



THE CORRELATION BETWEEN ACADEMIC CHARACTERISTICS AND INTERACTION WITH THE QUR'AN ON MENTAL HEALTH

Muhamad Redho Al Faritzi¹, Zahra Mulki Syari'ati²

email: alfaritziredho@gmail.com¹, zahramusy21@gmail.com²

Ilmu Qur'an & Tafsir Universitas Darussalam Gontor¹, Rekam Medis &
Informasi Kesehatan Poltekkes Kemenkes Tasikmalaya²

Abstract

Mental health disorders affect a significant portion of the global population, with around 970 million people affected in 2019, or 1 in 8 individuals. This study explores the correlation between interaction with the Qur'an and mental health, based on the 5T aspects: recitation, memorization (tahfidz), interpretation (tafsir), application (tathbiq), and dissemination (tabligh). A quantitative correlational study was conducted at the Tasikmalaya Ministry of Health Polytechnic in November 2024, involving 171 respondents selected through purposive sampling. Data were collected via the Self-Reporting Questionnaire (SRQ) and a Qur'anic interaction questionnaire, and analyzed using the gamma correlation test. Results showed that 86.36% of participants with strong Qur'anic interaction were mentally healthy, while 100% of those with low interaction showed signs of mental disorders. The analysis yielded a significant p-value (0.000), indicating a strong relationship between Qur'anic interaction and mental health. The findings suggest that engaging with the Qur'an can serve as an effective means of mental health education and promotion.

Keywords: Education, Effectiveness, Mental health, Quranic Values

INTRODUCTION

Mental health or mental health is one of the crucial issues that is rampant and is increasingly being discussed in various parts of the world, including in Indonesia. Mental health disorders are something that cannot be underestimated. In 2019, about 970 million people worldwide were living with mental disorders. The era of Industrial Revolution 4.0, globalization, and modernization has led to massive social transformations that can

increase mental stress, and trigger anxiety. This has an impact on 94% of Indonesian people who experience depression, both mild and severe (Sam, 2020). The World Health Organization or WHO states that mental disorders occupy the 4th position of diseases in the world and are predicted to become a major health problem.

The era of modernization has brought humanity into a spiritual drought, which is a logical consequence of the paradigm of modernism that is too materialistic and mechanistic, as well as ignoring normative values, thus giving rise to various psychological problems (Prayogo, 2022). As sentient beings, humans are aware of disturbances in their psyche, therefore human history also records efforts to overcome these problems. One of the efforts that can be made is to educate the soul about the values contained in the Qur'an to develop a main personality following the values of Islamic teachings (Hafizatul, Zain, Wilis, & Sari, 2024). Islamic education, with the values contained in the Qur'an, plays an important role in fostering the mental health of individuals. Someone with good mental health has a calm, calm inner state, and positive, which allows them to enjoy everyday life and respect the people and environment around them. Instead When a person has a mental health disorder then it can cause impacts such as uncontrollable emotions, temperament bad, and even inexplicable diseases (Azizah & Fauzan, 2021).

Studies show that religious practices, including reading and meditating on the Qur'an, can have a positive impact on mental health (Erika A'idatun Nahar & Ahmad Saefudin, 2024). Education can also be applied through the reading of the Qur'an. In some Islamic boarding schools, mental health education is integrated with the reading of the Qur'an. This method involves listening to and meditating on sacred verses delivered with melodies, which have proven to be effective in helping students manage their emotions and deal with stress. Muhammad Quthub in his book said that in the Qur'an there are a lot of demands regarding education, those demands have a certain influence on a person's soul, if a person has lived it and felt it, he will have a way of behaving, thinking, feeling and acting (Yusuf, 2018). He will be

closer to truth and devotion and will be a more sensitive and more humane person. In Arabic, three words are often used to describe the concept of religious education, namely tarbiyah, ta'lim, and ta'dib (Bakar, 2015).

There is a dissertation by Malikah that discusses the role of Islamic education in maintaining mental health, entitled "Mental Health Education Through the Reading of the Qur'an" (Case Study at the Darullughah Wadda'wah Raci Bangil Pasuruan Islamic Boarding School and the Junwangi Krian Sidoarjo Bilingual AlAmanah Islamic Boarding School) (Malikah, 2018). In his research, it was found that mental health education activities through the reading of the Qur'an have a positive impact on mental health. Islamic education for mental health is implemented by listening, listening, and contemplating the recitation of the Qur'an which is expressed in songs by educators. From the results of the study, it was concluded that in the development of emotional skills, the activity was relatively successful, reflected in the solemnity of students listening and living the reading of the Qur'an in songs delivered by educators, so that they felt comfort, peace, peace in the midst of complicated problems.

The Qur'an as a perfect book contains many values that guide humans in facing difficulties and overcoming mental health disorders. For a Muslim, the Qur'an not only serves as a guide to life but also as a source of healing both physically and psychologically. The Qur'an is expected to be a life companion, a source of inspiration, as well as a place of consultation, mediation, and solutions in facing various life problems (Masrur & Salsabila, 2021). The Qur'an has been used as a source of inspiration and analysis to understand the relationship between the Qur'an and mental health. The results show that the Qur'an has significant implications for mental health, including reducing stress, and anxiety, and increasing self-awareness (Aryansyach & Muhajarah, 2024).

Other research that uses the method of religious psychotherapy approach in the Qur'an proves that the Qur'an contains spiritual values that can help overcome the difficulties of human life (Zulkifli, 2022). This study shows that the recitation of the Qur'an has significant meaning on mental

health, including symptomatic aspects, self-adjustment, self-development, and religion. Recitation of the Qur'an can be used as a preventive effort against mental disorders and mental illnesses (Nufus, 2023). This phenomenon creates a deep need for research involving aspects of Islamic education and mental health. Amid technological developments and rapid social change, the young generation of Muslims is now faced with unprecedented pressures, ranging from social expectations to academic pressures.

Therefore, digging deeper into how Islamic education can serve as a tool to overcome and prevent mental health problems becomes very urgent. Therefore, this study will delve deeper into the teachings of the Qur'an related to mental health and how Islamic education can play a role in conveying these messages to its people. Therefore, the author needs to research the relationship between the interaction of the Qur'an and mental health conditions in the academic community of the Tasikmalaya Ministry of Health Polytechnic. The purpose of this study is to determine the frequency distribution of respondent characteristics including age, gender, and education, describe the interaction of the Qur'an, and mental health, and analyze the interaction of the Qur'an with mental health education in the academic community of the Ministry of Health Polytechnic Tasikmalaya.

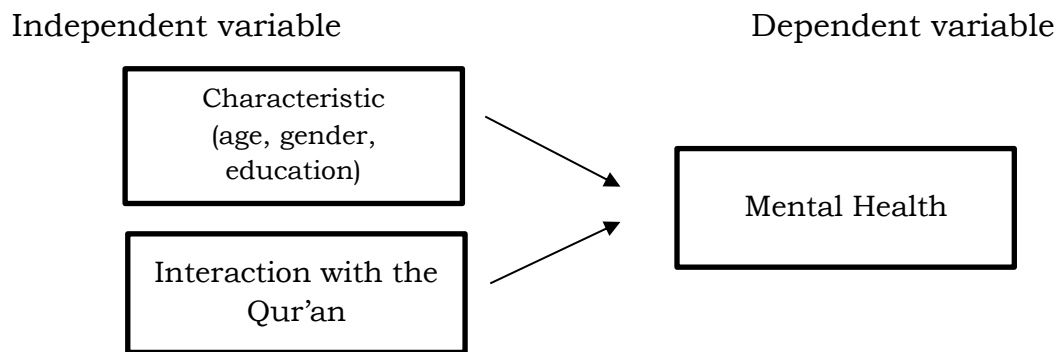
METHOD

This study is a quantitative research on correlation with a cross-sectional approach. This study uses a quantitative analysis method used for data collection, processing, and presentation with the aim of other parties getting descriptions of the research variables easily. In this study, quantitative analysis is aimed at finding out the relationship between the interaction of the Qur'an and mental health. This research was carried out at the Tasikmalaya Ministry of Health Polytechnic in November 2024.

The research population is the entire academic community of the Tasikmalaya Polytechnic. Meanwhile, the sample in this study is the academic community at the Tasikmalaya Ministry of Health Polytechnic at the Tasikmalaya and Cirebon campuses who filled out questionnaires for

both students, lecturers, and employees from November 27 to December 4, 2024. The samples in this study were taken using the purposive sampling method, which is a technique for determining samples with certain considerations. The consideration for determining the sample in this study is the period for filling out the questionnaire with a total of 171 respondents.

Research Conceptual



Research Hypothesis

1. H₀ : There is a relationship between age and mental health
Ha : There is no relationship between age and mental health
2. H₀ : There is a relationship between gender and mental health
Ha : There is no relationship between gender and mental health
3. H₀ : There is a relationship between education and mental health
Ha : There is no relationship between education and mental health
4. H₀ : There is a relationship between interaction with the Qur'an and mental health
Ha : There is no relationship between interaction with the Qur'an and mental health

Operational Definition

The variables in this study consist of independent variables and dependent variables. The independent variable is the characteristics of the respondent and the interaction of the respondent with the Qur'an. While the dependent variable is the respondent's mental health. The variable measurements in this study consist of numerical data, each of which is described in the paragraph below.

This study employs several key variables to examine the relationship between respondents' characteristics, their interaction with the Qur'an, and their mental health condition. These variables were measured using a structured questionnaire distributed to the participants.

1. Age

The age variable refers to the length of a respondent's life up to the time of the study. Age is categorized ordinally into three groups: Teenagers (10–18 years), Adults (19–45 years), and Pre-Elderly (46–60 years). Measurement was based on the respondents' answers in the questionnaire.

2. Education

The education variable refers to formal education, which is structured and hierarchical. The categories include: secondary education, high school, higher education, diploma, bachelor's degree, and master's or doctoral programs. This variable is measured on an ordinal scale.

3. Gender

Gender is defined based on the biological or outward appearance characteristics of the respondents. This variable was recorded through the questionnaire and measured on a nominal scale.

4. Interaction with the Qur'an

Interaction with the Qur'an includes activities such as recitation, memorization (tahfidz), interpretation (tafsir), application (tatbiq), and dissemination (tabligh). It was measured by summing the scores of 10 questions, with "yes" responses scoring 1 point and "no" responses scoring 0 points. The total score ranges from 0 to 10, and is categorized as follows: low (1–3), moderate (4–6), and high (7–10). This variable is measured on an ordinal scale.

5. Mental Health

Mental health in this study refers to the psychological condition of the respondents at the time of the survey. It was assessed using the Self-Reporting Questionnaire (SRQ) consisting of 10 questions. A "yes" response scored 1 point, and "no" scored 0. Respondents were

categorized as mentally healthy (if fewer than 5 "yes" answers) or detected with potential mental health disorders (if 5 or more "yes" answers). This variable is measured on an ordinal scale.

Data Collection Instruments and Methods

The instruments used in this study are the Self-Reporting Questionnaire (SRQ) and questionnaires about interactions with the Qur'an. The data sources used in this study consist of primary data, using the results of filling out the SRQ questionnaire which is a standardized questionnaire and used in SKI 2023 for early detection of mental health in Indonesia. SRQ has been used as a standard measurement tool to measure respondents' mental health, indicating that the SRQ has been widely accepted as an effective and reliable measurement tool in mental health research (Prahastuti, 2023). Secondary data are Al-Qur'an and hadith, relevant literature, and previous research, Indonesian Health Survey (SKI) 2023. The data collection techniques are filling out questionnaires and literature studies.

Data Processing and Analysis

Data processing techniques in this study include editing, tabulating, coding, and analysis. The editing stage is carried out to determine the completeness of the research data. Furthermore, coding is carried out, namely giving codes to the data obtained to make it easier to tabulate the data. After that, data tabulating is carried out according to the variables that have been studied to make it easier to conduct analysis. The analysis used was univariate and bivariate analysis with gamma correlation test analysis. Bivariate analysis was carried out to determine the characteristics and interaction of the Qur'an with mental health. This study aims to examine the influence of several independent variables on mental health as the dependent variable. The independent variables include individual characteristics such as age, gender, and education level as well as interaction with the Qur'an. The research explores how these factors may contribute to or impact an individual's mental health condition.

RESULTS AND DISCUSSION

Research Results

Table 1. Distribution of frequency of respondent characteristics

Characteristics Respondent	Frequency	Total
Age		
Teenage	18	10,53
Adult	139	81,29
Pre Elderly-Elderly	14	8,19
Gender		
Woman	131	76,61
Man	40	23,39
Education		
Intermediate	149	87,13
Tall	22	12,87

Table 2. Distribution of frequency of Qur'anic interactions and mental health

Interaction with the Holy Qur'an	Frequency	Total
Less	12	7,02
Enough	71	41,52
Good	88	51,46
Mental Health		
Mental sehat	88	51,46
Detected Mental Disorder	83	48,54

Based on table 1 above, it can be seen that the most age groups are in the adult group at 81.29%, female sex at 76.61%, and secondary education at 87.13%. Based on table 2, shows that in the variables of interaction with the Qur'an, the most results are good interaction at 51.46% with mental health at most healthy mental at 51.46%.

BIVARIATE

The Influence of Age on Mental Health

Table 3. The influence of age on mental health

		Mental Health				P-Value
		Mentally Healthy		Detected Mental Disorder		
		n	%	n	%	
Age	Teenage	5	27,78	13	72,22	0,13
	Adult	71	51,08	68	48,92	
	Pre-Elderly	12	85,71	2	14,29	
	Total	88		83		

Table 3 above shows that mental disorders were detected in the adolescent age group as much as 72.22% and the most mentally healthy in the pre-elderly-elderly age group as much as 85.71%. The table shows the influence of age on mental health with a p-value of 0.13. The chi-square test conducted for this bivariate analysis yielded a p-value of 0.13. Since the p-value is greater than the commonly accepted significance level of 0.05, the result suggests that there is no statistically significant association between age and mental health status in this sample. While variations in mental health status across age groups are observed, they may be due to random chance rather than a true underlying relationship.

Age is a limit or level of life size that affects a person's physical condition. The more mature a person's age, the wiser the behavior in making decisions will be because old age is more careful and does not want to spend too much because it will make it a burden for them (Wijaya, Kardinal, & Cholid, 2017). In this study, adolescents tend to experience mental health disorders. Adolescence is a critical period for improving mental health as more than half of mental health problems start in the teenage stage and some of them persist into adulthood. Adolescence is an important period for developing social and emotional habits that are essential for mental well-being. Factors that can contribute to stress during adolescence include exposure to difficulties, pressure to fit in with peers, and identity exploration. Some adolescents are at greater risk of mental health conditions due to their

living conditions, stigma, discrimination or exclusion, or lack of access to quality support and services.

Adolescence is a transition period from childhood to adulthood. According to the Ministry of Health of the Republic of Indonesia, adolescence is divided into 2 categories, namely early adolescence (12-16 years old) and late adolescence (17-25 years old). Because it is a transitional period, in adolescence many factors affect adolescents both for physical health and mental health. Regarding mental health because psychologically adolescents are the age when a person is looking for their identity, so many adolescents who experience mental health problems in adolescents can be influenced by several factors, namely biological factors, personality factors, and psychological and social factors (Krapić, Hudek-Knežević, & Kardum, 2015).

This causes mental health conditions in the pre-elderly-elderly age range to tend to be better. According to mental health is seen as a successful self-adjustment to stressors from the internal or external environment, evidenced by thoughts, feelings, and behaviors that are appropriate for age and following local and cultural norms. As we get older, we also mature our mindset and maturity level. Mentally healthy people can utilize their abilities or potential to face life's challenges and develop positive relationships with others. On the other hand, people with mental health disorders experience disturbances in feelings, thinking skills, and emotional control, which ultimately leads to bad behavior (Mukarom, 2023).

The Influence of Gender on Mental Health

Table 4. The influence of gender on mental health

		Mental Health				P-Value
		Mental Health		Detected mental disorders		
		n	%	n	%	
Gender	Woman	62	47,33	69	52,67	0,037
	Man	26	65	14	35	
	Total	88		83		

Table 4 above shows that the most mentally healthy people are in the male gender group as much as 65% and mental disorders are detected in the

female gender group as much as 52.67%. The table shows the influence of gender on mental health with a p-value of 0.037.

The results of this study are in line with research that argues that there is a relationship between gender and mental health. Women are more prone to experiencing health problems than men. The same thing was also revealed by another study that female students predominantly experience mental health disorders compared to male. The results of this study are also supported by Steinberg in his research that women are more susceptible to mental disorders caused by genetics, social relationships, and dominant use of feelings when experiencing stressors and tend to solve problems emotionally.

Research conducted by Wang, et al. showed that gender is an important biological determinant of vulnerability to psychosocial stress. This is related to the activity of the HPA (Hypothalamic Pituitary Adrenal) axis which is related to the regulation of the hormone cortisol. This hormone regulates heart rate and blood pressure. The response of HPA in men is higher compared to the response in women. This can affect a person's response to psychosocial stress. Other studies show that gender is a significant predictor of emotional reactivity experienced by women because they have a higher level of stress.

The results of the data show that there is a relationship between gender and mental health. Where there are differences in responses between men and women when facing stress. Women's brains tend to have a negative level of alert response to stress references. In women, stress triggers the release of certain hormones, causing feelings of anxiety and fear. Meanwhile, men tend to be able to deal with stress and competition, even thinking that stress can provide a positive boost. It can be said that when women are under pressure or have conflicts, they will be more likely to experience stress (Annisa & Ifdil, 2016).

The Influence of Education on Mental Health

Table 5. The Influence of Education on Mental Health

		Mental Health				P-Value
		Mental Health		Detected Mental Disorder		
		n	%	n	%	
Education	Low	0	0	0	0	0,000
	Intermediet	69	46,31	80	53,69	
	Tall	19	86,36	3	13,64	
	Total	88		83		

Table 5 above shows that the most mentally healthy people are in the higher education group as many as 86.36% and mental disorders are detected in the secondary education group as much as 53.69%. The table shows the influence of education on mental health with a value of p 0.000.

Mental health, as an inseparable dimension of an individual's well-being, plays an important role in determining a person's productivity and quality of life. A good psychological state not only includes resilience to stress but also involves the ability to adapt and overcome various life challenges (Syarif Hidayat; Mavianti, 2024). In this context, university students have emerged as a group that is prone to various pressures and challenges, with the dynamics of globalization further complicating the academic landscape. Meanwhile, during the era of globalization that involves fierce competition, college students are in a competitive academic environment (Syaadah, Ary, Silitonga, & Rangkuty, 2023).

The Influence of Interaction with the Qur'an on Mental Health

Table 6. The influence of interaction with the Qur'an on mental health

		Mental Health				P-Value
		Mental Health		Detected Mental Disorder		
		n	%	n	%	
Interaction with the Qur'an	Less	0	0	12	100	0,000
	Enough	12	16,9	59	83,1	
	Good	76	86,36	12	13,64	
	Total	88		83		

Table 6 above shows that the most mentally healthy in the group with good interaction with the Qur'an is 86.36% and mental disorders are detected in the group with less interaction with the Qur'an as much as 100%. The table shows the influence of interaction with the Qur'an on mental health with a p-value of 0.000.

Discussion

The results of a review of research on spiritual benefits on mental health and well-being concluded that religion as a spiritual aspect has a strong relationship with a person's mental health. Spirituality can improve mental health through the formation of positive religious countermeasures which has an impact on increasing positive affirmations. The positive coping that is formed will improve the psychological well-being of the individual thereby creating a feeling of satisfaction with life, and increasing a sense of optimism, creativity, calmness, confidence, and a feeling of peace (Wahyuni & Bariyyah, 2019). Other research shows that spirituality and religiosity can give strength to individuals who experience negative emotions and suicidal thoughts. In addition, it can improve adaptability when facing life pressures in the form of stress or depression (Lucchetti, Koenig, & Lucchetti, 2021).

Physiologically, stress or depression will drive a series of biocomic reactions and stimulate nerve work. At first, depression stimulates activity in the hypothalamus so that it secretes cortico thropic hormone which then sends messages through two pathways. First, through the nerves in the brainstem and spine which will then stimulate the adrenal gland nucleus. Second, it will stimulate the pituitary gland at the base of the brain to secrete Adreno Cortico Thropic Hormone (ACTH) which will further stimulate the skin of the adrenal glands to produce cortisol. These two pathways will provide feedback back to the pituitary gland. The relaxation carried out provides a soothing sensation effect on the limbs. The changes that occur during and after relaxation affect the work of the autonomic nerves. This response will change the dominant sympathetic physiology to the dominant parasympathetic. This regulation of the parasympathetic system eventually causes a calming effect. In addition to the increase in endorphin hormones,

there is also an increase in the hormones serotonin and melatonin (Lestari & Yuswiyanti, 2020).

These three hormones are able to provide a feeling of calm, comfort, and relaxation so that stress or depression levels can be lowered. Changing brain waves to alpha waves will cause an increase in serotonin. Serotonin in the body will then be converted into the hormone melatonin which has a regulatory effect on body relaxation which ultimately the depression felt by the respondent can decrease as a result of mood changes (Charbonneau, Mezulis, & Hyde, 2009). Serotonin can provide a boost to the limbic system to improve feelings of comfort, happiness, satisfaction, good appetite, and psychomotor balance. Meanwhile, melatonin can relax muscles, reduce tension and anxiety and provide a feeling of comfort. In scientific studies on the influence of Qur'an interaction in the form of reading the Qur'an can trigger the production of endorphins in the body. Endorphins play a role in suppressing pain signals that enter the nervous system, namely by activating the pain management system, providing a relaxation effect, and natural pain relief. In addition, it can improve mood, strengthen the body's immunity and reduce stress which has an impact on a person's life stress level (Ayuningtyas, Misnaniarti, & Rayhani, 2018).

A person needs to ease the pressure of his life, although it does not mean that he has to abandon the challenges of his life. This means how to do it to be able to face life's challenges firmly. The effort is to do *dzikrullah*, recite the Qur'an, tadabbur Al-Qur'an, reflect, appreciate and practice the content of the Qur'an. So by performing this worship, it has become a benchmark for a person to realize that all the difficulties he faces are tests given by Allah SWT. So that in doing *dhikrullah*, reciting the Qur'an, tadabbur Al-Qur'an and contemplating and appreciating the content of the Qur'an is an effort to pour out all complaints, uneasiness, anxiety and all hopes for his life to Allah SWT. So that all the difficulties that exist in his life do not become a burden that is solely difficult to overcome on his own abilities.

Ibn Qoyyim summarizes what a Muslim should do to treat his hard heart with the Qur'an. He said: There are two things you must do; First, you must remove your heart from the land of the world, and you dwell in the Hereafter. Then you accept the meaning of the Qur'an with it and its explanation and you understand it and understand what it wants and what is revealed by it and take your part of each of its verses and you use it for the disease of your heart, then your heart will be healed with the permission of Allah. Interacting with the Qur'an is one of the therapeutic media for liver diseases which are part of mental (mental) diseases. Interaction with the Qur'an is also a form of application of remembering Allah (*dzikrullah*) carried out by believing individuals. Thus, it can be known that interaction with the Qur'an can have a positive impact on mental health conditions in the form of peace of mind, loss of grievances, and increasing faith.

CONCLUSIONS AND SUGGESTIONS

This study demonstrates a statistically significant correlation between the level of interaction with the Qur'an and mental health status among the academic community of the Tasikmalaya Ministry of Health Polytechnic. Respondents with high levels of Qur'anic engagement—comprising recitation (*tilawah*), memorization (*tahfidz*), interpretation (*tafsir*), application (*tathbiq*), and dissemination (*tabligh*), were found to exhibit better mental health outcomes, with 86.36% categorized as mentally healthy. In contrast, all respondents with low interaction levels exhibited symptoms indicative of mental health disorders. These findings are supported by statistical analysis showing a p-value of 0.000, indicating a highly significant relationship between Qur'anic interaction and mental health. Additionally, educational attainment was positively associated with mental well-being, while variables such as age and gender showed varying effects, not all of which reached statistical significance.

Theoretically, this study reinforces the argument that spiritual engagement particularly through Qur'anic values—can serve as a promotive and preventive tool in sustaining mental stability. Qur'anic values have been shown to facilitate inner tranquility, enhance stress coping mechanisms, and

strengthen emotional regulation. Therefore, interaction with the Qur'an should not be viewed solely as a religious practice, but also as a strategic contribution to mental health education. The integration of Qur'anic values into mental health promotion and intervention programs should be considered more systematically in both academic and broader societal contexts.

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