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# Student Mental Health and Psychological Supports at Pondok Pesantren: A Mixed-Method Case Study

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#### **Abstract**

The demand for mental health supports for students in the educational system is growing. As a distinct Islamic educational institution where students stay full-time in one community, Pondok Pesantren needs to provide supportive environment for students since their home life is separate and less supportive. Differences in background and adaptability can result in some students experiencing difficulties, feeling anxious, afraid, uncomfortable, isolated, and even deciding to move. It is essential to know the mental health condition of the students to identify early warning signs of mental health problems. The purpose of this study is to analyze the mental health of students in Pondok Pesantren Darunnajah, factors contributing to their mental health, and their coping methods in maintaining mental health. It used mixed method design, combining The Strength and Difficulties Questionnaires (SDQ Goodman) for quantitative data and interviews for qualitative insights. The questionnaire was conducted to 160 students, age 12-18 years old, using stratified sampling based on gender and class. 16 students and teachers were selected using purposeful sampling techniques and interviewed. The research found that the majority of student (79.4%) were classified as normal, 19.4% borderline, and 1.3% needing assistance. Peer problems had the lowest average value (2.46). Male students are higher on hyperactivity (5.39), while emotional difficulties are more common in female (4.40). There are five factors contributing the mental health; students' adaptability, social skill, family support, teacher support, and religious belief. They maintained their mental health by having friends, enjoying lives and activities in Pondok Pesantren, also by enhancing religious beliefs and performing religious activities. The findings highlight the importance of providing psychological supports based on gender and class as well as integrating religious belief and social supports in promoting mental health within Pondok Pesantren.

**Keywords**: coping strategies, Islamic boarding school, mixed-method study, mental health, psychological support

# Abstrak

Kebutuhan akan dukungan kesehatan mental bagi peserta didik dalam sistem pendidikan terus meningkat. Sebagai lembaga pendidikan Islam yang khas, dengan pola asrama penuh di mana peserta didik tinggal dalam satu komunitas, Pondok Pesantren perlu menyediakan lingkungan yang mendukung karena kehidupan keluarga peserta didik terpisah dan umumnya kurang memberikan dukungan langsung. Perbedaan latar belakang dan kemampuan beradaptasi dapat menyebabkan sebagian peserta didik mengalami kesulitan, kecemasan, ketakutan, ketidaknyamanan, isolasi, bahkan memutuskan untuk pindah. Penting untuk mengetahui kondisi kesehatan mental peserta didik guna mengidentifikasi tanda-tanda awal permasalahan kesehatan mental. Tujuan dari penelitian ini Adalah untuk menganalisis kondisi kesehatan mental peserta didik di Pondok Pesantren Darunnajah, faktor-faktor yang memengaruhinya, serta metode yang mereka gunakan untuk menjaga kesehatan mental. Penelitian ini menggunakan desain mixed method, menggunakan data kuantitatif dari Instrumen Strength and Difficulties

Questionnaires (SDQ Goodman) yang diberikan kepada 160 peserta didik berusia 12–18 tahun dengan teknik stratified sampling berdasarkan jenis kelamin dan jenjang kelas. 16 peserta didik dan guru dipilih dengan teknik purposeful sampling untuk wawancara mendalam sebagai data kualitatif. Hasil penelitian menunjukkan bahwa mayoritas peserta didik (79,4%) berada pada kategori normal, 19,4% berada pada kategori borderline, dan 1,3% membutuhkan bantuan. Masalah hubungan teman sebaya memiliki nilai rata-rata terendah (2,46). Peserta didik laki-laki memiliki skor lebih tinggi pada aspek hiperaktivitas (5,39), sedangkan kesulitan emosional lebih umum ditemukan pada peserta didik perempuan (4,40). Terdapat lima faktor yang memengaruhi kesehatan mental, yaitu kemampuan adaptasi, keterampilan sosial, dukungan keluarga, dukungan guru, serta keimanan. Mereka menjaga kesehatan mental dengan memiliki teman, menikmati kehidupan dan aktivitas di Pondok Pesantren, serta memperkuat keyakinan agama dan melaksanakan kegiatan keagamaan. Penelitian ini menegaskan pentingnya dukungan psikologis yang diberikan secara bertahap sesuai dengan kebutuhan berdasarkan jenis kelamin dan tingkat kelas. Integrasi nilai agama dan dukungan sosial juga penting dalam meningkatkan Kesehatan mental di Pondok Pesantren.

Kata kunci: dukungan psikologi, kesehatan mental, mixed-method, pondok pesantren, strategi koping

#### Introduction

Based on WHO reports, 1 in 7 teenagers aged 10-19 years, eperience mental health problems such as depression, anxiety and abnormal behavior (WHO, 2024). As the consequence, Physical, emotional, and social changes in teens raise their risk of mental health issues. The World Health Organization defines health as the state of an individual who is physically, mentally and socially healthy, not merely the state of being free from disease and infirmity. A person is said to be mentally healthy, with the ability to adapt in his environment well. Adversely, mental unhealthy means a condition where the individual has not been able to adapt and has problems that interfere with his daily life (Payton, 2009; Nurbaiti, 2020).

Many studies have found that teenagers with good mental health tend to have the ability to overcome personal problems, have positive relationships with other people, and be successful in learning. They will later develop into adults who are confident and able to make positive and significant contributions to the world (Patel et al., 2007). Teenagers' Mental health significantly affects the well-being and productivity of a nation (Schlack et al., 2021). Its impact extends across many aspects of the country's public health, economic performance, education, social stability, etc (<u>De Oliveira et al., 2023</u>). The mental health status of adolescents has a significant and meaningful contribution to the development of society. Those who are raised in nurturing environments tend to thrive in multiple aspects of their lives emotionally, socially, academically, and even economically (Blum et al., 2022). A nurturing environment provides a strong foundation for healthy development, resilience, and the ability to contribute positively to society which potentially enhances adolescents' development and maturation, thus becoming the country's highest human resources (Merrick et al., 2020). While the physical maturation process usually occurs quickly during adolescences, psychological maturation completes the integration of body and soul elements to improve their well-being and quality of life. Adolescents with a predominance of mental health illnesses might set off a host of unfavorable situations, including anxiety, depression, and even the formation of psychotic diseases. According to studies, a large number of young people need mental health care from the school system, particularly from counselors, administrators, and instructors to include some preventive measures and risk management strategies in schools that may have an impact on students' mental health (Patel et al., 2007).

In Indonesia, the mental health of students is also an increasingly important issue, especially as mental pressures related to education, societal expectations, and the rapid pace of modernization, that affect the younger generation. One of the Islamic educational institutions in Indonesia that urge to develop and maintain its students' mental health is Pondok Pesantren, or called as Islamic boarding schools. Based on the Indonesian National Education System No. 20 article 30 of 2003 concerning religious institutions, the increased number of religious educational institutions also become the focus of the nation, especially in their provision of life balance towards the students' growth and development, not only in their

education but also in their significant characters building (<u>Undang-Undang (UU) Nomor 20 Tahun 2003</u> <u>Tentang Sistem Pendidikan Nasional</u>, 2003).

Pondok Pesantrens, are the religious institutions where all students aged between 12 and 18 years live and study together for 24 hours. It plays a significant role in shaping the country's educational and social landscape. These institutions not only provide religious education but also contribute to the personal development of students. As a school and residence for students or santri (the term for students studying at Pondok Pesantren), Pondok Pesantrens serve as a highly assured place and emphasize the concept of safety measure, it supports the awareness of students' mental health, and it assures the well-being of the students living in nurturing environments, away from home. In Pondok Pesantrens, students learn to live independently and adapt to the boarding school environment, which is different from the home environment. Some activities and rules must be obeyed. Differences in background and adaptability can result in some students experiencing difficulties, feeling restless, anxious, afraid, uncomfortable, isolated, which lead to school's withdrawal (Samsudin et al., 2024). Therefore, it is essential to know the mental health condition of students living in Pondok Pesantren to early detect and identify the signs of mental health problems experienced by the students. Living away from their families means that students are in need of support, to live in conducive Pondok environment, from friends, teachers and other immediate people in the Pondok Pesantren. It is imperative for the Pondok Pesantren to integrate mental health education for the students or santri, providing them with access to counseling services, fostering open communication, and creating a balanced, supportive environment, that helps ensure students thrive not only academically and spiritually, but also emotionally and mentally.

Although there are some studies related to adolescents' mental health, research that explores the mental health conditions of students in Pondok Pesantrens is still limited. The present study aims to identify the condition of students' mental health focusing on five dimensions of mental health problems: prosocial, hyperactive, emotional, behavioral, and peer problems. It also explores factors that influence the mental health of students and their resilient coping skills to maintain their mental health living in Pondok Pesantren. An explanatory sequential mixed method was administered to gain comprehensive perspectives and analysis of mental health among students and to identify the need for psychological services and guidance that can support their mental health at Pondok Pesantren.

#### Literature Review

#### Mental Health

The dynamic growth of the adolescents is when the connection between their physical and mental health is integrated which occurs at the beginning of their 12-18 years of age; in Islam, it is called as *Baligh*. The physical changes that occur during this period affect cognitive, emotional, social and moral development. Physically, teenage boys have more muscle and facial hair while teenage girls start menstruating. Cognitively, teenagers start to think more logically and abstractly, as what has been referred to formal operational thinking in Piaget's Cognitive Development theory. They start to acquire the ability to reason logically, make decisions, and solve problems. Teens occasionally experiment with various personas, pursuits, and actions in an effort to forge their own identities. They strive to have positive self-values and a deeper understanding of themselves in order to attain their virtue. On the other hand, an identity crisis may arise if they feel that they do not comprehend who they are or that they have unfavorable opinions about themselves (Swanson & Edwards, 2010). In addition, on the social side, they spend more time with peers. Adolescents are also faced with various events and conditions in their daily lives, both normative, such as school assignments or peers, as well as non-normative events, such as violence and bullying. These normative and non-normative events can make teenagers stressed and can cause mental health problems, such as depression (Swanson & Edwards, 2010).

Previous research revealed that teenagers in high school with mental health problems had difficulty carrying out daily activities and low academic achievement (<u>Rothon et al., 2009</u>), and in some cases is associated with ideas of self-harm (<u>Patel et al., 2007</u>). Therefore, more attention must be paid to the

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mental health conditions of adolescents because the effects of mental health on adolescents tend to last into adulthood. According to the Indonesian Central Bureau of Statistics, the number of youth in Indonesia in 2024 is around 64.22 which means that around 20% of the total population in Indonesia are teenagers (Badan Pusat Statistik, 2024).

A large survey from the Global School-Based Student Health Survey (GSHS) project conducted jointly by the Indonesian Ministry of Health, Indonesian Ministry of Education, and WHO on 3,116 Indonesian students aged between 13-16 years in 49 secondary schools regarding mental health conditions found that 8.6% of teenagers reported feeling lonely while 7.7% of them reported feeling worried and unable to sleep at night. Apart from that, around 20-22% of teenagers say they often feel sad and hopeless, so they stop carrying out daily activities (WHO, 2023). Additionally, it was shown that the majority of Indonesian teenagers lack the knowledge and understanding necessary to deal with mental health issues since stigmatization of those who have mental health issues paints them in a negative light. In this study, the researcher uses the term mental health because it discusses the balance and imbalance conditions of adolescents over a certain period of time that influence thinking, mood, and behavior, especially in *Pondok Pesantrens*.

#### Pondok Pesantren

The term Pondok literally comes from the Arabic word "funduq" meaning simple house, and by extension means Islamic religious boarding school (Denny, 1995). Pondok Pesantrens can be found in several Islamic countries and are usually called "Pondok" in Southern Thailand and Malaysia, as well as "madrasah Islamia" (madrasas) in India, Pakistan, and some Arab countries. While Pesantren is most frequently used in Indonesia, particularly in Java, Pondok is also utilized in Malaysia and Southern Thailand. Sometimes, the two terms are combined as "Pondok Pesantren" to clarify that the educational institution refers to "traditional Islamic boarding school and not just religious schools (like more modern madrasas)" (Denny, 1995). According to K.H Imam Zarkasyi as stated in (Zarkasyi, 2005) mentioned that Pondok, Pesantren, and Pondok Pesantren are synonymous since these terms refer to Islamic educational institutions that have a boarding or dormitory system where the central figures of the institution (as teachers, educators, and advisors) is a kyai, the central element is the mosque, and is based on Islamic teachings which shape the activities of the santri.

Although types of Pondok Pesantren may vary from one another, it is Islamic educational institution that has five characteristics; most of the students (called as *Santri*) and teachers (called as *Ustadz/ah*) are staying within a Pesantren complex like a boarding school, studying Islamic books (some are Arabic texts known as *kitab kuning*), and mostly lead by the *kyai* (leader) or foundation (<u>Dhofier</u>, 1999). The pedagogical ideals of Pondok Pesantrens include intellectual, moral and character aspects where students are brought closer to God as stated by Zamakhsyari Dhofier that,

Education in Pondok Pesantrens does not seek.... (only) to fill students' minds with information, but to improve their morals, educate their souls, spread virtue, teach modesty, and prepare students for a sincere and holy life. Every student is taught to value religious ethics above all else. A student's goal in education should not be to gain power, money, or glory; learning is an obligation and devotion to Allah (Dhofier, 1999).

In the early development of Pondok Pesantrens in Indonesia, Pondok Pesantrens were traditionally taught almost exclusively religious teachings and were training places for religious leaders (<a href="Dhofier, 1999">Dhofier, 1999</a>; <a href="Lukens-Bull, 2010">Lukens-Bull, 2010</a>). Currently, Pondok Pesantren teaches general knowledge, has been recognized as an educational institution based on the Indonesian National Education System No. 20 article 30 of 2003 concerning religious institutions (<a href="Undang-Undang (UU) Nomor 20 Tahun 2003 Tentang Sistem Pendidikan Nasional, 2003">Pendidikan Nasional, 2003</a>), and has become an increasingly popular choice for Indonesian parents over the last decade (<a href="Kementerian Agama, 2024">Kementerian Agama, 2024</a>).

Psychological well-being and mental health conditions among Pondok Pesantren students have been the focus of several studies. Some factors that contribute positively to mental health in Pondok Pesantrens

include character and moral development (Izfanna, 2023; Izfanna & Hisyam, 2012), a curriculum that focuses on Islamic religious education (Noviana, 2018), and social support, especially peers (Lubis & Devin, 2023). However, one study found that students attending Pondok Pesantrens were more vulnerable to mental health risks compared to those in public schools, with symptoms of Post Traumatic Stress Disorder (PTSD) and depression more frequently experienced by students at boarding schools (Prasetyo et al., 2023). One thing that can cause depression in Pondok Pesantrens is bullying among students, which causes long-term negative effects such as decreased self-esteem, trauma and anxiety. Prasetyo et al. (2023) also found that social isolation, such as living far from family and friends, limited social interaction in a boarding school environment, or lack of social skills can lead to feelings of loneliness and isolation, which can contribute to problems in mental health. Apart from that, parental pressure to attend Pondok Pesantrens or the high academic pressure and competitive environment at Pondok Pesantrens can also contribute to mental health problems (Aisyaroh & Ediyono, 2023). The references above explain the mental health conditions of students in Pondok Pesantrens and highlight the importance of addressing mental health problems in this population.

The context of this research is *Pondok Pesantren Darunnajah*, one of the largest Pondok Pesantrens in Indonesia, which was found in 1942 by K.H Abdul Manaf Mukhayyar, K.H Kamaruzzaman, and K.H Mahrus Amin. The education and teaching process applies the *Tarbiyyatul Mu'allimin wal Mu'allimat Al-Islamiyyah* (TMI) system, which has 6 class levels equated with the Junior High School and Senior High School in Indonesia (Manaf, 2022). This Pondok Pesantren based on Islamic values aims to educate the *Santris'* character either in school or boarding (Izfanna & Hisyam, 2012) as stated in its vision and mission:

The aim and purpose of the Pondok is to educate the *ummah* towards becoming ideal Muslim thinkers who are knowledgeable, *akhlaqul karimah* (good-character), and *tafaqqah fiddin* (devoted to the religion of Allah) (Manaf, 2022).

Adolescents with mental health condition are particularly vulnerable to stress, anxiety, fear, discrimination, stigma, educational difficulties, risk-taking behaviours etc., which is potentially identified among students in pondok pesantren. Therefore, the researcher intended to focus on Pondok Pesantrens Darunnajah due to the increased number of cases among students after the pandemic in 2022, which impacted their mental health conditions (Darunnajah Directorate of Students Council, 2022). This research aimed to investigate the mental health conditions of students, contributing factors to the occurrence of their mental health issues, and the resilient coping strategies to maintain the mental health of students at Pondok Pesantren.

#### **Methods**

This study utilized an explanatory sequential mixed method design to include quantitative questionnaire and qualitative interviews. A total of 160 students, aged 12-18 years who study at Pondok Pesantren Darunnajah were selected using stratified sampling based on 4 age groups (classes 1, 3, 4, and 6 TMI) and gender (boys and girls). 16 students were purposefully selected representing the lowest, medium, and highest score of SDQ, interviewed, and analyzed through thematic analysis. In addition, 8 ustadz (male teachers at Pondok Pesantrens) and 8 ustadzah (female teachers at Pondok Pesantrens) were selected using purposeful sampling techniques, and interviewed separately. Teachers and students were informed about the consent and aims of the study.

For the quantitative assessment, the instrument used in this research was the Strengths and Difficulties Questionnaire (SDQ). This is a brief mental health and behavioral screening questionnaire about children and adolescence aged 4-17 years. It is widely used in many countries (Arman, 2012; Istiqomah, 2017) and available in several versions to meet the needs of researchers, doctors and educators. This research used the Indonesian version of the SDQ with its reliability and validity tested for its prominent psychometric use (Istiqomah, 2017). The instrument is comprised of five dimensions: emotional difficulties, behavioral problems, hyperactivity/inattention scale, and peer problems scale. In addition to

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being categorized scores, SDQ scores can also be employed as continuous variables. Scores were classified as abnormal (20–40), borderline (16–19), and normal (0–15). After an introduction from the researcher, participants completed the paper-and-pencil questionnaire, then submitted to the researcher. The quantitative data was analyzed through descriptive and inferential statistics to investigate the mental health of the students and differences based on gender and age group (class). All students' answers were coded, entered and analyzed using SPSS.

In addition, qualitative assessment, mainly based on interviews, was conducted to 6 students and teachers of Pondok Pesantren Darunnajah to obtain their views and experiences regarding the mental health of *santri*, factors contributing to their mental health, and way in maintaining their mental health. The researcher also decided to interview the teachers in order to obtain data triangulation and to enrich the understanding of the students' questionnaire results. The teacher's interview was expected to provide an additional perspective on students' learning behavior and motivation from the educator's point of view. In this way, the findings would become more comprehensive and valid, as the teacher could offer contextual information and explanations that might not emerge from the students' responses alone. The interviews were semi-structured with items referring to (1) the mental health of students, (2) factors that influence the mental health of students, and (3) the methods used to maintain the mental health of teenage students at Pondok Pesantren Darunnajah. The interviews were recorded with the consent of the interviewees, and then transcribed. The researcher analyzes using thematic framework analysis methods and summarized the main contents according to the purpose of the research. Member checking and peer debriefing were also been administered.

## **Results and Discussion**

The present study is conducted to explore the mental health conditions of a students, factors contributing, and methods used to maintain the mental health of students at Pondok Pesantren Darunnajah.

#### Mental Health of Pondok Pesantren Students

The results of the questionnaire showed that the majority of the students were categorized in the normal range from 0 to 15. It showed 79.4% of students at Pondok Pesantren Darunnajah were in the normal category, 19.4% were in the borderline category, and 1.3% were identified in the needing guidance category. It means that mental health among students at Pondok Pesantren Darunnajah is still classified as normal. This is related to the results of the interview that all respondents consisting of 8 students said they were comfortable going to school and living at the Pondok Pesantren, even 2 of them felt more comfortable living at the Pondok Pesantren than at home because they preferred living with friends (S B1J, S K6F). Only 1 respondent, a new student who had only lived for 6 months, felt uncomfortable when there were problems, especially those related to friends (S S 1J). In addition, all teachers also agreed that most of the students feel comfortable living in Pondok Pesantren. 2 of the teachers mentioned that few of new students need more time in adapting with the conditions of being far for family, their habits at home, as well as the regulations at the Pondok Pesantren (T J and T M). Having problems, most of them with other students, and their incompetency on how to solve the problem sometimes make them feel uncomfortable (T M).

From the questionnaire the researcher analyzed students' mental health related problems. Among the five dimensions of mental health problems identified in the Strengths and Difficulties Questionnaire (SDQ), the prosocial problems scale related to helping behavior had the highest average score of 6.28 (see **Table 1**).

**Table 1.** Students Mental Health based on Gender

	Emotiona	Hyperactivit	Conduct	Peer	Prosocial
Gender	1 Problem	y/Inattentive	Problem	Problem	Problem
Male	3.46	5.39	3.66	2.83	7.84
Female	4.40	4.46	3.19	2.10	4.71
Total	3.93	4.93	3.43	2.46	6.28

In contrast, the lowest mental health problem dimension is peer problems, 2.46. This result in line with the interviews with students and teachers that students at Pondok Pesantren Darunnajah used to have close relationships with their friends and spend most of their time together. Even though there are sometimes small fights and misunderstandings, they influence each other. Since they live together, they can easily observe each other's character, attitude, and behavior. Friends are the most influential factor because students spend 24 hours for seven days with their friends, study and socialize, live together and make friends with other students, and try to organize their own lives (S B 1J, S Af 4G, S Sy 3G, S K 6F). For example, living together for a long period of time with other students from different backgrounds stimulates them to develop close and intimate relationships (EM, 34). These results support the statement in Patel et al. (2007) that schools have protective factors for students' mental health, one of which is a sense of belonging, positive peer influence.

Furthermore, at this Pondok Pesantren, all students must carry out their daily duties and activities. There are practical religious tasks such as carrying out congregational prayers in the mosque, reading the Qur'an after Fajr, Asr and Maghrib prayers, participating in religious discussion, and practicing Islamic values included as part of the Pondok Pesantren habits. This stimulates and develops their positive behavior as recognized by Zakiyah Darajat's thoughts that the establishment of worship or practical Islamic tasks must be included in education to achieve good behavior and character (Arroisi et al., 2022; Mawangir, 2015; Rochanah, 2019; Syahid, 2016). This may explain the reason for the low conduct problem scores among them.

**Table 4.1** also showed that there are similarities between male and female students where the highest average is in the prosocial dimension (7.84 and 4.71), while the lowest average is in problems with peers (2.10 and 2.83). In addition, male students have a higher average in four dimensions, namely hyperactivity problems (5.39) and behavioral problems (3.66), peer problems (2.83), and prosocial problems (7.84). Meanwhile, female students have higher levels of emotional problems (4.40). These findings are similar to the earlier research conducted by <a href="Utama (2014">Utama (2014</a>) on "Mental health and community violence among teenagers in Indonesia; school-based study" which found that adolescent girls were more likely to exhibit psychological distress (the most common type of emotional problems) than adolescent boys. According to 4 female students, they sometimes felt anxious, uneasy, or chose to be alone when they had problems, especially personal problems or problems related to friends. As one respondent said:

"Sometimes it suits mood. Sometimes when she's feeling sad, instead of joining friends, she wants to be alone. If you're thinking about something, to make yourself feel better, you just want to be alone... For example, if you're alone, it's just because you're having problems with yourself, so you can just be alone. "If you have problems with friends, it's quite rare." (S K 6F)

Table 2. Students Mental Health based on Class

	Emotional	Hyperactivity	Conduct	Peer	Prosocial
Class	Problem	Problem	Problem	Problem	Problem
Class 1	4.05	4.37	3.35	2.25	4.52
Class 3	4.02	5.60	3.25	3.33	7.80
Class 4	4.38	5.82	4.00	2.05	8.15
Class 6	3.29	3.95	3.12	2.22	4.71

In addition, based on the class level, the results of the questionnaire analysis in **Table 4.2** above showed that in all classes the most occurrent mental health related problems are in prosocial problems (4,52, 7.80, 8.15, and 4.71), whereas the highest score is in class 4 (8.15). This result is, somewhat, not in line with the opinions of all respondents, teachers and students. They stated that the students in Pondok Pesantren tend to help one another especially with their roommates or students in the same class level. The more they closer, the more they easily help one another. One of the participants said that "sometimes we reluctant to help because we don't know them well or because the way the asked for help is not wise..." (S N 3G).

Among the classes. emotional problem is high in class 4 (4.38), conduct problem is in class 4 (5.82) whereas peer problem is high in class 3 (3.33). Thus, the class level that the Pondok Pesantren need to provide more psychological supports are class 3 (equal to class 3 Junior high school) and class 4 (equal to class 1 Senior high school).

### Factors Contributing to Students' Mental Health

Based on the result of the study, there were five factors mostly contributing the mental health; students' adaptability and comfortability living in Pondok Pesantren, friend, family support, teacher support, and religious belief. Since they live together, they can easily observe each other's character, attitude, and behavior. Friends are the most influential factor because they spend their time together, study, live, make friends with other students, try to organize their own lives (S B 1J, S Af 4G, S Sy 3G, S K 6F) and stimulates them to develop close and intimate relationships (EM, 34). Sense of belonging and positive peer influence become protective factors for students' mental health (Patel et al., 2007). However, 2 teachers stated that the Pondok Pesantren also has to provide awareness on the important of social skill, especially for new students, as well as awareness on the negative side of bullying (T J and T P). Prasetyo et al. (2023) mentioned that bullying among students can cause depression, also lack of social skill can lead to feeling loneliness and isolation.

Furthermore, teacher and parental support, and pressure to attend Pondok Pesantrens or the high academic pressure and competitive environment at Pondok Pesantrens can also contribute to mental health problems (Aisyaroh & Ediyono, 2023). Wheras the religious factor becomes the protective factor that contribute positively to students' mental health in Pondok Pesantrens include character and moral development (Izfanna, 2020, 2023). Congregational prayers in the mosque, reading Al-Qur'an after Fajr, Asr and Maghrib prayers, participating in religious lessons and activities stimulates as well as develops their positive behavior (Arroisi et al., 2022).

## Methods on Maintaining Students' Mental Health

The findings showed that the students maintained their mental health by having friends, enjoying their lives and activities in Pondok Pesantren, also by enhancing their religious beliefs and performing religious activities. In Islam, mental health is an essential aspect of a Muslim's life. The Al-Quran and Hadith function as the primary sources that discuss relationships with Allah, relationships with people, individual rights and obligations, and cleansing of the health (spiritual). Islamic principles play a significant role in mental treatment, with practices such as prayer, remembering Allah, reading the Qur'an, fasting, and pilgrimages (Arroisi et al., 2022; Koenig & Al-Shohaib, 2017; Mehraki & Gholami, 2017). In addition, students used to share their problem with friends, consult with the teachers (dorm teachers, class supervisor), or try to solve it by themselves. In Pondok Pesantren Darunnajah some

students used to talk about their daily problems with their teachers (especially their dorm/supervisor teachers), there is also Student Department Council and Guidance and Counseling that used to give them guidance on how to live in Pondok Pesantren (T M, T J, and T P).

#### Conclusion

This research aims to determine the mental health of students at one of the private Pondok Pesantrens in Jakarta, Indonesia using a mixed method sequential design. Goodman'sy Strengths and Difficulties Questionnaire (SDQ), interviews, observations, and documents were conducted in one context. Therefore, these findings only apply to students studying at Pondok Pesantren Darunnajah. However, this research can be adapted and used as initial data regarding the mental health situation in Pondok Pesantrens or Islamic Boarding Schools, which have similar characteristics.

The research results showed that 79.4% of students at Pondok Pesantren Darunnajah were in the normal category, 19.4% were in the borderline category, and 1.3% were identified in the needing guidance category. Prosocial problems have the highest average score of 6.28 among the five dimensions of mental health, whereas the lowest mental health dimension is peer problems, 2.46. Between genders, the highest average is in the prosocial dimension (7.84 and 4.71), while the lowest average is in problems with peers (2.10 and 2.83). In addition, female students have higher levels of emotional problems (4.40) than male. There are five factors mostly contributing the mental health; students' adaptability and comfortability living in Pondok Pesantren, friend, family support, teacher support, and religious belief. The students maintained their mental health by having friends, enjoying their lives and activities in Pondok Pesantren, also by enhancing their religious beliefs and performing religious activities.

Based on these findings, researchers suggest that Pondok Pesantrens should be aware of differences in the mental health conditions of students based on age group and gender. This may help Pondok Pesantren to provide the most appropriate mental health services and support. Improving mental health in Pondok Pesantrens where students live 24 hours a day can maximize and strengthen students' well-being. Furthermore, the findings may inform the Ministry of Religious Affairs in developing mental health frameworks for Islalmic educational institutions.

## **Limitation & Further Research**

T This study is an explanatory sequential mixed method case study on students' mental health conducted in Pondok Pesantren Darunnajah. This case study is subject to several limitations. First, the study was confined to a specific Pondok Pesantren context, which constrains the transferability of the findings to other Pondok Pesantren or Islamic boarding schools with differing organizational structures or cultural dynamics. Second, the sequential design implies that the qualitative inquiry was guided by the quantitative results; hence, any measurement or sampling limitations in the initial phase may have influenced the scope and depth of the subsequent analysis. Finally, as a case study, the findings aim to provide contextual understanding rather than statistical generalization.

It is hoped that this research can be followed up by creating a psychology service program that can improve the mental health of students. In addition, in the future it is necessary to expand the research to include other Pondok Pesantrens and explore factors related to mental health.

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