
Reception of Quranic Texts in Therapy Institutions in West Java: A Study of the Living Quran Functionalization of Verses as Medicine in Local Traditions

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Abstract: This study aims to discuss the functionalization of the Quran as a method of healing in therapy institutions in West Java. The research utilizes a qualitative approach with descriptive-analytical exposition. The results and discussion of this study cover three therapy institutions in West Java: first, the “Kang Tatang Pager Ageung” therapy center in Cipacing Ciawi District, Tasikmalaya Regency; second, the “Kang Asep Mukarram” therapy center in Ciawitali Village, Sukanagara District, Cianjur Regency; and third, the “Ajengan Jamal Ibn Abbas” therapy center in Cihurang Cidadap, Simpenan District, Sukabumi Regency. The conclusion of this research is that the phenomenon of the Living Quran is evident and observable in these three therapy institutions. Quranic verses are utilized to their fullest potential, starting from their recitation, reflection on their meanings and application, to believing in attaining the virtues (healing benefits) from these verses. Certain verses are used as therapy within various local traditions. These practices reflect the community's belief in the spiritual aspects of the Quran, which are believed to possess healing powers, both physically and psychologically.

Keywords: West Java; Living Quran; Therapy; Local tradition

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Introduction

The Quran not only serves as a guide for life for Muslims but also has various other functions believed by some Muslim communities, including serving as a means of healing or therapy (Albar et al., 2023). For example, in various Islamic therapy institutions in West Java, the Quranic text is used as a medium of healing through specific practices rooted in local traditions. This phenomenon demonstrates a form of reception of the Quran that is not always based on textual or contextual interpretation, but rather on the belief in the virtues (*faḍīlah*) of certain verses, which are thought to have special effects, such as bringing peace of mind, smooth sustenance, healing from illness, and providing solutions to various life problems (Fadhilah, 2022).

This practice is in line with accounts narration stating that the companions of the Prophet once used Surah Al-Fātiḥah as a means of healing, which was later confirmed and approved by Prophet Muhammad SAW (Rohmansyah et al., 2019). This view is also reinforced in various classical texts, including the works of Imam Nawawi. However, although the use of the Quran as therapy has become part of the tradition in some communities, there are differences in how its verses are functionalized, both in terms of method, purpose, and the theological understanding underlying them. Therefore, this research is important to examine how therapy institutions in West Java receive the Quranic text in the context of healing, and how these practices interact with local traditions and the religious understanding of the community (Solehudin, 2017). Thus, this study not only contributes to the study of the Living Quran but also provides insights into the relationship between sacred texts, religious practices, and local culture in the lives of contemporary Muslim communities.

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Conceptual writings on the functionalization of the Quran have been widely conducted by classical, medieval, and modern-contemporary scholars. Writings on the Living Quran, as part of the study of Quranic Sciences, have become a distinct trend in the contemporary era. Several studies related to the theme of the functionalization of Quranic verses have been conducted by many academics, including:

First, Muhammad ali (2015), , with a study titled "*Manuscript Studies and the Study of Living Quran and Living Hadith*" published in the Journal of Quran and Hadith Studies. This work highlights three fields at once: manuscript studies, involving research into manuscripts using philology as the analytical tool; then, the study of the Living Quran, which explores the daily routines of the Muslim community or communities in their interaction with the Quran; and finally, the study of the Living Hadith, focusing on how the Muslim community receives certain hadiths whose content has been, is being, or will be practiced. This research examines examples of *the Living Quran and Living Hadith* found in the Middle East and Indonesia. It concludes that contextual and practical studies like these should continue to be developed, as they can complement the shortcomings of textual studies, and vice versa (Muhamad, 2015).

Second is a work by Assingkily, M. S. (2019). titled "*Living Quran as a Model of Islamic Basic Education in the Industrial Era 4.0*," published in the journal *Al-Ibtida: Jurnal Pendidikan Guru*. This article correlates the Living Quran with the foundation of education in Era 4.0, and the Living Quran is touted as an alternative model for teaching the Quran to early childhood by contextualizing the Quran in the application of tahsin (correct recitation) and tahfiz (memorization). This study uses qualitative methods through field observation data at a Madrasah. It concludes that such a teaching model is highly recommended in the industrial era 4.0, because the intense daily routine in the Madrasah brings the verses of the Quran to life as a teaching guide, accompanied by supervision from the teachers (Assingkily, 2019).

From the aforementioned research on the Living Quran, both theoretical and case studies, it can be confirmed that the present research, entitled "Reception of Quranic Texts in Therapy Institutions in West Java: A Living Quran Study of the Functionalization of Verses as Medicine in Local Tradition," is original and has not been previously conducted by other researchers. The similarity and difference between previous studies and the current research is that they share the same theme—Living Quran—but previous research discussed the Living Quran in general and as an educational alternative, while the current study focuses on the functionalization of the Quran as a healing method in therapy institutions in the West Java region. Quranic verses are brought to life as recitations that assist community healing, surrounded by special recitation traditions that shape the beliefs of the local community.

The phenomenon of Quranic reception in Islamic therapy practices shows that this holy text is not only understood in a theological dimension but is also pragmatically functionalized by society (Fathurrosyid, 2018). In various therapy institutions in West Java, Quranic verses are used as a means of healing for various physical and mental conditions. This practice is rooted in the belief in the virtues (faḍīlah) of certain verses thought to have special properties (Muhammad Azizan & Agustina, 2019). The use of Quranic verses for therapy takes place not only among individuals or religious communities but has also been institutionalized in various therapy centers oriented toward spiritual healing based on local traditions.

In the study of the Living Quran, Muslim interaction with the Quran is not just limited to understanding the text linguistically, but also involves the aspects of experience and application in daily life (Rahman, 2016). Therefore, this study aims to understand how therapy institutions in West Java receive the Quranic text in their healing practices. The functionalization of certain verses in the context of therapy shows how the meaning of the Quran shifts from merely normative messages to a medium of healing (Luthfi & Raudhatul, 2024). Using a reception approach, this research will explore

how the Quranic text is interpreted, contextualized, and applied in various healing techniques rooted in Islamic tradition and local culture.

This study is important to observe how the interpretation of the Quranic text develops in a broader context within society. By understanding the reception of the Quran in Islamic therapy, this research will contribute to examining the dynamics of interaction between sacred texts, local traditions, and spiritual health practices. Furthermore, this research can help explain how the Quran is not only positioned as a source of law and ethics, but also as part of practical solutions in daily life, specifically in the field of health and therapy.

The study of the Living Quran starts from the assumption that the Quran is not only understood as a revealed text that is read and interpreted, but also as a living reality in the lives of Muslims. One manifestation of the Living Quran is the functionalization of Quranic verses as therapy or healing (Gusmian, 2013). In various Muslim communities, especially in West Java, this practice is widely found in the form of ruqyah, therapy using certain verses, and spiritual healing traditions based on the Quran.

Imam Nawawi in *al-Minhaj Syarh Şahih Muslim bin al-Hajjaj* also strengthens the view that the Quran has a healing (*syifā'*) function, as mentioned in QS. Al-Isra' (17): 82 and QS. Fussilat (41): 44. This concept then developed in various community practices, particularly through therapeutic institutions that use Quranic verses as a means of healing in local traditions (Fauzi et al., 2023). Cultural reception refers to the relationship between the Quran and the socio-anthropological conditions of a society. How a community understands and practices the Quran in a broader form, connected with anthropological theory on aspects of local tradition that permeate the functional reception process of the Quran, this sees how certain verses are used as instruments or media for practical purposes, such as therapy and healing (Taufiq et al., 2018). Therapeutic institutions in West Java develop Quran-based healing traditions. They interpret it by viewing this phenomenon as local wisdom, such as the behavioral patterns of individuals or groups that arise from their own understanding of the Quran.

Based on the above exposition, this study attempts to formulate a research framework that includes problem formulation, research questions, and research objectives. The problem formulation of this study is the aspect of the functionalization of the Quran as a healing method in therapeutic institutions in West Java. The main research question is how the aspect of the functionalization of the Quran as a healing method is implemented in therapeutic institutions in West Java. Lastly, the purpose of this study is to discuss the aspect of the functionalization of the Quran as a healing method in therapeutic institutions in West Java.

Method

This study uses a qualitative method with the Living Quran theory approach to explore data in the form of thoughts and ideas related to the functionalization of the Quran in the context of therapy and its intersection with local traditions (Sahiron, 2007). Through this approach, the study seeks to uncover how Quranic texts are understood, read, and experienced by informants, especially in therapeutic practices that develop in the related institutions (Didi, 2015). The method used in this study is descriptive-analytical, where data obtained from informants will be described as is, then analyzed in-depth to understand the patterns of understanding and religious experiences of patients in various therapeutic institutions in West Java.

The main data source in this study is field research data collected from three therapeutic institutions in three regencies in West Java Province. The three focus institutions are: (1) Kang Tatang Therapy Institution in Pager Ageung Village, Cipacing, Tasikmalaya; (2) Kang Asep Mukarrom Therapy Institution in Ciawitali Village, Sukamekar Village, Sukanagara District, Cianjur Regency; and (3) Ajengan Jamaluddin Therapy Institution in Cihurang Village, Cidadap Village, Simpenan

District, Sukabumi Regency. By selecting these institutions, this study attempts to understand how the Quran is received and functioned as a medium of therapy in the local cultural context of various communities in West Java.

In addition, the data collection process involved non-participant observation and semi-structured interviews. Observations focused on therapeutic procedures, patterns of Quranic verse recitation, therapist–patient interactions, ritual sequences, and the incorporation of local traditions within Quran-based healing practices. Semi-structured interviews were conducted with therapists and patients to explore their understanding of the Quran as a healing medium, the sources of religious authority underlying therapeutic practices, and patients' experiential perceptions of healing. The study was conducted over a four-month period, from January to April 2021. Data analysis was carried out using the interactive qualitative analysis model proposed by Miles and Huberman, consisting of data collection, data condensation, data display, and conclusion drawing and verification, which were applied iteratively throughout the research process. Ethical considerations were observed by obtaining verbal informed consent from all informants prior to data collection. To ensure confidentiality, patient identities were anonymized using coded initials AM, AS, AG, BH, DW, AA, AH, CC, DA, RS, DR, LM, HS, and UT which were used consistently in data presentation and analysis.

Results and Discussion

Therapeutic Institutions in West Java

1. Kang Tatang Pager Ageung Therapy Institution in Cipacing, Ciawi Subdistrict, Tasikmalaya Regency

Kang Tatang therapy institution is named after the founding figure and therapy benefactor in Cipacing, Ciawi-Tasikmalaya Subdistrict. Kang Tatang is a prominent community figure in the Ciawi-Tasikmalaya subdistrict, with many visitors or patients coming from various regions such as Jakarta, Bogor, Bekasi, Banten, Sukabumi, Cianjur, Bandung, Garut, Ciamis, and even from outside West Java Province. This data is confirmed from initial survey (observation) results and interviews with several patients from the mentioned regions.

The location or position of this institution is near the village hall, approximately 150 meters away and not far (to the right) from the Al-Taqwa mosque, about 50 meters away. The therapy space is part of Kang Tatang and his family's residence specifically designated for therapy. There are four rooms commonly used for therapy processes. (1) The middle room for the *tawasulan* process every Thursday night weekly and kliwon Thursday night monthly. (2) A guest room provided outside the therapy space. (3) Therapy room; consisting of a waiting room and the therapy process room. (4) A room on the 2nd floor provided for special wirid and consultation space between patients and Kang Tatang.

Kang Tatang is an elder figure in the Pager Ageung Cipacing region, in particular. Besides, he is also a community leader who guides the surrounding community, especially when they face certain issues; natural disasters, inter-village conflicts, youth fights, accidents, and so forth, usually serving as a "*tanggeuhan*" (support) to solve those problems (Subang & Didik, 2019).

In the waiting room or guest room, there are several Quranic manuscripts and several Quranic translations. The main therapy room contains several media used by Kang Tatang in the therapy process. (1) Packaged water (2) Packaged wafaq-wafaq (3) Books of wisdom (4) Incense burners and boards for 'ud wood (sandalwood).

2. Kang Asep Mukarram Therapy Institution in Ciawitali Village, Sukanagara Subdistrict, Cianjur Regency

The Kang Asep Mukarrom therapy institution is also commonly referred to as *Raudhat a-'Ulum* (attributed to the pesantren he supervises). This institution is in Ciawi Village, Sukamekar Village,

Sukanagara Subdistrict, South Cianjur Regency. Its location is right after the Sukanagara gate from the direction of the city of Cianjur. If coming from the Cilangari Cililin Bandung direction or South Cianjur, its position is after the Sukanagara market.

The building used for therapy is divided into four parts; (1) Routine and main therapy room; located below the pesantren and the large family home of kang Asep Mukarrom. (2) The zikr and *tawassul* assembly located next to the family home (3) The boiling water room; for both medical and non-medical therapy (4) The front room in kang Asep Mukarrom's family home.

3. Ajengan Jamal Ibn Abbas Therapy Institution in Cihurang, Cidadap Subdistrict, Simpenan Regency, Sukabumi

The Ajengan Jamal Ibn Abbas therapy institution is named after its therapist named Jamaluddin. Meanwhile, Abbas is his father's name. He is the second of four siblings. (1) Ustadz Deden (2) Ustadz Jamaluddin (3) Ustadz Ence Fakhruddin and (4) Ustadzah Siti Nurjanah.

The location of the Ajengan Jamal Ibn Abbas therapy institution is in Cihurang hamlet, Cidadap Village, Simpenan Subdistrict. If coming from Sukabumi direction, the destination passes the provincial road and stops at the Bagbagan road, known for its two bridges. Across the Bagbagan bridge, there are three roads; (1) the straight provincial road is the road to Jampang-Ujung Genteng, (2) the left road leads to Mariuk hamlet and the right road leads to Cihurang hamlet; the location of the ustadz Jamal Ibn Abbas therapy institution.

The teachers of Ajengan Jamal Ibn Abbas are quite numerous. The researcher only mentions a few. The data on his teachers is taken from the *tawassul* sheet that he usually recites (*haḍarah*) on Friday nights. The data indicates: (1) Abuya Dimyati Banten (2) Abuya Bustomi Pandeglang Banten; His full name is Ahmad Bustomi bin Ahmad Jasuta. Abuya Dimyati was the founder and simultaneously influenced the Salafiyah al-Hidayah Islamic boarding school in the Cisantri region, Pandeglang Banten. Abuya Dimyati passed away on December 27, 2004 (3) Abuya Uci Turtusi Banten (4) Aang Nuh Warung- kondang Cianjur (5) Aa Sirajuddin Jasinga Bogor (6) Abuya Syar'i Ciomas Banten (7) Abuya Muhtadi Cidahu Pandeglang Banten (8) Abuya Munfasir Padarincang Banten (9) Akang Ujang al-Falaki Buniwangi Palabuhanratu (10) Abuya Mukhtar an-Nizam Selabintana Sukabumi.

Reception Towards the Quranic Text in Therapy Institutions in West Java

There are four main elements in the world of therapy; namely therapist, patient, method or therapy method, and therapy location. Below, the researcher will dissect these four elements in the West Java region with three therapy institutions (1) Kang Tatang Therapy Institute in the Pager Ageung Cipacing area, Tasikmalaya District, (2) Kang Asep Mukarram Therapy Institute Ciawi-Sukanagara Cianjur and (3) Ajengan Jamal Therapy Institute in the Cihurang Village, Cidadap District, Simpenan Subdistrict, Sukabumi District.

1. Kang Tatang Therapy Institute (Cipacing, Tasikmalaya District)

Based on direct observation and interview with the informant, the therapy pattern carried out by Kang Tatang uses the Quranic text. All issues concerning physical and non-physical ailments are referred back to the Quranic text. According to Kang Tatang, the designation of "*hidayah*" to the Quran by Allah SWT can encompass various dimensions and interests, including guidance when a Muslim falls ill. Kang Tatang refers to the Quran asserting that the Quran's function as *syifa* (medicine or therapy) and *rahmah* (Allah's compassion) (Ariadi, 2019). Because the Quran is considered *syifa* or therapy, the Quran must cover two therapy dimensions; both physical and mental (non-physical). All diseases across these two dimensions can be resolved and cured by the Quran. The phrase "*faidza*

maridhtu fa huwa yasyfini" (if I am sick, then He is the one who heals me) in the Quran provides space to find medication or a healing solution (Umar, 2014). If correlated with the Quran's function as *syifa*, there will be a connection that Allah heals diseases using the Quranic medium.

Kang Tatang does not provide information on where he obtained knowledge about medicine (*sanad*), the teacher who taught him, and granted permission. It is only implied that his actions are based on "signals." When he gives a solution (therapy) to a patient, he says: "*tah beja tidituna kitu*" (interview, April 2021).

In the terminology of Sufi knowledge, such knowledge is known as *ilhām* or *isyari*. Knowledge that originates from the overflow of "*gaib*" information and is not based on reading or reasoning. The intersection between Quranic text and local culture, according to Kang Tatang, is not entirely one-sided. In other words, local traditions are not entirely in an external position that permeates or infiltrates into Islamic teachings, thus receiving the stigma of *bid'ah*. Kang Tatang refers to such opinions as "*gagabah*" (reckless) and shallow in understanding the Quran and Sunnah. Perhaps, it is Islam that permeates local traditions, and then "Islamization" occurs.

There are twenty old mandates often mentioned by Kang Tatang to the students and guests who come for therapy. These twenty old mandates seem to refer to Islamic values mentioned using a mixed language; Sundanese and Arabic. The mandate is; "*Solat awal waktu, ulah eureun neangan elmu, ulah nyia-nyiakeun waktu, ulah eureun neangan babaturan, Pertahankan akidah anu murni, lamun hayang maju ulah eureun mikir, lamun hayang maju kudu daék cape, ulah embung disebut bodo, ulah embung disebut sahandapeun, sagala nu tumiba kana diri gara-gara diri, ubar diri aya di diri, euweuh nu nyaah kana diri kajaba anu boga diri, harga diri kumaha diri, ari ngitung tina hiji ulah ujug-ujug angka salapan, mun keur nyieun pondasi tong sok waka mikiran kenteng, sanajan teu lumpat tapi ulah cicing, sagede-gedena jalan sare'at ulah matak ngurangan tawakal ka Alloh, tong leumpang dina hayang tong cicing dina embung, tapi kudu leumpang dina kudu, kudu eureun dina ulah, tong lesot hate dina eling ka Alloh dina kaayaan kumaha wae; sedih, susah jeung bungah, sarebu sobat saeutik teung, hiji musuh loba teuing.*"

The Quranic verses provided by Kang Tatang to the patients are meant to be recited and practiced according to their respective problems. Here are some examples of patients coming to the therapy institute and receiving verses to be recited and practiced.

Table 1.1 Informant data and verses given by therapists

No	Informant	Text To Be Read
1	AM	Surah al-Ikhlas 111 x 41 days
2	AS	Surah Waqi'ah 40 x 40 days
3	AG	Surah al-Mulk 21 x according to schedule
4	BH	Surah Yasin 3 x 7 days
5	DW	Surah al-Baqarah 156 as much as possible every day

Beyond its descriptive characteristics, the therapeutic practice at Kang Tatang's institute can be analytically understood through the framework of the Living Qur'an. The Qur'an in this context is not positioned merely as a sacred text to be read, but as a living and operative source of healing that is activated through repetitive recitation, numerical discipline, and ritual performance. The absence of formal *sanad*-based medical knowledge, which Kang Tatang attributes to intuitive guidance (*ilhām*), further emphasizes a form of Qur'anic reception rooted in experiential and charismatic authority. Living Qur'an scholarship highlights that such practices represent a mode of engagement in which the Qur'an derives meaning through lived religious experience and social function rather than textual exegesis alone (Aminullah, Muhammad, 2025).

Furthermore, Kang Tatang's integration of local traditions such as collective *tawassul*, incense burning, and the use of ritual media does not signify a departure from Qur'anic values, but rather

illustrates the contextual localization of Qur'anic healing practices. Within the Living Qur'an perspective, this intersection between Qur'anic recitation and local culture reflects how Islamic texts are continuously reinterpreted and embodied within specific socio-cultural environments, reinforcing the Qur'an's role as a dynamic and socially embedded source of religious meaning (Hasan, 2020).

2. Kang Asep Mukarram Therapy Institute (Ciawi Sukanagara, Cianjur District)

Kang Asep Mukarram is one of the most viral therapists in Cianjur area and beyond, even expanding his popularity within West Java and attracting people from certain provinces for therapy at his institution, such as Jakarta, Banten, Central Java, East Java, and outside Java. Several testimonials from patients who have undergone therapy and recovered provide information to others with similar cases or illnesses to attempt mediation healing from Kang Asep Mukarram.

There are excerpts from interviews with Kang Asep Mukarram about the concept of therapy he applies. The aspects interviewed at this point are the concept of healing (therapy); paradigm or basic assumptions and methods used in the therapy process. Kang Asep emphasizes that illness, whether physical or mental, is something that can be healed. There are several healing methods (therapy) that individuals or certain communities apply, depending on the knowledge and experience of the therapist. Here are several patients who have undergone Quranic verse reading therapy at Kang Asep's therapy institute:

Table 2.1 Informant Data Table and verses given by therapists

No	Informant	Text To Be Read (according to schedule)
1	AA	Surah al-Fatihah
2	AH	Surah Ikhlas
3	CC	Surah al-Waqi'ah
4	DA	Surah Yusuf
5	RS	Surah Maryam

Beyond its descriptive aspects, this therapeutic practice can be analytically understood through the framework of the *Living Qur'an*. The recitation of specific Qur'anic verses functions not merely as a devotional ritual but as a performative religious practice in which the Qur'an is experienced as an active therapeutic agent. Within this context, the Qur'an operates as a living text whose authority is continuously reproduced through repeated recitation, communal validation, and experiential outcomes. Such practices confirm that the Qur'an exists as a social reality embedded in everyday religious life, shaping emotional resilience, spiritual meaning, and healing expectations among patients (Aminullah, Muhammad, 2025).

3. Kiyai Jamal Ibn Abbas Therapy Institute (Cihurang, Cidadap District, Sukabumi)

At the Kiyai Jamal Ibn Abbas Therapy Institute, the therapeutic process is conducted through guided recitation of selected Qur'anic verses determined according to the patient's specific condition. Therapy sessions typically involve either individual or collective recitation in a designated space, accompanied by *tawassul*, structured *wirid*, and the use of ritual media such as incense. Patients are required to actively participate by following prescribed recitation schedules, maintaining ritual purity, and internalizing specific intentions (*niyyah*) related to their illness. This process integrates ritualized Qur'anic recitation, embodied discipline, and social-spiritual interaction as an inseparable therapeutic structure.

The list of patients and the Qur'anic verses prescribed during the therapy process is presented in Table 3.1, which demonstrates the patterned selection of specific chapters for therapeutic purposes.

Table 3.1 Informant Data Table and verses given by therapists

No	Informant	Text To Be Read
1	AS	Surah al-Ikhlâs
2	DR	Surah Waqî'ah
3	LM	Surah al-Mulk
4	HS	Surah Yasin
5	UT	Surah Maryam

From the perspective of the Living Qur'an, the practices observed at this institute illustrate that engagement with the Qur'an is not passive but actively transformed into socio-ritual action believed to produce healing effects. The Qur'an functions as a living structure of meaning that organizes narratives of illness, religious symbolism, and interpretations of suffering within a communal framework. This finding aligns with Living Qur'an scholarship emphasizing that Qur'anic meaning emerges through contextualized social practices rather than textual interpretation alone (Khodijah & Monang, 2025).

Local Tradition in Quranic Verse Reading at Therapy Institutions in West Java

The Qur'anic healing practices observed across the three therapy institutions are closely intertwined with local religious traditions. At Kang Tatang's Therapy Institute in Cipacing, Tasikmalaya, Qur'anic recitation is accompanied by Friday night *tawassul* rituals, Tijaniyah *ṭarīqa* readings, the practice of drinking ablution water from seven mosques, and incense burning. At Kang Asep Mukarram's institute, local traditions include Monday night *tawassul* combined with Qadiriyyah rituals, illness transfer through symbolic animal slaughter, *ngabungbang* rituals during Rabiul awwal, the burning of sandalwood, and the use of boiled water for specific patients. Meanwhile, the Kiyai Jamal Ibn Abbas institute incorporates Friday night *tawassul*, Qadiriyyah rituals, Sundanese-Arabic falak symbolism, and incense burning.

Despite variations in ritual form, all institutions demonstrate a shared pattern in which Qur'anic recitation remains the central therapeutic mechanism. These similarities indicate a common Living Qur'an model in which Qur'anic verses are embedded within integrated ritual systems rather than practiced as isolated textual acts (Aji et al., 2021). Differences in method and ritual structure reflect localized hermeneutical frameworks through which communities interpret and operationalize Qur'anic healing. Such variations confirm that Qur'anic reception is plural, context-dependent, and culturally mediated, reinforcing the Living Qur'an thesis that the Qur'an's function is continuously shaped by social and cultural contexts (Aminullah, Muhammad, 2025).

Conclusion

This study concludes that the reception of Qur'anic texts in therapy institutions in West Java constitutes a clear manifestation of the *Living Qur'an* phenomenon, in which the Qur'an is not only interpreted at the level of meaning but is actively embodied and operationalized within everyday therapeutic practices. The research findings demonstrate that specific Qur'anic verses are selected, recited, and ritualized as therapeutic instruments within localized religious traditions, thereby positioning the Qur'an as a living and functional source of healing that operates simultaneously in spiritual, psychological, and social dimensions. These practices indicate that Qur'anic reception in therapeutic contexts is shaped by communal belief systems, ritual structures, and charismatic religious authority, rather than by textual interpretation alone.

From the perspective of *Living Qur'an* studies, this research contributes by expanding the analytical focus beyond exegetical reception toward performative and practical modes of Qur'anic engagement. It shows that the Qur'an functions as a lived religious resource that structures actions,

emotions, and interpretations of illness within specific cultural settings. By documenting how Qur'anic verses are embedded in therapeutic rituals and local traditions, this study enriches the theoretical understanding of Living Qur'an as a dynamic interaction between sacred text, social practice, and cultural context.

In addition, this study contributes to the interdisciplinary field of religion and health by demonstrating how Islamic spiritual practices are integrated into alternative therapeutic frameworks within Muslim communities. The findings reveal that Qur'an-based therapy is not merely an expression of theological belief, but also serves as a culturally meaningful response to physical and psychological suffering. This highlights the role of religion as a significant psychosocial resource in health practices, offering insights into how spiritual texts are mobilized to support well-being outside formal biomedical settings.

Despite these contributions, this study has several limitations. The research was confined to three therapy institutions in West Java, which limits the generalizability of the findings to other regions or religious contexts. Moreover, the study did not systematically examine the clinical effectiveness of Qur'an-based therapy in comparison with medical or psychological interventions. Therefore, future research is recommended to expand the geographical scope and to employ interdisciplinary approaches combining Islamic studies, medical anthropology, psychology, or health sciences in order to further investigate the therapeutic implications of Qur'anic practices from multiple scientific perspectives.

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