



Beyond Gathering: Tahlilan as an Indigenous Group Counseling Model for Promoting Existential Well-Being among Elderly Muslim Men

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ABSTRACT

This study investigates how the Tahlilan tradition a Javanese-Islamic communal ritual involving collective Quranic recitation, supplication for the deceased, religious discourse (tausiyah), and informal post-ritual fellowship functions as an indigenous group counseling model addressing existential well-being among elderly Muslim men. Employing a qualitative phenomenological design, this research conducted in-depth interviews and participatory observation with 15 elderly Muslim men (aged 60–80) who are active members of Nahdlatul Ulama (NU) communities across Banyumas Raya, encompassing Banyumas (n=5), Purbalingga (n=5), and Cilacap (n=5). Data were analyzed through thematic analysis following the Braun and Clarke framework. Theoretically, this study triangulates Viktor Frankl's logotherapy centering on meaning-making, will to meaning, and noögenic neurosis with Yalom's (2005) eleven therapeutic factors in group therapy and Gitterman and Shulman's (2005) mutual aid group model.

INTRODUCTION

The global demographic landscape is undergoing an unprecedented transformation. The United Nations projects that by 2050, one in six people worldwide will be over the age of 65, with approximately 1.5 billion older adults globally (United Nations, 2022). In Indonesia, the 2020 National Census recorded 29.3 million older adults, representing 10.82% of the total population a proportion expected to double by 2045 (Badan Pusat Statistik, 2021). Within this demographic tide, elderly Muslim men constitute a significant yet underserved population in the landscape of gerontological mental health services, particularly in Java, where Islamic community life remains deeply embedded in daily social structures.

The existential challenges faced by elderly men are qualitatively distinct from those encountered in other life stages. Erikson's (1994) eighth stage of psychosocial development characterizes late adulthood as a conflict between ego integrity and despair, wherein individuals must reconcile their life's meaning or face a profound sense of regret and purposelessness. Compounding this developmental imperative, elderly Muslim men in Javanese communities frequently experience compounded existential stressors: the grief of outliving spouses and long-term companions, the identity vacuum created by retirement from productive roles, and the inescapable consciousness of death's proximity. Viktor Frankl (2006) argued that the failure to discover meaning in existence – what he termed *noögenic neurosis* constitutes a distinctly modern existential suffering that is particularly acute in late adulthood.

Despite the documented prevalence of loneliness, existential anxiety, and complicated grief among elderly men (Cornwell & Waite, 2009; Dahlberg et al., 2021; Kübler-Ross & Kessler, 2005), formal mental health services and counseling interventions remain largely inaccessible to this population in Indonesia. Structural barriers include limited mental health infrastructure in rural and semi-urban settings, cultural stigmatization of psychological help-seeking among men (Addis & Mahalik, 2003; Courtenay, 2000), and the perceived incompatibility between Western therapeutic paradigms and Javanese-Islamic worldviews. These barriers call urgently for the identification and systematization of culturally embedded, indigenous counseling resources.

Tahlilan presents itself as one of the most ubiquitous yet theoretically unexplored of such resources. Conducted across Muslim communities in Java and Indonesia broadly, Tahlilan is a communal ritual primarily organized to pray for the souls of the recently deceased. The ritual typically involves collective recitation of Quranic verses (particularly Surah Ya-Sin), invocations and litanies (*tahlil*, *tasbih*, *tahmid*), a religious discourse (*tausiyah*) delivered by a local religious leader (*kyai* or *ustadz*), communal supplication (*doa*), and an informal post-ritual gathering that often involves food sharing and conversation. Tahlilan is predominantly attended by men and is typically repeated on the third, seventh, fortieth, hundredth, and annual commemoration days following a death creating a sustained, cyclically recurring group experience.

The existing literature on Tahlilan is dominated by theological and jurisprudential debates regarding its permissibility in Islam (Hakim, 2019; Muhaimin, 2001), sociological analyses of its function in Javanese social cohesion (Geertz, 1960; Woodward, 2011), and anthropological descriptions of its ritual structure (Beatty, 1999; Pranowo, 2011). Conspicuously absent from this body of scholarship is any systematic analysis of Tahlilan as a psychologically functional group counseling mechanism. This lacuna is intellectually significant: by limiting interpretations of Tahlilan to the domains of theology or sociology, extant scholarship has inadvertently obscured a rich, practiced, and culturally legitimate resource for addressing the existential well-being of elderly Muslim men.

This study intervenes in this gap by deliberately relocating the analytical lens from theology and sociology to the field of *Bimbingan dan Konseling* (guidance and counseling, henceforth BK), specifically employing frameworks from group counseling theory and logotherapy. The central research questions guiding this study are: (1) How do the structural stages and ritual interactions within Tahlilan parallel or enact established group counseling processes? (2) Which of Yalom's (2005) therapeutic factors are activated within Tahlilan participation among elderly Muslim men? (3) How does regular Tahlilan participation contribute to the existential well-being specifically meaning-making, grief processing, and the mitigation of existential anxiety of elderly Muslim men in Banyumas Raya?

The significance of this study is threefold. First, it advances the theoretical development of indigenous counseling models (ICMs) within the Indonesian BK scholarship. Second, it provides practitioners with an empirically grounded framework for integrating Tahlilan into community-based gerontological counseling programs. Third, it contributes methodologically to the growing body of qualitative, phenomenologically-oriented research on culturally embedded mental health practices in Muslim-majority societies.

LITERATURE REVIEW

Existential Well-Being in Late Adulthood: A Gerontological Perspective

Existential well-being in late adulthood encompasses an individual's subjective sense of life meaning, purpose, and coherence in the face of aging, loss, and the prospect of death (Ardelt, 2003; Ryff, 1989). It is distinguished from hedonic well-being (pleasure and the absence of pain) and eudaimonic well-being (personal growth and realization) by its explicit engagement with the existential givens of human existence—freedom, responsibility, isolation, meaninglessness, and mortality (Yalom, 1980). Among elderly men, existential well-being is particularly threatened by three intersecting dynamics: bereavement (loss of spouses, siblings, and peers), role discontinuity (retirement-related loss of productive identity), and mortality salience (heightened awareness of death's imminence).

Erikson's (1994) framework of ego integrity versus despair provides a developmental scaffold for understanding these challenges. Men who achieve ego integrity are able to accept their life history—including its failures and losses—as meaningful and dignified; those who do not experience pervasive despair and bitterness. Havighurst's (1972) developmental tasks of aging further specify the adjustments required: adapting to physical changes, redefining social roles, establishing affiliation with one's age group, and achieving a satisfying philosophy of life. Significantly, many of these tasks are inherently relational and communal, suggesting that group-based interventions may be particularly well-suited to supporting existential well-being in older adults (Cohen et al., 2006; MacKenzie & Livesley, 1984).

Logotherapy as a Framework for Elderly Existential Counseling

Viktor Frankl's logotherapy (1959/2006) offers a theoretically rigorous framework for understanding the psychological dynamics of elderly Muslim men participating in Tahlilan. Founded on the principle that the primary human motivation is the "will to meaning" the striving to find meaning in one's existence logotherapy posits that existential suffering arises not from biological drives or unconscious conflicts, but from the failure to discover a sense of purpose. Frankl's (2006) concept of noögenic neurosis describes the existential vacuum that results when this meaning-seeking is frustrated, manifesting in symptoms of boredom, apathy, depression, and anxiety.

Three primary avenues to meaning are identified in logotherapy: creative values (what one gives to the world through work and action), experiential values (what one receives from the world through love, beauty, and encounter), and attitudinal values (the stance one takes toward unavoidable suffering). For elderly men confronting the losses and limitations of late adulthood, attitudinal values become especially salient: the capacity to find meaning in suffering, to face death with dignity, and to accept one's life as having been worthwhile despite or even through its hardships (Frankl, 2006; Schulenberg et al., 2008). Tahlilan, as a ritual dedicated to the memory of the deceased and to the preparation of the living for their own deaths, creates a structured communal space for the cultivation of attitudinal values.

Empirical applications of logotherapy in gerontological counseling contexts have demonstrated its efficacy in reducing existential anxiety, enhancing life satisfaction, and facilitating grief processing among older adults (Breitbart et al., 2010; Dezutter et al., 2013; van der Spek et al., 2017). The cultural transferability of logotherapy's core constructs meaning-making, confrontation with mortality, and the discovery of purpose through suffering to Javanese-Islamic contexts is further supported by the striking conceptual resonances between Frankl's framework and Islamic theological concepts such as sabar (patient endurance), tawakkul (reliance on God), and ridha (acceptance of divine will) (Hamdan, 2008; Haque & Masuan, 2002).

Yalom's Therapeutic Factors in Group Counseling

Irvin Yalom's (2005) theory of therapeutic factors provides the most widely adopted framework for understanding how group participation produces psychological healing and change. Through extensive research spanning decades, Yalom and colleagues identified eleven curative factors that operate across diverse group counseling modalities: (1) instillation of hope, (2) universality, (3) imparting information, (4) altruism, (5) corrective recapitulation of the primary family group, (6) development of socializing techniques, (7) imitative behavior, (8) interpersonal learning, (9) group cohesiveness, (10) catharsis, and (11) existential factors.

Of particular relevance to the Tahlilan context are the therapeutic factors of universality, altruism, group cohesiveness, catharsis, and existential factors. Universality the recognition that one's suffering and existential concerns are shared by others has been identified as especially powerful for elderly individuals who may experience their grief or existential anxiety as uniquely burdensome (Yalom & Leszcz, 2005). The existential factor cluster encompassing acceptance of mortality, recognition of life's ultimate aloneness, and the taking of responsibility for one's existence—aligns directly with the thematic content of Tahlilan rituals, which center on death, the afterlife, and the meaning of human existence from an Islamic perspective (Muhaimin, 2001; Pranowo, 2011).

Yalom's (2005) framework has been applied to diverse non-Western group healing contexts, including indigenous talking circles among Native American populations (Brave Heart, 2003), Buddhist group meditation practices (Bowen et al., 2014), and collective mourning rituals in African communities (Straker, 1994). These applications suggest the framework's utility as a transcultural analytical tool for identifying therapeutic mechanisms in culturally embedded group practices a precedent directly applicable to the present study's analysis of Tahlilan.

The Mutual Aid Group Model

Gitterman and Shulman's (2005) mutual aid group model conceptualizes the therapeutic power of group participation as residing fundamentally in the dynamic of members helping one another. Unlike therapist-centered models in which healing flows from expert to client, mutual aid groups generate healing through reciprocal peer support: members simultaneously occupy the roles of helper and helped. The model identifies eight dynamics through which mutual aid operates: sharing data, the dialectical process, discussing taboo subjects, the "all-in-the-same-boat" phenomenon, mutual support, mutual demand, individual problem solving, and rehearsal for new behaviors.

The "all-in-the-same-boat" phenomenon closely parallel to Yalom's universality is particularly germane to elderly men in Tahlilan, who share the common existential ground of aging, bereavement, and proximity to death. Gitterman and Shulman (2005) further note that mutual aid groups are especially effective when they provide a legitimate, socially sanctioned context for the expression of vulnerability and need – a function that the communally normative framework of Tahlilan provides for Javanese men, for whom direct individual help-seeking may be inhibited by cultural norms of masculine stoicism (Addis & Mahalik, 2003; Nolen-Hoeksema & Ahrens, 2002).

Indigenous Counseling and Community-Based Healing Practices

The concept of indigenous counseling models (ICMs) has gained significant traction in multicultural counseling scholarship, responding to extensive critiques of the cultural bias inherent in Euro-American therapeutic paradigms (Duran, 2006; Nwoye, 2017; Sue & Sue, 2016). ICMs are conceptualized as healing systems that emerge organically from within a community's cultural, spiritual, and relational practices, utilizing indigenous knowledge, symbols, and social structures as therapeutic resources (Duran, 2006; Gone, 2010). Crucially, ICMs are distinguished from syncretic or adaptive approaches (which modify Western therapies to be more culturally sensitive) in that they treat the indigenous practice itself as the primary therapeutic agent.

Within Indonesian BK scholarship, indigenous counseling frameworks have been explored in relation to Javanese philosophical concepts such as *rasa* (inner feeling), *tepa selira* (empathic sensitivity), and *gotong royong* (communal cooperation) (Erford, 2015; Gladding, 2012; Supriatna, 2011). However, the systematic analysis of specific communal rituals as coherent counseling models remains underdeveloped. This study contributes to this nascent field by proposing Tahlilan as an operationalizable ICM, grounded in empirical observation and theoretically articulated through established group counseling and logotherapy frameworks.

METHODOLOGY

Research Design

This study employs an interpretive phenomenological analysis (IPA) design, which is well-suited to investigating the lived experience of participants within culturally specific contexts (Smith et al., 2009). IPA seeks to understand how individuals make sense of their experiences, attending closely to the meaning-making processes through which participants interpret significant life events and social practices. Within the present study, IPA facilitates an exploration of how elderly Muslim men subjectively experience and derive meaning from their participation in Tahlilan, and how this participation relates to their existential well-being. The phenomenological orientation was complemented by participant observation, enabling the researcher to observe the behavioral, interactional, and ritual dimensions of Tahlilan beyond what participants might articulate in individual interviews. This methodological triangulation combining emic (insider participant perspectives) with etic

(researcher observations) enhances the depth and credibility of the findings (Creswell & Poth, 2018; Lincoln & Guba, 1985).

Research Site and Participant Selection

The research was conducted across three regencies within the Banyumas Raya (Greater Banyumas) region of Central Java, Indonesia: Banyumas, Purbalingga, and Cilacap. Banyumas Raya is characterized by a strong NU organizational presence, a robust tradition of communal Islamic practice, and a significant elderly population—making it an appropriate and information-rich context for investigating Tahlilan as a gerontological counseling resource. Participants were recruited using purposive sampling, with the following inclusion criteria: (1) male, aged 60 years or older; (2) active and regular participation in NU-affiliated Tahlilan groups for a minimum of two years; (3) residing in one of the three study regencies; (4) cognitively capable of providing informed consent and engaging in extended interview. Fifteen participants were recruited: five from Banyumas Regency (BYM-01 through BYM-05), five from Purbalingga Regency (PLG-01 through PLG-05), and five from Cilacap Regency (CLP-01 through CLP-05). Participant ages ranged from 62 to 79 years ($M = 68.4$). Eleven participants had experienced the death of their spouse, and all fifteen had experienced the death of one or more close companions within the previous three years. Twelve participants identified as retired from their primary occupation.

Data Collection

Data were collected between January and April 2025 through two primary methods. First, in-depth, semi-structured interviews were conducted with each participant individually, lasting between 60 and 120 minutes per session. The interview protocol was organized around four thematic domains: (a) personal history and relationship with Tahlilan; (b) subjective experience of the ritual phases; (c) the perceived psychological and emotional effects of participation; and (d) the role of Tahlilan in navigating grief, aging, and existential concerns. Interviews were conducted in a combination of Javanese, Indonesian Bahasa, and Banyumasan regional dialect, according to participant preference, and were audio-recorded with informed consent.

Second, participatory observation was conducted across twelve Tahlilan sessions four in each regency spanning a period of three months. Observation focused on group interaction patterns, behavioral expressions of emotion, the structure and sequencing of ritual phases, the dynamics of the informal post-ritual fellowship period, and the facilitative role of the religious leader (kyai/ustadz). Detailed field notes were recorded immediately following each observation session, structured according to the observational framework derived from Yalom's (2005) therapeutic factors and Frankl's (2006) logotherapy concepts.

Data Analysis

Interview recordings were transcribed verbatim and translated into Indonesian Bahasa where necessary, with back-translation checks to ensure accuracy. Data were analyzed using reflexive thematic analysis following the six-phase approach described by Braun and Clarke (2022): familiarization with the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and producing the report. Coding was conducted using a combination of inductive (data-driven) and deductive (theory-driven) approaches: inductive codes emerged organically from the data, while deductive codes were informed by the theoretical frameworks of logotherapy and Yalom's therapeutic factors. The research team engaged in iterative discussion and member-checking with six participants to verify the interpretive accuracy of emerging themes.

Trustworthiness and Ethical Considerations

Trustworthiness was established through multiple strategies (Lincoln & Guba, 1985): credibility through prolonged engagement in the field (four months of observation) and member-checking with participants; transferability through thick description of the research context; dependability through an audit trail of research decisions; and confirmability through reflexive bracketing of researcher preconceptions. Ethical approval was granted by the Research Ethics Committee of UIN Prof. K.H. Saifuddin Zuhri Purwokerto. All participants provided written informed consent and were assured of confidentiality through the use of coded identifiers. Participants retained the right to withdraw from the study at any time without consequence

RESEARCH RESULT AND DISCUSSION

Thematic analysis of the interview and observational data yielded four primary themes: (1) Tahlilan as a Structured Group Process – Mapping Ritual Phases to Group Counseling Stages; (2) Therapeutic Factors in Tahlilan: Yalom's Framework in Indigenous Practice; (3) Meaning-Making and Existential Reorientation Through Communal Ritual; and (4) The Post-Ritual Fellowship as a Mutual Aid Space for Grief and Existential Processing. Each theme is presented below with supporting evidence from participant narratives and field observations.

Theme 1: Tahlilan as a Structured Group Process – Mapping Ritual Phases to Group Counseling Stages

A consistent finding across all fifteen participant interviews and twelve observation sessions was the highly structured, sequential nature of Tahlilan as a group experience. Far from being a static, passive ritual, Tahlilan unfolds across identifiable phases, each characterized by distinctive group dynamics, emotional tones, and interactional patterns that parallel the stages of group counseling process described by Tuckman and Jensen (1977): forming, storming, norming, performing, and adjourning.

The gathering phase participants arriving at the host's home, greeting one another, and arranging themselves in communal rows—corresponds to Tuckman and Jensen's (1977) forming stage. Field observations consistently revealed high levels of interpersonal orientation activity during this phase: participants sought eye contact, exchanged verbal greetings (particularly older Arabic-Islamic salutations of salam), and positioned themselves physically near familiar companions. This social calibration mirrors the forming stage's function of establishing group membership, safety, and relational orientation (Corey et al., 2018).

Participant BYM-03 (age 71, retired teacher) articulated the significance of this phase:

"When I arrive and see Pak Haji Rohman and the others already there, something inside me settles. I am no longer alone with my thoughts about Mbah Karman [recently deceased friend]. We are together. Whatever we feel, we feel it together."

The communal recitation phase—collective chanting of Quranic verses (particularly Ya-Sin), tahlil, tasbih, and tahmid—functions as the ritual's norming stage, establishing shared behavioral norms, mutual focus, and collective identity through synchronized verbal and physical activity. Observational data revealed that the rhythmic, call-and-response structure of the recitation produced visible physiological synchrony among participants: aligned breathing patterns, shared postural orientations (kneeling, bowing), and coordinated voice modulation. This physical and vocal coordination is consistent with research demonstrating that synchronized group activity promotes social bonding, reduces cortisol levels, and increases perceived pain tolerance—markers of social integration and stress reduction (Vickhoff et al., 2013; Wiltermuth & Heath, 2009).

Participant PLG-02 (age 67, retired farmer) described this phase:

"When we read Ya-Sin together for Pak Sarno's [deceased neighbor] soul, my own fear about dying becomes lighter. My voice joins with their voices. The weight is shared. I think: if Pak Sarno could face this, perhaps I can also."

This statement reveals a dual dynamic characteristic of the norming-into-performing transition: the ritual simultaneously honors the deceased (altruism toward the dead) and provides the living with a normative, collectively sanctioned confrontation with their own mortality (Yalom's existential factor cluster).

The tausiyah phase a structured religious discourse by the kyai—operates as the performing stage, in which the group engages with the substantive content that gives meaning to the ritual. Observational data showed that effective tausiyah consistently incorporated three elements aligned with logotherapeutic intervention: (a) narrative reframing of death and loss within an Islamic meaning framework (attitudinal values), (b) prompts for reflection on one's life legacy and contributions (creative values), and (c) reassurance of ongoing connection with the deceased through prayer (experiential values). The kyai's role during this phase is functionally analogous to that of a group counseling facilitator, providing psychoeducation, normalizing existential concerns, and modeling meaning-making strategies.

Participant CLP-04 (age 73, retired civil servant) reflected:

"Pak Kyai Mursid always says: 'The one who has died is waiting for our prayers; our prayers are our final gift to them.' Every time I hear this, I feel I still have a purpose – to send prayers for my wife. My grief becomes a form of love, not just pain."

This reframing from grief as pain to grief as purposeful love – exemplifies Frankl's (2006) concept of transforming unavoidable suffering into a human achievement through the discovery of attitudinal values. The kyai, whether consciously or intuitively, functions as a logotherapist, facilitating the conversion of existential suffering into existential meaning.

The closing supplication (doa bersama) and adjournment phase corresponds to Tuckman and Jensen's (1977) adjourning stage, serving to consolidate the group's shared experience, reinforce collective identity, and provide a ritually sanctioned closure to the formal ritual space—while transitioning naturally into the informal post-ritual fellowship. The repetitive nature of Tahlilan (conducted on multiple commemorative occasions) means that adjournment is never permanent; participants know they will reconvene, creating what group theorists describe as an "open group" dynamic that supports ongoing therapeutic engagement (Yalom & Leszcz, 2005).

Theme 2: Therapeutic Factors in Tahlilan Yalom's Framework in Indigenous Practice

Systematic analysis of interview and observational data against Yalom's (2005) eleven therapeutic factors revealed consistent evidence for the activation of eight factors within the Tahlilan context. These factors did not operate sequentially but rather co-emerged and mutually reinforced one another across the ritual's phases.

Universality emerged as among the most consistently and powerfully reported therapeutic factors. All fifteen participants articulated—in varying formulations the profound psychological relief of discovering that their existential concerns (fear of death, grief over loss, sense of purposelessness in retirement) were shared by their peers. CLP-01 (age 62, recently retired) stated: "I thought I was the one who was confused about what to do after retirement. But here, in Tahlilan, I realize that Pak Slamet, Pak Wahyu, they also feel this. We are all like boats in the same sea." This metaphor resonates precisely with Gitterman and Shulman's (2005) "all-in-the-same-boat" mutual aid dynamic.

Instillation of hope was systematically activated through the tausiyah and doa phases. Participants reported that the kyai's discourse on the afterlife (akhirat), the ongoing spiritual bond between the living and the deceased, and the Islamic assurance of divine mercy provided a distinctly hopeful orientation toward aging and death. BYM-05 (age 79) articulated this:

"The kyai reminds us that this life is just a crossing – like a bridge. What we do here, the prayers we send, the good we do – these will follow us. When I hear this, I am not afraid anymore. I feel there is still time, still something I can do."

Altruism was structurally embedded in the core purpose of Tahlilan: the communal act of praying for the deceased. Participants consistently reported that the act of praying for others particularly for recently deceased community members provided them with a powerful sense of purpose and social value. This is particularly significant for elderly retired men who frequently reported a diminished sense of contribution and social relevance following retirement (Nolen-Hoeksema & Ahrens, 2002). The regular performance of altruistic ritual action within Tahlilan counteracted this existential attrition by providing a socially recognized, spiritually significant form of contribution.

Group cohesiveness was evidenced by the longevity and emotional depth of the relational bonds between regular Tahlilan participants. Field observations documented significant interpersonal warmth, humor, and mutual recognition among participants who had shared the ritual across many years. PLG-04 (age 65) described the Tahlilan group as "the family I chose" a statement reflecting the degree of social integration achieved through sustained group participation. This cohesiveness is particularly therapeutic for elderly men, among whom social network contraction is a primary driver of loneliness and depression (Cornwell & Waite, 2009; Hawkey & Cacioppo, 2010).

Catharsis the emotional release and relief derived from the expression of previously constrained feelings was observed both in the formal ritual phases and, more prominently, in the post-ritual fellowship period discussed below. During the recitation and doa phases, several participants were observed weeping silently—a form of emotional release that, notably, occurred without social stigmatization. The communal, religiously legitimated frame of Tahlilan appeared to sanction emotional expression for elderly men in ways that ordinary social interaction did not.

The existential factors cluster Yalom's (2005) category encompassing recognition of mortality, acceptance of life's ultimate aloneness, assumption of responsibility for one's existence, and the confrontation with life's foundational contingency permeated the entire Tahlilan experience. The ritual's explicit focus on death, the afterlife, and the meaning of the life that has passed makes it perhaps uniquely suited among common social practices to activate therapeutic work within this factor cluster. CLP-03 (age 68) reflected:

"Each time someone we know dies and we pray for them in Tahlilan, I think: one day this will be done for me. But instead of making me sad, it makes me want to be a better person, to leave something good. I think about what I have done, what I still want to do."

This existential mobilization the use of mortality awareness to intensify purposefulness and ethical engagement exemplifies what terror management theory scholars (Greenberg et al., 1986) call "mortality salience effect" and what logotherapy identifies as the discovery of meaning through confrontation with finitude (Frankl, 2006). Within Tahlilan, this existential mobilization is communally scaffolded and spiritually grounded, making it potentially more sustainable and less anxiety-provoking than individual confrontation with mortality.

Theme 3: Meaning-Making and Existential Reorientation through Communal Ritual

A central finding of this study is that Tahlilan functions as a structured meaning-making ecology for elderly Muslim men, providing both the symbolic resources and the social scaffolding necessary for the construction and maintenance of existential meaning in late adulthood. This theme was supported by data across all three research sites and across all age cohorts within the participant group.

Three distinct meaning-making pathways were identified within the Tahlilan context. The first is retrospective meaning-making: the reinterpretation of past losses, failures, and transitions as carrying positive significance within an Islamic eschatological framework. The *tausiyah* consistently provided participants with narrative frameworks for reinterpreting experiences of loss – the death of a spouse, the ending of a career, physical decline – as divinely intended tests (*ujian*) or purifications (*kaffarah*) that carry eternal significance. PLG-01 (age 70) articulated this:

"When my wife passed, I felt like my life had no direction. Then in Tahlilan, Pak Kyai said: 'The hardest separations are those that God uses to bring us closer to Him.' Since then, my prayers for her have become my way of staying close to her. The pain became a path."

The second pathway is prospective meaning-making: the construction of future-oriented purpose through the performance of ongoing relational and spiritual obligations. The commitment to attend and participate in future Tahlilan sessions, to continue praying for deceased companions, and to eventually be prayed for by one's own community provided participants with a web of prospective commitments that structured their sense of future purpose. BYM-01 (age 74) noted: "As long as there are friends who need us to pray for them, I have a reason to get up and go out. This is still my duty."

The third pathway is relational meaning-making: the location of meaning in the enduring bonds of mutual care and prayer that Tahlilan sustains between the living and the deceased. The Islamic theological framework within which Tahlilan operates posits that the living and the dead remain spiritually connected through prayer, and that the prayers of the living benefit the souls of the deceased (Muhaimin, 2001). For elderly men who have lost spouses or close companions, this framework transforms the experience of bereavement: rather than being a final rupture, death becomes a transition in the relationship's modality – from physical to spiritual companionship with prayer as the continuing medium of relational engagement.

This finding resonates strongly with research on continuing bonds theory in grief psychology (Klass et al., 1996; Stroebe et al., 2012), which challenges the traditional "letting go" model of grief in favor of understanding healthy bereavement as involving the maintenance of a transformed but ongoing bond with the deceased. Tahlilan provides an institutionally supported, communally enacted form of continuing bonds that is fully integrated into the social and spiritual life of the community making it arguably more effective and more sustainably supportive than individually adopted continuing bonds strategies.

Theme 4: Post-Ritual Fellowship as a Mutual Aid Space for Grief and Existential Processing

While the formal ritual phases of Tahlilan provided structured, symbolically rich contexts for existential meaning-making, observational data revealed that the informal post-ritual fellowship period locally referred to as *obrolan santai* (relaxed conversation) or *duduk-duduk* (sitting together) was consistently identified by participants as among the most therapeutically significant components of the overall Tahlilan experience. This finding has important implications for understanding how Tahlilan functions as a counseling model, as it suggests that the formal ritual creates the emotional and relational conditions for informal therapeutic exchange.

The post-ritual fellowship consistently exhibited the dynamics of a spontaneous mutual aid group (Gitterman & Shulman, 2005). Following the formal conclusion of the *doa*, participants remained together—typically for between thirty minutes and two hours—sharing food, drinking tea, and engaging in conversation that ranged from practical matters (health, family, community affairs) to deeply personal disclosures about grief, aging, and existential concerns. The presence of shared food and the relaxed physical arrangement (sitting in informal circles on the floor or around low tables) created a markedly different interactional climate from the formal ritual: one characterized by horizontal, reciprocal exchange rather than the leader-to-group dynamic of the *tausiyah*.

Consistent with Gitterman and Shulman's (2005) model, several mutual aid dynamics were clearly observable in these post-ritual conversations. The "discussing taboo subjects" dynamic was particularly evident: participants engaged in direct conversations about death, dying, and the fear of death in ways that would have been culturally inappropriate in other social contexts. CLP-05 (age 76) noted:

"At home, my children do not want me to talk about dying – they say 'Bapak don't say that.' But here, after Tahlilan, with Pak Yusuf and Pak Hasan, we talk openly: how do we want to go? What are we afraid of? Nobody is embarrassed. We have all already been facing this [the Tahlilan ritual] together."

This finding illustrates a crucial function of the Tahlilan frame: by normalizing death as the ritual's explicit subject matter, it creates a culturally sanctioned space for the open exploration of mortality-related concerns—a space that is particularly lacking for elderly men in Javanese society, where cultural norms (including the concept of *rukun*, social harmony, and the avoidance of topics that might cause distress to others) often suppress direct discussion of existential concerns (Beatty, 1999; Geertz, 1960).

The mutual support dynamic participants providing emotional validation, practical advice, and spiritual encouragement to one another – was observed extensively in these post-ritual conversations. Notably, the support exchanged was genuinely reciprocal: the same participant who offered comfort about a companion's grief over a deceased spouse might, moments later, receive acknowledgment and support regarding his own fears about his deteriorating health. This reciprocity is precisely what the mutual aid model predicts as therapeutically optimal (Gitterman & Shulman, 2005), and what distinguishes mutual aid groups from both one-directional support (such as volunteering) and one-directional care-receiving (such as individual therapy).

BYM-04 (age 66, recently retired) described the post-ritual fellowship in terms that resonate with clinical descriptions of group cohesion (Yalom & Leszcz, 2005):

"After we finish the doa and eat together, something opens up between us. Maybe it is because we have just shared something sacred together. I can say to Pak Riyadi: 'My chest feels tight when I think about Ibu [his late wife]' – and he understands, because he has felt this too. In Tahlilan, I am not ashamed to be old and afraid."

The reduction of shame associated with vulnerability and emotional expression a significant barrier to mental health help-seeking among elderly men in many cultural contexts (Addis & Mahalik, 2003; Courtenay, 2000) represents a particularly important therapeutic achievement of the Tahlilan communal frame. The ritual's religious legitimacy, its masculine gender composition, and its structural positioning of emotional expression as a form of spiritual devotion (weeping in prayer, expressing grief for the deceased) collectively create conditions in which elderly men can engage in self-disclosure and peer support without threatening their masculine identity or social standing.

This finding has significant implications for the design of formal counseling interventions targeting elderly Muslim men. The near-universal inaccessibility of formal mental health services to this population is frequently attributed to cultural barriers, including masculine stigma around help-seeking and the perceived incompatibility between Western therapeutic approaches and Islamic worldviews (Hamdan, 2008; Haque & Masuan, 2002). The Tahlilan model demonstrates that these barriers can be circumvented when counseling support is embedded within a culturally indigenous, religiously legitimated, masculine-normative communal practice.

Implications for Indigenous Counseling Practice and Policy

The findings of this study have several important implications for BK practitioners, counseling psychologists, and mental health policymakers working in Indonesian gerontological contexts. First, the Tahlilan model provides a tested, operational framework for community-based existential counseling that does not require participants to identify themselves as mental health clients thereby bypassing a primary barrier to help-seeking among elderly Muslim men. BK practitioners could work in partnership with NU-affiliated kyai to develop taushiyah content that more explicitly incorporates psychoeducational elements drawn from logotherapy and group counseling theory, enhancing the ritual's already substantial therapeutic efficacy.

Second, the post-ritual fellowship period represents an underutilized but highly accessible entry point for counseling intervention. Community counselors could be trained to participate in these informal gatherings as participant-facilitators, using active listening, reflective questioning, and gentle logotherapeutic prompts to deepen the mutual aid processes already organically present in these conversations. This approach, which Gladding (2012) describes as "counseling in community," preserves the cultural authenticity of the practice while enhancing its therapeutic intentionality.

Third, the Tahlilan model offers a replicable template for the development of other indigenous counseling models in Indonesian BK scholarship. The analytical framework employed in this study systematically mapping indigenous group practices against established group counseling theories could be productively applied to other culturally embedded practices such as arisan, pengajian rutin, or gotong royong work sessions, potentially revealing a rich ecology of indigenous counseling resources that has been overlooked by a BK scholarship focused predominantly on formal institutional contexts.

CONCLUSIONS AND RECOMMENDATIONS

This study has demonstrated, through systematic qualitative investigation, that the Tahlilan tradition functions as a structurally coherent and psychologically efficacious indigenous group counseling model for elderly Muslim men in Banyumas Raya, Central Java. By deliberately repositioning the analytical lens from theology and sociology to the field of Bimbingan dan Konseling, this study has illuminated the operation of established group counseling mechanisms Yalom's therapeutic factors, logotherapeutic meaning-making, and mutual aid group dynamics within a ritual practice that serves millions of Indonesian Muslim men across their lifetimes.

The four themes identified (1) Tahlilan's structural correspondence to group counseling stages, (2) the activation of multiple Yalom therapeutic factors within the ritual, (3) the role of Tahlilan as a meaning-making ecology supporting existential reorientation, and (4) the post-ritual fellowship as a mutual aid space collectively constitute a robust empirical and theoretical case for Tahlilan's recognition as an indigenous counseling model. The findings suggest that the therapeutic efficacy of Tahlilan is not incidental or merely palliative, but is structurally embedded in its ritual design, its communal architecture, and its religious symbolic framework.

The novelty of this study lies in its explicit refusal to subordinate BK analysis to theological or sociological framings. By foregrounding the counseling-theoretical dimensions of Tahlilan, this study opens a productive dialogue between indigenous community practices and professional BK scholarship a dialogue that has the potential to significantly expand the toolkit available to counselors working with elderly Muslim populations in Indonesia and beyond. Future research should explore the quantitative assessment of Tahlilan's effects on specific mental health indicators, the experiences of women who participate in sex-segregated Tahlilan sessions, the comparative therapeutic dynamics of Tahlilan across different NU regional cultures, and the development

of training programs for kyai who wish to more intentionally incorporate counseling-informed approaches into their *tausiyah* practice.

ADVANCED RESEARCH

In sum, *Tahlilan* is not merely a gathering. It is, for countless elderly Muslim men, a lifeline of existential meaning, communal belonging, and peer-sustained hope in the face of aging, loss, and mortality. It is time for the counseling profession to recognize, honor, and learn from this

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