



The Therapeutic Role of Ruqyah Syar'iyah in Addressing Non-Medical Health Issues

Muhammad Faiz

Da'wah Science Study Program, Faculty of Da'wah and Communication, Ar-Raniry State Islamic University, Banda Aceh, Indonesia

Article Info

Article history:

Received Apr 10, 2025

Revised May 31, 2025

Accepted Jun 16, 2025

Online First Jun 29, 2025

Keywords:

Islamic Healing

Mental Health

Non-Medical Treatment

Preventive Therapy

Ruqyah Syar'iyah

ABSTRACT

Purpose of the study: This study aims to examine the function, characteristics, and correct methods of *Ruqyah Syar'iyah* in addressing non-medical illnesses, with a focus on its relevance to contemporary mental health challenges.

Methodology: Using a qualitative approach, this research applies library-based analysis, drawing on classical Islamic texts, contemporary scholarly works, and relevant empirical studies. Sources were selected based on thematic relevance, credibility, and alignment with Islamic principles. Thematic analysis was conducted to identify core functions, procedural characteristics, and ethical guidelines of *Ruqyah Syar'iyah*.

Main Findings: Findings indicate that *Ruqyah Syar'iyah* serves dual roles as therapeutic and preventive therapy for physical, psychological, and spiritual ailments. When combined with complementary practices such as cupping or herbal remedies, it shows increased efficacy. The practice emphasizes spiritual integrity, adherence to Islamic law, and active patient engagement.

Novelty/Originality of this study: This research provides a structured framework linking *Ruqyah Syar'iyah* with modern mental health discourse, highlighting its potential as a culturally grounded, faith-based therapeutic approach. It also offers an operational guideline for practitioners based on Qur'anic and Prophetic traditions.

This is an open access article under the [CC BY](https://creativecommons.org/licenses/by/4.0/) license



Corresponding Author:

Muhammad Faiz

Da'wah Science Study Program, Faculty of Da'wah and Communication, Ar-Raniry State Islamic University
Jl. Syech Abdurrauf, KOPELMA Darussalam, Kec. Syiah Kuala, Kota Banda Aceh.

Email: mhdizfaiz11@gmail.com

1. INTRODUCTION

Humans are inherently inseparable from various life problems that can disrupt their mental health [1], [2]. The rapid and sophisticated pace of modern progress has contributed to the rise in cases of mental disorders in society [3], [4]. From the time of the Prophet Adam (peace be upon him) until today, mental disorders have often been linked to the temptations of Satan. Satan tempts humans through subtle means such as whispers, seduction, and deception to distance them from Allah SWT. These disturbances often go unnoticed and can lead to mental and spiritual damage.

Some people believe that mental disorders arise from weak faith, a lack of dhikrullah (remembrance of Allah), and a failure to seek protection from Allah SWT [5]. Consequently, when experiencing mental disorders, they tend to seek help from shamans or psychics [6], [7]. Unfortunately, the healing obtained through these methods is only temporary. In fact, some suffer from more severe disorders and go from one shaman to another. This demonstrates the public's lack of understanding of Islamic law-based treatment.

One treatment method that aligns with Islamic teachings is *Ruqyah Syar'iyah* therapy. This therapy is carried out using the Koranic approach, through reading holy verses and prescribed prayers [8]-[10]. As Allah SWT says in QS. Yunus verse 57, the Qur'an is guidance, mercy and healing for diseases in the chest. *Ruqyah Syar'iyah* is an effective means of treating non-medical and mental disorders. This method is not only spiritual, but also provides inner peace for the patient.

In Islam, there are two types of ruqyah: *Ruqyah Syirkiyyah* and *Ruqyah Syar'iyah*. *Ruqyah Syirkiyyah* contains elements of shirk because it involves the help of jinns or devils, as well as distancing oneself from Allah SWT [8]. On the other hand, *Ruqyah Syar'iyah* is carried out on the basis of faith and relying completely on Allah as the healer [9], [11], [12]. Healing does not come from humans or objects, but only by Allah's permission [13], [14]. Therefore, this treatment is free from elements of shirk and is in line with sharia guidelines.

One approach to spiritual healing based on the Quran is through akhlak mahmudah (religious akhlaq) and tawakkul (trust in Allah). By reciting holy verses and strengthening one's faith, one can overcome stress and mental disorders [15], [16]. *Ruqyah Syar'iyah* also provides peace of mind and tranquility. This is very helpful in overcoming fear, anxiety, and the pressures of life [11], [17]. Therefore, this therapy has significant spiritual and psychological benefits.

Unfortunately, many people do not yet understand the value of Islamic healing through *Ruqyah Syar'iyah* [18], [19]. They still tend to rely on shamans or psychics to treat non-medical disorders [20]. However, such treatments contradict the Quran, Sunnah, and the consensus of scholars. The Prophet Muhammad (peace be upon him) even forbade the practice of incantations containing polytheism, as it is a major sin. Therefore, public understanding needs to be clarified to prevent them from falling prey to erroneous treatments.

Ruqyah Syar'iyah is a healing legacy from the Prophet Muhammad (peace be upon him) that can be used to treat physical ailments, mental illnesses, and non-medical disorders [21], [22]. The Hadith states that every disease has a cure, and it is Allah who sends down the cure. By understanding this, patients can have hope for recovery through methods that align with Islamic law. This treatment not only cures but also strengthens faith and protects against the harm of jinn and demons. Therefore, this research is crucial to correctly and scientifically explain the function, characteristics, and methods of Islamic Ruqyah.

Research conducted by Muhammad et al., [23] focuses on the treatment of medical illnesses based on the practices of the Prophet Muhammad (peace be upon him), emphasizing a treatment approach derived from the Qur'an and Sunnah for medically identified physical conditions. Meanwhile, research by Wahyuni et al., [24] highlights hospital healthcare services that comply with Sharia standards, placing ruqyah as an added value in services, but still within the context of formal medical institutions. Neither study has yet thoroughly discussed the role of sharia ruqyah in the context of non-medical illnesses related to spiritual or psychological disorders that cannot be explained medically. The current study fills this gap by comprehensively examining the therapeutic functions, characteristics, and implementation methods of sharia ruqyah specifically for treating non-medical disorders, including the role of a devout Muslim and active patient involvement, thus broadening the perspective beyond medical treatment and hospital services to a holistic and preventative understanding of spiritual health.

The novelty of this research lies in its comprehensive mapping of the functions, characteristics, and procedures for implementing Islamic ruqyah specifically for non-medical disorders, not merely a general practice or institutional service. It emphasizes the prerequisites for the competence of the mualij (righteous faith, adherence to Islamic law) and the role of patient compliance as part of the holistic therapeutic process. This urgency is strong due to the prevalence of mental-spiritual disorders in society, which are often responded to with non-Islamic supernatural practices (shamans/paranormals) that are temporary and risk violating the guidance of Islamic texts. Therefore, appropriate guidelines are needed, based on the Qur'an and Sunnah, that are both preventative and curative. Therefore, the primary objective of this research is to formulate and systematically explain the functions, characteristics, and procedures of Islamic ruqyah in treating non-medical disorders to improve understanding and practice of Islamic healing.

2. RESEARCH METHOD

2.1. Type of Research

A research method is a scientific way to obtain data for specific purposes and uses. Based on this, there are several keywords to consider: scientific method, data, purpose, and use. Scientific method means that the research activity is based on scientific characteristics, which is why this research method was chosen as qualitative [25], [26]. Conducting scientific research requires a method that is truly appropriate to the object being studied [27], [28]. To ensure research activities can be carried out rationally and achieve good results, in qualitative research, the researcher, as the instrument, functions to determine the research focus and select information as data sources.

2.2. Data Sources

In this study, to obtain more accurate data, the researcher used several literature or library materials. Library research is research conducted by searching for data by reading reference books and published materials available in libraries that are related to the research [29], [30].

2.3. Data Collection Techniques

Researchers collect data, assess the validity of the data, analyze the data and draw conclusions from their findings, and track references by reading, reviewing, and recording all data relevant to the problem being studied in order to find the intended meaning. Data collection techniques with documentation, identifying discourse from books, papers or articles, magazines, journals, newspapers, web (internet), or other information related to writing journals to look for things or variables in the form of notes, transcripts, books, and so on that are related to the study of the function of *ruqyah syar'iyah* in treating non-medical diseases [31], [32]. The documentation method is to look for data regarding a thing or variable in the form of notes, transcripts, books, newspapers, magazines, inscriptions, meeting minutes, agendas and so on [33], [34]. This is done with discourse analysis so as not to overlap in conducting the analysis.

2.4. Data Analysis Techniques

Research data analysis techniques are closely related to data collection techniques; in fact, data collection techniques also serve as data analysis techniques. Data analysis is the middle stage of a series of research stages and plays a crucial role. Research results must undergo a prior data analysis process to ensure their validity. According to Miles and Huberman, data analysis techniques consist of four stages: data collection, data reduction, data display, conclusion drawing, and/or verification [35], [36].

3. RESULTS AND DISCUSSION

3.1. The Function of Sharia Ruqyah in Treating Non-Medical Diseases

Based on the Ruqyah practices exemplified by the Prophet Muhammad SAW and the companions of the Prophet Muhammad and also the author's experience of practicing *Ruqyah Syar'iyah* for several years with various phenomena encountered, it is proven that there are at least two functions of *Ruqyah Syar'iyah*, namely as a therapeutic treatment and preventive therapy.

3.1.1. Treatment Therapy

Islamic Ruqyah serves as a therapeutic treatment for the sick. Its benefits extend beyond treating non-medical ailments like jinn (jinn) or witchcraft, but also include physical and psychological treatments (stress or insanity). This can be deduced from the practices of Islamic Ruqyah exemplified by the Prophet Muhammad (peace be upon him) and his Companions (may Allah be pleased with them), as documented in the hadith.

However, in the treatment of physical ailments, Islamic Ruqyah is most effective when combined with other physical therapies (cupping, herbal therapy, water and salt therapy, and so on) [37]-[39], as exemplified by the Prophet Muhammad (peace be upon him) and his Companions (may Allah be pleased with them).

3.1.2. Disease Prevention Therapy

According to numerous authentic narrations from the Prophet Muhammad (peace be upon him), Islamic Ruqyah Syari'ah (Islamic Ruqyah) has provided us with a variety of weapons to ward off attacks from all creatures, including jinn and demons, wild animals, and humans with malicious intent. All of these can be warded off through the practice and recitation of Islamically prescribed ruqyah (independent ruqyah).

The words 'all devils' include devils among humans and jinn. While 'everything that is venomous (hammah)' is anything that contains poison. As for 'blasphemous eyes' according to al-Khithabi, means all diseases and disasters that can cause a person to be disgraced, for example madness or damage to limbs according to Ibn Ambari, these blemishes are contemporary in origin. According to Imam an-Nawawi, 'blasphemous eyes are a disaster that befell him, so he always has a negative view of everything he sees.' On the other hand, there are two plus points that therapy can do as a form of preaching:

Firstly, if a convert treats a sick person using *Ruqyah Syar'iyah* and touches his heart accompanied by *tausiyah* that reminds Allah SWT, he will give an injection of spiritual enthusiasm and motivation, then this can prevent the sick person from despairing of Allah SWT's grace. Second, if someone Mualij is to educate the sick person about the correct Islamic creed and Sharia in their treatment and about shamanic practices from the perspective of Islamic law, so that it can prevent them (patients) from going to shamans (kahin) or clever people ('arrafa). In conclusion, from the discussion above, the author can conclude that the functions of *ruqyah syar'iyah* treatment are at least two: first, as a therapeutic treatment for people who are sick with jinn (non-medical) or magic disorders, physical and psychological (stress or insanity) and second, as a therapy to prevent attacks and disturbances from all creatures, including jinn and demons, wild animals and humans who have *hasad enki* (evil).

3.2. Characteristics of Sharia Ruqyah Treatment in Treating Non-Medical Diseases

According to Abdullah al-Sadhan in his scientific writing entitled *How to treat using the Koran*, he quotes the views of Sheikh Abdullah bin Sulaiman Al-Mani', he is of the opinion that some scientific experts and people in the field of ruqyah have written down several characteristics of *ruqyah syar'iyah* treatment in treating non-medical illnesses, namely:

1. The ruqyah must come from the book of Allah SWT or from the sunnah of Rasulullah SAW, or from the prayers that can be said which contain about relying on Allah Almighty, who has no partner in bringing benefits and rejecting harm or evil, and only Allah is the one who heals.
2. During the process of reading *ruqyah syar'iyah* verses to patients, the ruqyah verses cannot contain anything that is not understandable, such as certain signs and symbolic lines, etc.
3. The *ruqyah syar'iyah* verses used in treatment must be in Arabic, to avoid shortcomings and mistakes in praying and an attitude of dependence on other than Allah if other languages are used.
4. Ruqyah and patients who undergo treatment using ruqyah syar'iyah cannot have faith or believe that in the ruqyah syar'iyah or from it direct healing, however, ruqyah is the only cause and the one who heals is Allah SWT sellah, where He is the one who has made *ruqyah syar'iyah* the cause, while the one who heals is Allah SWT alone.
5. People who do ruqyah must be from among those who believe in Allah SWT as the God who regulates nature and who must be worshipped, all power and effort belong to Him, whatever He wills must happen and whatever He does not will will not happen.
6. People who do ruqyah are not among those who are misguided and deviant, dependent on other than Allah SWT, devoted to the creatures on which they depend, both from devils and naughty jinn with worship and submission. For example, the person doing the ruqyah asks the patient for parts of their clothes, nails and hair or family conditions and so on. These are all acts that are often and commonly carried out by perpetrators of lies, shamans and devil worshipers.

According to Sheikh Wahid Abd. Salam Bali, in his book, "The Shield of Invulnerability to Ward Off the Evil of Jinns and Satans," he further adds several characteristics of Islamic ruqyah treatment for non-medical ailments (jinn and satanic disorders). These characteristics should include the following:

1. People who carry out this *ruqyah syar'iyah* treatment should adhere to the aqidah of the Salafus Soleh Ridwanallahu 'Alaihim, because that is the only form of Aqidah (belief in religion) that is holy, clean and pure. This means that the Salafus Soleh are those who lived three hundred years after the death of the Prophet Muhammad SAW, namely the Companions, the Tabi'in, Tabi' Tabi'in, which consists of Muhaddithin, Mujtahidin Imams, high priests in jurisprudence and the like, must truly realize the desires of Tauhid with full sincerity in both words and deeds.
2. He should also believe that the Word of Allah SWT can respond to jinn and devil creatures and know as well as possible the affairs of these jinn and devil creatures.
3. Be aware of behavior the deception of jinns and devils. For example, what happened to Sheikh Ibn Taymiyyah: when the genie said to him: "Later I will give you a karomah". Ibnu Taimiyyah answered: "It's not bad, the important thing is that you obey Allah SWT and His Messenger SAW." So, if he didn't know the tricks of jinn and devils, he certainly wouldn't have said that.
4. The most afdhal, for people who want to carry out this *ruqyah syar'iyah* treatment on patients who are married people.
5. Avoid getting involved in haram things which are the main targets of jinn and devils against humans and always continue to practice obedience, which will certainly weaken the deceptions of jinn and devils.
6. Always make dhikr of Allah SWT, who is the only one who fences fences and is immune from being disturbed by jinns and demons. rejammed. Of course, this will not be successful, but you must know and carry out the types of remembrance of the Prophet SAW that His Majesty always practiced (ma'thur) every day, such as morning and evening remembrance, remembrance for entering the house and leaving it, remembrance for entering the mosque and leaving it, remembrance when you hear the sound of a cock crowing or a donkey crowing, remembrance when you see the moon floating, remembrance when driving a vehicle and so on.
7. We want to be sincere in our intentions when carrying out the treatment process for our patients and protect ourselves first with prayers or verses taken from the Koran and Hadith which aim to ask for protection from Allah SWT from the disturbances of jinn, demons, wild animals and evil humans, for example by reading Surah al-Ikhlâs 3x, al-Falaq 3x and an-Nas 3x. Every time a person's approach to Allah SWT increases, every time the jinn and devils distance themselves from him (Mu'alij). Even with such an increase in self-approach, it will indirectly add more power and response to the creature. Know that, if you have power over yourself, the jinn and Satan, you will certainly be strong against the other, whereas if you are weak against both, you will surely be weak against the other.

In conclusion, from the discussion above, the author can conclude that the characteristics of *ruqyah syar'iyah* treatment in treating non-medical illnesses are that the treatment must use *ruqyah syar'iyah* verses sourced from the Koran and Sunnah, which cannot contain shirk in it, carried out by a pious Islamic nurse (mualij) who knows the nature of jinns and demons and so on. A nurse (mualij) needs to get closer to Allah SWT by maintaining a good relationship with Allah SWT. The closer our relationship with Allah SWT, the farther away we are from jinn and devils. Therefore, we need to maintain a relationship with Allah SWT so that we will be given His strength and help.

3.3. Sharia Ruqyah Treatment Methods for Treating Non-Medical Diseases

The levels of Islamic ruqyah treatment methods for treating non-medical illnesses (jinn and satanic disturbances) are the levels of a nurse (mualij) in helping to resolve the problems faced by their patients. Anyone seeking treatment for non-medical illnesses (jinn and satanic disturbances) within the human body must go through several main stages [40], [41]. According to Sheikh Wahid bin Abdus Salam bin Bali, these treatment levels are divided into several levels, namely:

1. First level: Preparation before treatment

Preparation before treatment is important for a nurse (mualij) to carry out the treatment session so that it can run well and get the help of Allah SWT, then get His approval. Some of the initial preparations before treatment are as follows:

- a. Prepare the right atmosphere in the treatment area. Take out the pictures in the house or place of care, especially pictures of animals and humans so that the angels can enter them.
- b. Remove and burn any form of amulet or amulet that is on the patient.
- c. Keep the place away from songs and any musical instruments.
- d. Avoiding treatment facilities due to Sharia violations such as women not covering their intimate parts.
- e. Provide lessons regarding the correct faith to patients and family members so that they continue to rely on hope in Allah SWT and eliminate dependence on others.
- f. Explain to the patient and family members that the treatment method you use is different from the treatment carried out by magicians and bomohs. Then explained that in the Koran there is medicine and antidote as well as mercy, as preached by Allah SWT.
- g. Examine (diagnose) the patient by asking the patient several questions to detect signs of non-medical disease (jinn and demons) in the patient's body.
- h. It is recommended that you perform ablution before starting treatment.
- i. If the patient is a woman, do not start the treatment session so that she is wearing clothing that covers her private parts while the treatment is being carried out.
- j. Do not look after a woman unless accompanied by her mahram.
- k. Pray to Allah SWT to help and assist you in your efforts to expel the jinn and demons

2. Second Rank: Maintainability rank

In this second stage, the first step every nurse (mualij) needs to take is to ensure whether the patient is conscious or not (trance). If the patient is conscious, the nurse needs to start the treatment session by asking the patient to read "Ummul Buku" (surah al-Fatihah), the Kursi verse and the prayer session as the beginning of the treatment session. The aim starting with Surah al-Fatihah is so that throughout the treatment, patients and nurses receive help from Allah SWT and are blessed by Him.

Next, the nurse needs to ask permission to care for the patient. Asking permission from the patient is important, especially if the patient is a woman. The nurse needs to ask permission from the father or sibling if the patient is not married. If the patient already has a husband, the nurse needs to ask permission from her husband first before starting the treatment session.

If the patient is unconscious (possessed or hysterical), the nurse needs to place his hand on the patient's head and continue to perform ruqyah (cast a spell) without asking the patient to recite Surah al-Fatihah, the Kursi and Selawat verses.

Next, after asking permission from the patient's family members, the nurse should place his hand on the patient's head. Place your hand really in the middle of the patient's head (the crown of the head) and read the verses like the following in the patient's ear with the correct reading, namely makhraj and tajwid.

3. Post-Treatment Rating

At this level, nurses and patients need to play their respective roles. If Allah SWT has given healing to the patient with your efforts and efforts, then first of all you should thank Him. Remember, thanks to that little effort. Allah SWT provides healing for the pain and suffering experienced by patients.

Indeed, healing is sustenance and abundant grace from Allah SWT to the patient through your efforts. So increase your praise to Him because Allah SWT is the place worthy of praise. Never let the success of caring for patients cause you to feel embarrassed and proud of yourself.

Apart from that, you don't need to tell other people about the pain the patient is experiencing. Because he might insult them. In addition, doubting this action can give space and opportunity to jinn and satan to destroy you by creating feelings of distrust and arrogance.

Know that jinn and devils will mislead humans in several ways. One way is to create feelings of happiness and pride in the abundance of Allah SWT's grace through your efforts. The nature of riyak and self-pride will destroy your practices and worship like fire consuming wood. May Allah SWT protect us from undesirable qualities like this.

Likewise for patients, you as a nurse need to advise the patient to perform the circumcision prayer of thanks to Allah SWT as a sign of infinite gratitude for healing him. Remember that pain comes from Allah SWT and healing also comes from Him. Confidence and effort are the responsibility of the patient and nurse. If you seek treatment once but recovery is still a dead end, don't give up hope of continuing treatment. Remember that suffering endured for a long time and continued effort are important to achieve healing. Therefore, the responsibility of all of us is to hope for Allah SWT's help alone.

Apart from that, patients also need to carry out religious demands as best as possible so that they are always in the abundance of grace and protection of Allah SWT. This is because, it is very likely that jinns and demons will try to re-enter the patient's body due to the patient's own negligence and negligence. If the patient is under the protection of Allah SWT, then no one can disturb him.

As a sign of infinite gratitude, it would be nice if the patient held a feast of thanksgiving and gave food to the poor or orphans. This is important to get blessings and approval from Allah SWT.

4. Self-Defense Fort against Non-Medical Diseases

This self-defense fortification practice is an effort to resolve the disease problems faced, especially those related to non-medical disorders (jinn and demons). This self-defense fortress is also very suitable for people who are trying to help people who experience non-medical problems and also patients who suffer from non-medical illnesses. Here are six ways to protect yourself, your family and your possessions from the disturbances of jinn and demons, wild animals and evil humans, namely:

a. Fortress with Surah al-Fatihah

Practice reciting Surah al-Fatihah every day after the 5 daily Fardhu prayers. Intend to read Surah al-Fatihah so that Allah SWT makes it your self-defense. The way to practice charity with Surah al-Fatihah is to read Surah al-Fatihah only once every time after the Fardhu prayer for the first day. Example: say this practice starts at dawn on Tuesday. After completing the wudhu and prayer after the Fajr Prayer, read Surah al-Fatihah once with the above intention. This is also followed by the completion of Fardhu Zuhr, Asr, Maghrib and Ishaak. For the second day, after the Fardhu Prayer (starting at Fajr) read Surah al-Fatihah twice with the same intention. And so it goes until Monday. On Monday, Surah al-Fatihah is read seven times after every fardhu prayer. In the following days, continue to recite Surah al-Fatihah seven times each time after the Fardhu prayer. This means that every day you should read Surah al-Fatihah 35 times with the intention of protecting yourself. Reading with the intention of self-protection. Reading with this intention is read after completing the wudhu and prayer after prayer.

b. Fortress with Al-Muawwizat

Al-Muawwizat means protectors, it consists of three Surahs, namely Surah al-Ikhlâs, al-Falaq and an-Nas. The way to do charity with al-Muawwizat is to put your feet towards the Qibla. Raise both hands as if you are praying. Read the Muawwizat verses (each Surah three times) until finished (excluding reading Surah al-Fatihah). Inhale then blow into the palm of your hand until you run out of breath. Take a few breaths, then hold your breath while sweeping your palms over all parts of the body that can be reached unless the parts are difficult. Do it once before going to bed and after Fajr Prayer every day.

c. Fortress with Ayatul Kursi

The way to do charity with Ayatul Kursi is to read Ayatul Kursi with 9 endowments (like the sign of endowment in the Rasm Uthmani Koran). To protect yourself, after reading the Ayatul, inflate chairs around you following the movement of the tawaf of the Ka'abah with the intention of protecting yourself. To protect the house too, read Ayatul Kursi while walking around the house (following movements like tawaf Ka'abah). You can walk either inside or outside the house.

d. Wall with Surah Yasin Verses 1-9

The way to do charity using Surah Yasin verses 1-9 is to protect yourself, your family and your possessions. Stand in one corner of the house (say in front of the house on the right) while facing the other corner of the house, namely on the left of the house. Read Surah al-Fatihah followed by Surah Yasin verses 1-9. Read while walking towards the other corner of the house (following the direction of the tawaf of the Ka'abah). Read this combination in each corner, that is, until you meet the first corner. The number of corners is 4 times. The final reading is the fifth reading, reading while pointing to the walls of the entire roof of the house.

e. Fort with Fortified Prayers

The way to do charity with him is to stand facing forward (say towards the north). Read this verse then blow until you finish breathing forward while turning right to left. Turn to the left (now stand towards the west), read this verse then blow until you run out of breath forward while turning right to left. Do the same thing for the south and east. Turn back to the north, read again then blow down until you run out of breath. Read again then blow upwards until you run out of breath. Finally (seventh reading), read this verse then inhale and hold your breath for as long as you can, then exhale.

f. Fortress with Driving Verse

If you want to go to a risky, dangerous place, travel, go back to your hometown, want to do something risky, go home instead of doing something risky, then read this verse 7 times. If you get stuck in your reading or have any disturbances when reading this verse, take a break first. After taking a break, read again up to 7 times so that the reading becomes smooth again, then continue the journey or work.

The need for mental health services has increased significantly globally, particularly since the COVID-19 pandemic, which caused an increase in the prevalence of anxiety and depression by approximately 25% in its initial years. This situation highlights the significant burden of mental illness and the gap in services in many countries.

In the context of this global mental burden, culturally and spiritually based healing approaches such as *Ruqyah Syar'iyah* have practical relevance. Many communities in various countries still rely on traditional and spiritual practices as part of their coping strategies and first-aid seeking [42], [43]. The WHO encourages the integration of traditional practices that meet safety and effectiveness standards into national health systems, so that culturally based approaches can be utilized to reach populations underserved by formal medical services.

Scientific evidence on the role of complementary and alternative medicine (CAM) in mental health issues is mixed: some approaches (e.g., meditation, yoga, and some psychoeducational interventions) have empirical support, while others require further research. Therefore, *Ruqyah Syar'iyah*, as a religious practice, needs to be studied using rigorous empirical methods to assess its effectiveness, mechanisms of action (e.g., relaxation effects, strengthening social affiliation, cognitive changes), and potential side effects or harms when separated from medical standards.

Several studies and systematic reviews in the context of predominantly traditional countries have shown that collaboration between formal healthcare providers and traditional practitioners (including traditional healers/shamans) can improve access to mental health services and narrow the care gap, provided there is training, clear referrals, and patient protection mechanisms. Such a collaborative model could serve as a framework for integrating *Ruqyah Syar'iyah* into the local mental health ecosystem: for example, screening by healthcare professionals, referral to *Ruqyah* practitioners who meet ethical and sharia-compliant criteria, and conversely, medical supervision in the event of serious clinical symptoms.

Ethically and practically, such integration requires several requirements: (1) safety standards—avoiding harmful practices (e.g., isolation without medical care if a patient is at risk of suicide); (2) practitioner qualifications—requirements of faith, ethics, and basic knowledge of medical/psychiatric warning signs; (3) a framework for referral between *Ruqyah* practitioners and formal mental health services; and (4) systematic evaluation—clinical studies, qualitative patient studies, and service audits to ensure effectiveness and safety. The principle of “do no harm” should be the foundation of any integration effort.

For further research, a mixed-methods approach is recommended: controlled quantitative studies to evaluate the effects of *Ruqyah* interventions on depressive/anxiety symptoms in selected samples, accompanied by in-depth qualitative studies to capture patient experiences and culturally meaningful therapeutic practices. Furthermore, policy studies are needed to assess how health regulators and religious institutions can develop safe and standardized practice guidelines.

This study demonstrates the important impact of *ruqyah syar'iyah* as a curative and preventive therapy: strengthening efforts to cure non-medical disorders (jinn/magic disorders) and helping physical-psychological aspects, instilling spiritual motivation so that patients do not give up, educating faith so as to reduce dependence on shamanic practices, and providing practical guidance (preparation-implementation-post-treatment stages and self-defense) that can be practiced independently or with a mu'alij, including synergy with physical therapy (cupping, herbal, water/salt). However, these findings have limitations: the evidence relies on religious arguments and the author's experience so it lacks standardized empirical measurements, is prone to selection bias and is difficult to generalize across cultural/religious contexts; effectiveness is highly dependent on prerequisites of belief, competence of the mu'alij, and correct Arabic reading; there is no objective evaluation protocol or medical comparator; and there is a risk of delaying medical detection/therapy if positioned as a substitute, not a complement. Therefore, *ruqyah* practice is ideally positioned as an ethical, standardized, and integrated complement to professional health care.

4. CONCLUSION

This research confirms that *Ruqyah Syar'iyah* has two primary functions: as a therapeutic treatment and as a preventive therapy for medical and non-medical ailments, including psychological disorders. The success of therapy is greatly influenced by adherence to Sharia principles, the spiritual integrity of the mu'alij, and the patient's consistency in carrying out the practices taught.

In addition to its healing effect, *Ruqyah Syar'iyah* also serves as a medium for religious and moral education, preventing people from seeking help from non-Sharia practices that could potentially lead to polytheism. Packaged in accordance with Islamic principles, this method can be a relevant and culturally based alternative mental health therapy.

This research can serve as a reference for *Ruqyah Syar'iyah* practitioners, Muslim healthcare professionals, and Islamic educational institutions to develop safe, ethical, and measurable therapy protocols. Field-based empirical studies to measure the effectiveness of *Ruqyah Syar'iyah* for specific mental disorders, as well as interdisciplinary studies integrating medical and spiritual approaches, are recommended.

ACKNOWLEDGEMENTS

The author would like to thank all parties who have provided support, assistance and prayers in the process of compiling this research.

REFERENCES

- [1] D. Alamsyah and P. H. Merdeka, "Mental Health as Common Lifestyle," *J. Lit. Lang. Acad. Stud.*, vol. 2, no. 02, pp. 51–56, 2023, doi: 10.56855/jllans.v2i2.669.
- [2] P. Limone and G. A. Toto, "Factors That Predispose Undergraduates to Mental Issues: A Cumulative Literature Review for Future Research Perspectives," *Front. Public Heal.*, vol. 10, no. February, pp. 1–12, 2022, doi: 10.3389/fpubh.2022.831349.
- [3] M. Squires *et al.*, "Deep learning and machine learning in psychiatry: a survey of current progress in depression detection, diagnosis and treatment," *Brain Informatics*, vol. 10, no. 1, pp. 1–19, 2023, doi: 10.1186/s40708-023-00188-6.
- [4] Ogugua Jane Osareme, M. Muonde, C. P. Maduka, T. O. Olorunsogo, and O. Omotayo, "Demographic shifts and healthcare: A review of aging populations and systemic challenges," *Int. J. Sci. Res. Arch.*, vol. 11, no. 1, pp. 383–395, 2024, doi: 10.30574/ijrsra.2024.11.1.0067.
- [5] M. A. A. Rab, A. M. Ismail, H. Awang, M. Hoque, N. A. Aljabri, and A. A. S. Alshibli, "Alternatives for Psychological Illness Treatment and Prevention in Malaysia From the Perspective of Shariah," *Malaysian J. Syariah Law*, vol. 12, no. 3, pp. 633–651, 2024, doi: 10.33102/mjssl.vol12no3.927.
- [6] F. Rismanto, "The Relationship of Family Support With Medication Compliance in Acute Psychotic Patients," *Asian J. Eng. Soc. Heal.*, vol. 3, no. 3, pp. 574–585, 2024, doi: 10.46799/ajesh.v3i3.277.
- [7] S. Langgapin, W. Boonchieng, S. Chautrakarn, and N. Maneeton, "Senior Mental Health Scenarios in Thai Buddhist Contexts: A Qualitative Study," *Religions*, vol. 15, no. 4, pp. 1–12, 2024, doi: 10.3390/rel15040440.
- [8] N. Pitria and L. Puspitasari, "Development of Syar'Iyyah Ruqyah in Treatment Diseases From the Time of the Prophet To the Contemporary Era," *Int. J. Islam. Complement. Med.*, vol. 6, no. 1, pp. 15–20, 2025, doi: 10.55116/ijicm.v6i1.102.
- [9] S. N. B. S. Bidin and A. S. A. Alqodsi, "The Practice of Healing Using Ruqyah Shar'iyah During the Time of Prophet Muhammad for the Treatment of Physical and Spiritual Illnesses," *Int. J. Acad. Res. Bus. Soc. Sci.*, vol. 15, no. 1, pp. 1617–1629, 2025, doi: 10.6007/ijarbss/v15-i1/24656.
- [10] M. A. M. Kamal, N. M. Norwawi, N. A. Noh, and R. A. Mohd, "The use of ruqyah qur'aniyah therapy on the effect of brain waves healing tourette syndrome patients," *Anal. J. Soc. Sci. Relig.*, vol. 7, no. 2, pp. 231–248, 2022, doi: 10.18784/analisa.v7i2.1778.
- [11] S. Bahri, A. Wahid, Z. Zuherni, and S. Humaira, "Utilization of al-qur'an verses in mental therapy at the islamic therapy center (itc), banda aceh," *Subst. J. Ilmu-Ilmu Ushuluddin*, vol. 25, no. 2, pp. 213–221, 2023.
- [12] A. A. Prabowo and N. Yuslem, "A Study of the Thematic Interpretation of Wahbah Az-Zuhaili on Magic and Santet Verses in the Socio-Religious Context in Indonesia," *QiST J. Quran Tafseer Stud.*, vol. 4, no. 2, pp. 429–454, 2025, doi: 10.23917/qist.v4i2.10673.
- [13] M. R. A. Putra, U. Azmi, and R. F. Astuti, "Relevance of Gratitude in Self-Healing According to the Quran from the Perspective of M. Quraish Shihab," *Unram J. Community Serv.*, vol. 5, no. 2, pp. 126–134, 2024, doi: 10.29303/ujs.v5i2.651.
- [14] K. Ratnasari, C. Natasya, Y. E. Agustin, R. Suprastiyo, Z. E. Azzuhri, and M. Amiruddin, "Implementation of Ruqyah as an Alternative to Islamic Medicine in Indonesia," in *Proceedings of International Pharmacy Ulul Albab Conference and Seminar (PLANAR)*, 2022, p. 54. doi: 10.18860/planar.v2i0.2126.
- [15] E. F. N. Muwafiqi and A. K. Soleh, "The Role of Faith in Overcoming Mental Health," *Islam. Insid. J. Keislaman. dan Hum.*, vol. 10, no. 1, pp. 1–19, 2024, doi: 10.35719/islamikainside.v10i1.215.
- [16] K. Moulaci, A. A. Haghdoost, K. Bahaadinbeigy, and F. Dinari, "The effect of the holy Quran recitation and listening on anxiety, stress, and depression: A scoping review on outcomes," *Heal. Sci. Reports*, vol. 6, no. 12, pp. 1–16, 2023, doi: 10.1002/hsr2.1751.
- [17] M. Mardiyanti, I. Yuanita, S. M. Pratiwi, and W. Widada, "Effects of Reciting Qur'an (Ruqyah on Sleep Quality of Elderly People Living in A Nursing Home)," *Tsaqafah*, vol. 20, no. 1, pp. 55–75, 2024, doi:

- 10.21111/tsaqafah.v20i1.9716.
- [18] M. Omar *et al.*, "Factors affecting the effectiveness of 'ruqyah' treatment among Muslim community in Malaysia," *J. Spiritual. Ment. Heal.*, vol. 27, no. 2, pp. 202–221, 2025, doi: 10.1080/19349637.2024.2338839.
 - [19] A. Jatmiko, "The Qur'an and Healing (Living Qur'an Study: Ruqyah in Islamic Guidance and Counseling Practice)," in *IDACON-International Da'wah Conference*, 2024, pp. 33–45.
 - [20] H. Muhammad, I. Supena, A. A. Junaidi, and M. Faiq, "The Qur'anic mantras recited by Shamanic Santri in Java, Indonesia," *HTS Teol. Stud. / Theol. Stud.*, vol. 77, no. 4, pp. 1–9, 2021, doi: 10.4102/hts.v77i4.7059.
 - [21] A. Zakman, K. Kamaruddin, and E. Usman, "The Ruqyah Syar'iyah Method as an Alternative to Maintaining Family Harmony," *Int. J. Contemp. Islam. Law Soc.*, vol. 5, no. 2, pp. 40–48, 2023, doi: 10.24239/ijcils.vol5.iss2.73.
 - [22] S. Fadli and Z. Sartono, "The Study of Discourse on Digital Pathology and Spiritual Education," *Eduvest - J. Univers. Stud.*, vol. 3, no. 6, pp. 1142–1160, 2023, doi: 10.59188/eduvest.v3i6.852.
 - [23] M. Muhammad, A. Ilyas, Y. Yahya, and L. Ismail, "Medical Disease Treatment by the Prophet SAW," 2021.
 - [24] M. Maksum, A. Wahyuni, A. R. Farida, L. Hasanah, and S. Fuad, "Sharia Service as An Added Value: Response to Sharia Standard in Hospital Service," *Samarah*, vol. 6, no. 1, pp. 423–448, 2022, doi: 10.22373/sjkh.v6i1.13418.
 - [25] F. Firdaus, Z. Zulfadilla, and F. Caniago, "Research methodology: Types in The New Perspective," *Taylor Fr. Group, LLC*, vol. 3, no. 1, pp. 1–16.
 - [26] A. Ghanad, "An Overview of Quantitative Research Methods," *Int. J. Multidiscip. Res. Anal.*, vol. 06, no. 08, pp. 3794–3803, 2023, doi: 10.47191/ijmra/v6-i8-52.
 - [27] O. Öztürk, R. Kocaman, and D. K. Kanbach, "How to design bibliometric research: an overview and a framework proposal," *Rev. Manag. Sci.*, vol. 18, no. 11, pp. 3333–3361, 2024, doi: 10.1007/s11846-024-00738-0.
 - [28] S. K. Ahmed, "How to choose a sampling technique and determine sample size for research: A simplified guide for researchers," *Oral Oncol. Reports*, vol. 12, no. September, p. 100662, 2024, doi: 10.1016/j.oor.2024.100662.
 - [29] M. Safdar, S. U. Rehman, M. Arif, and M. Ashiq, "Research data services in libraries: a systematic literature review," *Inf. Discov. Deliv.*, vol. 51, no. 2, pp. 151–165, 2023, doi: 10.1108/IDD-04-2021-0044.
 - [30] T. N. Fitria, "Library Research in English Education Research : A Guidance for Researchers in Writing Non-Research Articles," *Pros. Semin. Nas. CALL Pap.*, vol. 6, no. 1, pp. 116–140, 2023.
 - [31] V. Thangavel, "Research Articles Writing Styles and Procedures Future Improvement with Source for Review of Literature," *Goya J.*, vol. 17, no. 08, pp. 164–186, 2024, doi: 10.2139/ssrn.4461856.
 - [32] B. Rozi, Pujiono, and Maskud, "Islamic Boarding Schools and Universities' Curriculum Management Based on Spiritual and Intellectual Mentality," *Munaddhomah*, vol. 4, no. 2, pp. 187–196, 2023, doi: 10.31538/munaddhomah.v4i2.329.
 - [33] T. K. Yusuf and O. Dermawan, "Human Resources Management in Improving the Quality of Islamic Educators at a Madrasa," *KnE Soc. Sci.*, vol. 2023, pp. 639–646, 2023, doi: 10.18502/kss.v8i16.14075.
 - [34] A. Nurhasanah, F. F. Nugraha, and S. A. Wijayatna, "Analysis Hots Content in Erlangga Straight Point Series (Esp) 5Th Grade Mathematics Textbook Base on Bloom'S Taxonomy Theory," *J. Educ. Expert.*, vol. 6, no. 1, p. 66, 2023, doi: 10.30740/jee.v6i1.188.
 - [35] P. Parhan, S. Zauhar, S. Sarwono, and B. S. Haryono, "The Headmaster's Strategy to Improve Civil Servants' Work Performance (Administration Department) in Pringgasela High School, East Lombok-NTB," *Jpas*, vol. 6, no. 2, pp. 35–39, 2021.
 - [36] R. S. A. Prastowo, "Analysis of The Implementation of Independent Curriculum Assessment Assessment in English Courses at Elementary School," *Crit. Rev. English-Arabic World J.*, vol. 1, no. 1, pp. 1–10, 2022, doi: 10.35719/crewjournal.v1i2.1778.
 - [37] B. Kulsoom, "Ruqyah: Listening To Quranic Verses, a Disease Treatment Strategy," *Int. J. Islam. Complement. Med.*, vol. 5, no. 1, pp. 56–70, 2024, doi: 10.55116/ijicm.v5i1.64.
 - [38] J. Jahroni, "Prophet'S Medicine Among the Contemporary Indonesian Salafi Groups," *Epistemé J. Pengemb. Ilmu Keislam.*, vol. 15, no. 02, pp. 315–343, 2020, doi: 10.21274/epis.2020.15.02.315-343.
 - [39] M. A. Ibrahim, A. S. M. Shah, and R. A. Mohd, "Concept Of Shifa In Al-Quran : Quranic Medicine Approach In Healing Physical Ailmmment," in *International Journal of Islamic Studies*, 2017, pp. 1–19.
 - [40] M. Ardianto, "the Concept of Jin and Ruqyah According To the Komunitas Keluarga Besar Ruqyah Aswaja: the Study of Living Qur'an," *MUŞHAF J. Tafsir Berwawasan Keindonesiaan*, vol. 2, no. 1, pp. 163–187, 2021, doi: 10.33650/mushaf.v2i1.3344.
 - [41] N. Fahmida and M. I. Irham, "Maintaining Family Collection Through Ruqyah Syar'iyah : Maqashid Syari'ah Perspective," *J. Law, Polit. Humanit.*, vol. 4, no. 2, pp. 52–63, 2024, doi: 10.38035/jlph.v4i2.306.
 - [42] O. Ozcan, M. Hoelterhoff, and E. Wylie, "Faith and spirituality as psychological coping mechanism among female aid workers: a qualitative study," *J. Int. Humanit. Action*, vol. 6, no. 1, pp. 1–14, 2021, doi: 10.1186/s41018-021-00100-z.
 - [43] K. Dayasiri, N. Suraweera, and P. Burhan, "First-aid practices and pre-hospital care in paediatric snakebites," *BMC Pediatr.*, vol. 25, no. 1, pp. 1–10, 2025, doi: 10.1186/s12887-025-05975-0.