Malaysia

Observations indicate that the dhikr therapy conducted at PRI (1) Malaysia comprises two forms of dhikr: *jahar* dhikr and *khafi* dhikr. Both forms of dhikr significantly contribute to the development of the trainee's self-discipline, which may be assessed through the use of this therapy on the trainee. This therapy is routinely conducted, particularly during the required or sunnah prayers at the PRI (1) Malaysia Mosque, under the supervision of a guide for collective dhikr practice. When the *jahar* dhikr is chanted, the atmosphere of the mosque is filled with loud and enthusiastic chanting, which reflects the trainee's seriousness and commitment to living the phrase "*Lailahaillallah*".

Trainees are encouraged to augment the frequency of dhikr during the rehabilitation therapy procedure. This rigorous dhikr therapy is performed a minimum of 165 times, with trainees encouraged to augment the frequency of dhikr to attain greater proximity to Allah SWT. This dhikr therapy is carried out with clear guidelines, using the book *Uqudul Jumaan* as a reference to comprehend and value the significance of the words. Senior trainees also showed higher abilities because they had successfully memorised the dhikr words without having to rely on the guidebook.

After the *jahar* dhikr was completed, the trainees continued the practice of *khafi* dhikr, which was conducted with tranquillity and greater depth. In a concentrated environment, the trainees were asked to close their eyes, bring their chin to the left side of their chest, and chant dhikr in their hearts. Observations indicated that this strategy facilitated the trainees in attaining a profound sense of tranquillity and enhanced their contact with Allah SWT. In addition to the designated time, constant practice of *khafi* dhikr was also advocated for trainees in their routines.

The trainee's observation revealed that the use of dhikr therapy at PRI (1) Malaysia effectively teaches trainees to consistently endeavour to remember Allah SWT. Mansor (2019) asserts that this dhikr therapy seeks to maintain trainees' connection to Allah SWT through the practice of dhikr while also assisting them in eradicating undesirable qualities. Trainees perceive that they are perpetually under the observation of Allah SWT.

This therapy of intense dhikr aligns with the hadith that advocates for the recitation of "*Lailahaillallah*" to fortify faith. According to Al-Hakim (1990), the Prophet Muhammad (PBUH) declared that:

Meaning: "Renew your faith! The companions asked, How do we renew our faith, O Messenger of Allah? The Prophet replied, "By frequently saying *Lailahaillallah*."

(HR. Hakim. Al-Mustadrak Ala al-Sahihin, Bab Kitab al-Taubah Wa al-Inabah. No. 4/256)

Meanwhile, the basis for *kebafi* dhikr therapy can be seen in the Quran, Surah Al-Araf, verse 205, explaining about remembering Allah SWT in the heart by using the senses. Allah SWT says, which means:

Translation: "And do thou (O reader!) Bring thy Lord to remembrance in thy (very) soul, with humility and in reverence, without loudness in words, in the mornings and evenings; and be not thou of those who are unheedful" (al-Araf: 205).

According to Al-Qurtubi's interpretation (2009), the aforementioned verse signifies that Allah SWT reminds mankind to mention His name in their hearts with humility and fear, without raising their voices, both in the morning and in the evening, and to avoid negligence in remembering Allah SWT. Al-Mahalli and As-Sayuti (1989) also interpret the verse as a call to mention the name of Allah SWT in their hearts with full fear and humility and without raising their voices, both in the morning and in the evening. Frequent mention of the name of Allah SWT can help prevent humans from being negligent.

Regarding dhikr therapy, Shafie' (2006) argues that from a physical perspective, *jahar* dhikr therapy is an active movement that is able to restore the physical condition and health of its practitioners. Meanwhile, from a spiritual standpoint, *kebafi* dhikr therapy seeks to cultivate asceticism towards Allah SWT by eradicating all undesirable characteristics. This dhikr therapy helps individuals develop qualities like love for Allah SWT (*mahabbah*), awareness of being watched by Allah SWT (*muraqabah*), letting go of worldly attachments (*zuhud*), and complete obedience to Allah SWT (*fana*), which helps get rid of unwanted desires (Shafie', 2006).

Consequently, both forms of dhikr are employed therapeutically as a daily exercise for trainees, aimed at fortifying their inner and spiritual selves while fostering a stronger connection to Allah SWT. This practice aims to achieve His pleasure, love, and *makrifat* (the true knowledge of Allah SWT), while also restoring physical well-being through the movement of the head and body during the performance of dhikr. The practices of *jahar* dhikr and *kebafi* dhikr entail certain methodologies that learners must adhere to to achieve proficiency in dhikr.

4.2. Second, the Impact of Dhikr Therapy on the Psychospiritual Well-being of Trainees at Pondok Remaja Inabah (1) Malaysia

The analysis of tree nodes (see Figure 1) indicated that the implementation of dhikr therapy at Pondok Remaja Inabah (1) Malaysia markedly impacted drug addiction recovery, especially in the context of the psychospiritual well-being of the trainees. The resulting positive effects can be clearly seen after the trainees' consistent practice of *jahar* dhikr and *kebafi* dhikr therapy at PRI (1) Malaysia. The basic impacts of this therapy within the psychospiritual framework include four elements: the heart (*al-qalb*), spirit (*al-rub*), desire (*al-nafs*), and intellect (*al-aql*). The findings and discussions in this part were obtained from in-person interviews and observations conducted with trainees at PRI (1) Malaysia. The findings of this study can be ascribed to the ensuing discussions:

The results of dhikr therapy implementation revealed that trainees demonstrated enhanced patience and were able to control their attitudes in facing several situations at PRI (1) Malaysia, including conflict resolution among peers and stress management during an intensive recovery therapy program. They also stated that engaging in dhikr allowed them to manage their behaviours more successfully. Additionally, they demonstrated other commendable traits, like enhanced amicability and improved rapport with peers and instructors. An admirable spirit of tolerance was highlighted, demonstrated by the *gotong-royong* (mutual help activities) initiative for cleaning the PRI (1) Malaysia area. Trainees expressed a wish to elevate their ethical standards, particularly concerning virtuous character. The majority of learners demonstrated positive attitude changes after forty days of dhikr practice. The initial and subsequent respondents expressed the following:

...After dhikr, I can control myself...be patient...be tolerant. Mutual cooperation...help each other. Feel like wanting to have noble behaviour...want to improve morals... 40 days is a change... (First respondent).

...A positive attitude is really visible...easy to get along with and tolerant...be patient and then do dhikr. Try to learn to be good...after 40 days, I feel like I want to be a good person... (Second respondent).

Moreover, the results of engaging in dhikr therapy demonstrated that the trainees showed heightened commitment to performing both obligatory and voluntary prayers. They indicated that their bodies felt more buoyant while engaging in prayers, especially within the mosque. During worship, they had a more fervent demeanor. They effectively trained themselves to come to the mosque early, before the call to prayer for obligatory worship, while participating in communal devotion. They also claimed that there was pleasure and satisfaction in participating in worship activities. The trainees also felt regret when leaving behind the worship practices that had become routine throughout their time at PRI (1) Malaysia. Observations revealed a disposition towards repentance and acknowledgement of past mistakes, coupled with enthusiasm and willingness to engage in the rehabilitation therapy program. According to the initial and subsequent respondents:

...Feeling light to pray...encouraged to go early...salat once. Alhamdulillah, the pleasure of doing worship. Let's feel the love to stay in the act of worship... (First respondent).

...I can be disciplined, have the determination, want to pray once and pray circumcision. It feels good to do good deeds. I want to stay. Previously I used to be lazy. Don't have the enthusiasm... (Second respondent).

The study's findings indicated that the trainees sought to deepen their connection with Islam and Allah SWT. They believed that all their deeds were perceived, acknowledged, and comprehended by Allah SWT, as if they were under His total oversight. The trainees reported a heightened sense of serenity following an increase in their dhikr practice. This circumstance also affected their approach to problem-solving. Previously prone to complaints, they subsequently approached problem-solving with composure, perceiving each challenge as a test from Allah SWT. Furthermore, the trainees noted that following the practice of dhikr, there was a persistent inclination to recall Allah SWT. They acknowledged that this sensation varied in intensity, fluctuating between strong and weak, contingent upon the dhikr practice performed. Interviews with the third and fourth responders revealed that:

...Feeling seen, heard, looked at, and known by Allah SWT as if under surveillance...more and more dhikr...more peace... Previously, problems were faced with complaints... With dhikr, I face with peace, considering all tests. The feeling of remembering Allah SWT has ups and downs... (Third respondent).

...Close to religion, feeling under the watchful eye of Allah SWT...the more dhikr, the calmer I become...the more I can solve the problem...blessing from dhikr... (Fourth respondent).

Furthermore, the study's results demonstrated that subsequent to the use of dhikr therapy, the trainees showed heightened mental stability, superior anger management, and augmented patience. The trainees recalled the dhikr phrase "*Lailahaillallah*" at moments of anger, which restored their mental equilibrium. All obstacles they faced were articulable, allowing for humour among them, which facilitated more open-minded thinking. They show a willingness to accept guidance from the mentor. In addition, the trainees were capable of cultivating more positive thoughts. They exhibited a greater propensity for benevolence and kindness when their minds reverted to normalcy, free from the influence of drugs, which enabled them to discern moral distinctions with enhanced clarity. This tendency also demonstrated their maturity in thinking. The fourth and fifth respondents confirmed this, articulating in their interviews:

...When I want to get angry, remember dhikr... Be patient a little... We can have fun together... I can control myself... There is a change...because we are not under the influence of drugs...we can think sanely... (Fourth respondent).

...There is a stable change...if I want to get angry, it won't happen because I remember the dhikr, *Lailahaillallah*...open-minded...if there is a problem, I can share it...it means being friendly with the people...you can joke... I have many thoughts of doing good...think sanely, be positive... (Fifth respondent).

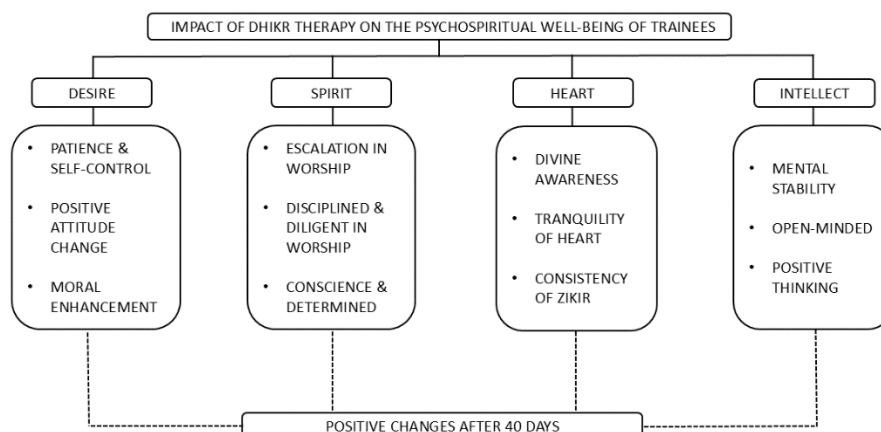


Figure 1: The Impact of Dhikr Therapy on the Psychospiritual Well-being of Trainees) (Source: Study Analysis

5. ANALYSIS AND DISCUSSION

This section analyses the impact of dhikr therapy on the psychospiritual well-being of trainees. The impact of dhikr therapy is analysed based on four primary elements: desire, spirit, heart, and intellect among trainees. These four factors are deemed essential in the development of the psychospiritual well-being of each participating trainee. The review and conversation can be comprehensively examined as outlined below:

5.1. First, the element of desire – related to the behaviour

Based on the analysis conducted, this study found that dhikr therapy implemented at PRI (1) Malaysia has a significant impact on self-control and the development of positive attitudes among trainees. Trainees who received this therapy showed enhanced patience and better behavioural control. They exhibited greater friendliness, sociability, and tolerance, hence fostering the development of more harmonious social connections in their vicinity. The trainees' attitude of tolerance is evident through their participation in mutual help activities, which demonstrates an enhancement in cooperation and social responsibility. Their aspiration to enhance their ethics and embody virtuous character also signifies profound interior transformations. This beneficial transformation can be attributed to their unwavering commitment to practicing dhikr for forty days, which indirectly contributes significantly to the development of improved ideas and behaviours.

The results concerning behaviours in the trainees' desire elements align with Arifin's (1983) assertion that dhikr can cultivate commendable morals through the harmony between verbal dhikr (*jahar*) and internalised dhikr (*khaf*). This union fortifies faith, enhances self-awareness, and encourages an intense sense of submission to Allah SWT. According to Ibn Athaillah (2015), the antidote to controlling desire is to remember Him more (dhikr). Mansor et al. (2023) emphasised that religious and spiritual-based methods, such as the practice of TQN dhikr, have the potential to give trainees confidence and self-strength to abandon drugs and improve their behaviour for the better. Dhikr is also recognised for being able to influence social intelligence (Khaerani & Nurlaen, 2019), including in the context of socialising with fellow trainees. Therefore, dhikr therapy is an effective instrument for improving the well-being of desire and thus bringing about behavioural changes for the better.

The effectiveness of dhikr activities in cultivating character and mitigating undesirable behaviour is underscored in the Quran's Surah al-Ankabut, verse 45, where Allah SWT states:

Translation: "Remembrance of Allah is the greatest thing in life, without doubt, and Allah knows the deeds that you do" (al-Ankabut: 45).

According to the aforementioned passage, Al-Qurtubi (2009) posited that the recollection of Allah SWT serves as the primary safeguard against immoral and malevolent actions. Dhikr, when coupled with knowledge, humility, and sincerity, will receive guidance from Allah SWT, drawing an individual nearer to Him and shielding them from malevolence (sin). In Ibn Kathir (1999), the interpretation of the phrase "*Remembrance of Allah is the greatest*" encompasses two main aspects, namely the servant's

remembrance of Allah SWT and Allah SWT's remembrance of His servant. The most important remembrance is when a servant remembers Him by obeying His commands and avoiding His prohibitions.

5.2. Secondly, the element of spirit – related to the practice of worship

The analysis demonstrated that dhikr therapy inside the rehabilitation program at PRI (1) Malaysia substantially impacted the trainees' commitment to engaging in worship, especially obligatory and sunnah prayers. The findings indicate that the trainees displayed heightened passion for doing prayers at the mosque and exhibited discipline by arriving prior to the call to prayer and allocating time for prayer. This situation indicates positive advancements in the spiritual realm, particularly regarding discipline in worship. The trainees' commitment to sustaining the worship routine established during the recovery program demonstrates the efficacy of dhikr therapy in cultivating enduring spiritual awareness. This situation demonstrates that the alterations are not merely transient but have the capacity to become ingrained in daily routines. Conversely, the trainees are increasingly aware of their previous mistakes, which in turn encourages them to engage in treatment with heightened sincerity and seriousness. This situation illustrates that dhikr therapy not only contributes to the development of self-control but also enhances the capacity for repentance and personal transformation towards virtue.

The results regarding worship practices in the element of spirit correspond with the views of Islamic scholars. Al-Haddad (2012) claimed that practicing dhikr provides many important benefits, as a person who truly understands it can shift their attention away from temporary pleasures, particularly when it comes to focussing on worship. In Arifin (1983), individuals who always remember Allah SWT will be more diligent in worship, especially prayer. In addition, Al-Ahmad (2013) stated that dhikr helps a person to obey Allah SWT by making it easier and also providing spiritual pleasure. In Amida and Kodir (2022), it was found that dhikr has various benefits, including increasing togetherness with Allah SWT through worship and improving sincerity and patience in worship.

The importance of worship and patience in carrying it out is also emphasised in the Quran's Surah al-Baqarah (verse 45), where Allah SWT says:

Translation: "Nay, seek (Allah's) help with patient perseverance and prayer: It is indeed difficult, except to those who bring a lowly spirit." (al-Baqarah: 45).

Ibn Kathir (1999) viewed the aforementioned verse as indicating that prayer is the greatest helper to strengthen oneself in doing something. Al-Mahalli and As-Sayuti (1989) regarded the aforementioned passage as a call to seek assistance in confronting challenges via patience and abstaining from misconduct by engaging in prayer. The term "prayer" is explicitly referenced as an indicator of its significance.

5.3. Third, the element of heart – related to the feeling of divinity

The practice of dhikr influences desire and spirit and significantly enhances the spiritual awareness of trainees, thereby fortifying their connection with Islam and Allah SWT. The foundation is that the trainees are becoming more cognisant of the reality of divinity, perceiving that all their acts are perpetually under the oversight of Allah SWT, which consequently induces transformations in their attitudes and behaviours, particularly when confronting life's adversities. The tranquillity acquired through the practice of dhikr aids trainees in managing stress and addressing challenges with greater rationality and composure. Previously tending to complain, they are now more robust, viewing each problem as a test from Allah SWT that must be confronted with patience and faith. The trainees' awareness of Allah SWT is not static and contingent upon their consistency in dhikr. This situation illustrates the necessity of reinforcing spiritual discipline to ensure that the changes attained are more enduring and impactful in their lives.

The findings concerning the trainee's perception of divinity within the heart element align with Al-Ahmad's (2013) assertion that the practice of dhikr fosters an attitude of *muraqabah* (the awareness of Allah SWT's perpetual observation) and elevates an individual to the state of *ihسان*, which is worship as though one perceives Allah SWT. According to Mansor et al. (2020), Islam views dhikr as a means of enhancing an individual's spirituality and religiosity. Apart from being a way to remember Allah SWT, dhikr also serves as an antidote for the ailments of the spirit and heart. Ghazali (1996) emphasised that dhikr plays a role in softening human hearts and making it easier for them to accept the truth. According to El Bilad et al. (2022), the practice of dhikr is also effective in increasing a person's spiritual intelligence.

The efficacy of dhikr in fostering tranquillity and enhancing an individual's connection with Allah SWT is underscored in the Quran, Surah al-Ra'd, verse 28, where Allah SWT states:

Translation: "Those who believe and whose hearts find satisfaction in the remembrance of Allah. For without doubt in the remembrance of Allah do hearts find satisfaction." (al-Ra'd: 28).

In Al-Qurtubi (2009), the verse means the importance of dhikr as a source of inner peace and tranquillity. Remembering Allah SWT involves various forms of worship and obedience. Ibn Kathir (1999) also interpreted the verse "those who believe and whose hearts find peace in the remembrance of Allah SWT" to mean that they become good and calm in the presence of Allah SWT, feel at peace by remembering Him, and are content to make Him their protector and helper.

5.4. Fourth, the element of intellect – related to the mental and thinking

Furthermore, dhikr therapy is considered significant in assisting trainees in attaining mental stability, regulating emotions, and enhancing their patience. The practice of dhikr, particularly through the recitation of "*Lailahaillallah*", serves as an effective internal control mechanism for self-calming and restoring emotional equilibrium in times of stress or rage. This therapy influences the social and communicative dimensions of trainees, enhancing their willingness to share issues, engage positively with others, and more readily take mentorship guidance. The efficacy of this therapy can also be evaluated by the inclination of trainees to exhibit benevolence, grounded in rational thought and devoid of drug influence. Dhikr therapy serves not only as a means of enhancing psychospiritual well-being but also as an instrument for psychological healing that fosters the social well-being of trainees.

The results about mental health and the trainee's thoughts support Arifin's (1983) idea that practicing dhikr and seeking Allah SWT's mercy can help people avoid mistakes caused by a hard heart and anger. According to Al-Sya'rani (1996), dhikr performed with consistency and full awareness (*budbur al-qalb*) can purify the spirit, soothe the mind, and draw an individual nearer to Allah SWT. Jajat and Baedowi (2003) highlighted that dhikr contributes to enhancing the resilience of the soul and fortitude in confronting life's adversities by acknowledging the transient nature of worldly existence. Rojaya et al. (2020) demonstrate that dhikr therapy is useful in addressing issues connected to self-psychology.

The effectiveness of dhikr therapy for mental stability and clear thinking matches Islamic beliefs that emphasise the value of reason, as shown in Surah al-Zumar, verse 9, where Allah SWT says:

Translation: "It is those who are endued with understanding that receive admonition" (al-Zumar: 9).

Al-Thabari (2000) interprets the above verse as a reminder for intelligent people to derive lessons and consistently acknowledge the manifestations of Allah SWT's majesty. One must reflect, comprehend, and scrutinise His evidence thoroughly. This perspective contrasts with the uninformed and feeble-minded, who are unable to derive advantages from their surroundings and experiences. Meanwhile, As-Sa'di (2002) interprets the above verse to mean that only intelligent people will learn it because they prioritise knowledge over ignorance, which gives them a higher status. They do not permit their mind to be subjugated by desire; rather, they employ it to comprehend the truth.

5.5. Fifth, a new perspective

Furthermore, this study presents a new perspective on psychospiritual-based recovery interventions by systematically analysing the effects of two forms of dhikr, namely *jahar* dhikr and *khafi* dhikr, on the four main elements of humanity, according to the Islamic spiritual perspective: desire, spirit, heart, and intellect. This study fills a gap in the literature by integrating the internal elements of humans as a whole, in contrast to previous studies that focus separately on the benefits of dhikr in either a psychological or spiritual context. This study also distinguishes between the impact of *khafi* dhikr is more focused on internal transformation through divine awareness, and *jahar* dhikr, which emphasises external transformation such as social behaviour.

As a result, this study presents a conceptual framework that explains how dhikr therapy influences the four main elements of human beings within the context of the Islamic psychospiritual framework. This framework demonstrates the reciprocal relationship between dhikr practice and the psychospiritual well-being of the trainees while elucidating the internal mechanisms that make dhikr an effective instrument for behavioural transformation, enhancement of worship, and stabilisation of emotional and mental states. This method provides an important idea in psychospiritual therapies using dhikr therapy from the Tarekat

Qodiriyah Naqsyabandiyah, particularly for helping people recover from drug addiction. The framework of this approach can be referred to in Figure 2.

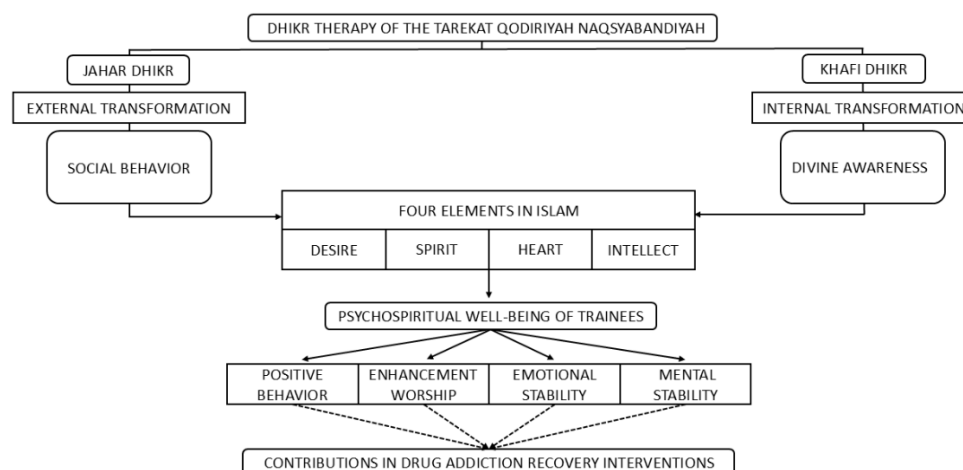


Figure 2: Framework of the Dhikr Therapy Approach of the Tarekat Qodiriyah Naqsyabandiyah
(Source: Research Analysis)

5.6. Sixth, the implications of the study

The findings of this study provide significant implications for the implementation of dhikr therapy in the recovery programme at Pondok Remaja Inabah (1) Malaysia. Dhikr therapy, encompassing khafi dhikr and jahar dhikr, proved useful in enhancing the spiritual and physical resilience of trainees. Khafi dhikr helps in controlling emotions and achieving peace of soul, while *jahar* dhikr contributes to increasing positive behaviour. Therefore, this dhikr therapy plays a role in accelerating the recovery process and improving the psychospiritual well-being of trainees by strengthening their spiritual relationship with Allah SWT.

In addition, this study indicates that dhikr therapy has the potential to be an effective form of psychospiritual intervention in the recovery process of former drug addicts. Its effectiveness in strengthening and enriching the elements of desire, spirit, heart and intellect clearly demonstrates their role in shaping a positive human identity. Therefore, the integration of tarekat dhikr therapy in recovery programs should be strengthened as a holistic approach that contributes to improving the psychological and spiritual well-being of individuals after going through the treatment process.

Furthermore, this study offers solutions for improving the policies and guidelines of the National Anti-Drug Agency (AADK), specifically in strengthening the spiritual dimension in the Islamic Spiritual Rehabilitation Approach (ISRA) module. This finding suggests the need for more systematic psychospiritual integration as a key component in drug rehabilitation strategies. Therefore, focusing on practices like jahar dhikr and khafi dhikr therapy should be the foundation and main approach of AADK therapies to make them more effective and sustainable.

6. CONCLUSION

In conclusion, dhikr therapy in PRI (1) Malaysia encompasses both jahar dhikr and khafi dhikr. Dhikr is performed and organised after prayers, under the supervision of a guide, and in accordance with the Uquudul Jumaan book. Jahar dhikr is said out loud with the phrase “Lailahaillallah” at least 165 times because this number holds special meaning in dhikr practice and is the minimum needed to help the heart concentrate during dhikr (hudur al-qalb). Khafi dhikr is performed in a tranquil mood with complete focus in the heart. This therapy is employed as a daily practice to enhance spirituality, foster proximity to Allah SWT, and attain reda, mahabbah, and his makrifat while also promoting an individual's physical health through movement during dhikr.

Next, the main findings of this study indicate that dhikr therapy positively affects the psychospiritual well-being of trainees regarding the elements of desire, spirit, heart, and intellect. In the element of desire, trainees become more patient, have noble character, and show a friendly and tolerant attitude. In the element of spirit, they are more diligent in worship, disciplined in prayer, and experience realisation and enjoyment in worship. Next, the element of heart shows an increase in divine awareness,

tranquillity, and the capacity to confront problems with greater composure. The element of intellect is assessed that dhikr therapy contributes to mental stability and maturity of thought by aiding trainees in emotional regulation, promoting open-mindedness, and encouraging them towards goodness.

Finally, this study concludes that TQN dhikr therapy has the potential to be one of the best alternative approaches to psychospiritual recovery in the current era of globalisation, especially for individuals who experience problems such as mental health or drug addiction. In this regard, the practice of dhikr needs to be integrated as a permanent module in drug rehabilitation programmes or other related programmes. Organisations, such as the AADK and private rehabilitation centres, are recommended to strengthen treatments based on dhikr therapy, especially jahar dhikr and khafi dhikr, as a comprehensive intervention.

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