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Making Sense of Mental Health Through Islamic Values: Experiences of Biology Education Students

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Keywords :

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ABSTRACT

Student mental health is a pressing concern, yet approaches to addressing it have given limited consideration to religious values as psychological resources. This study explores how Biology Education students make sense of mental health, identifies the Islamic values that shape their interpretations, and describes the practices they use to maintain psychological well-being from an Islamic psychology perspective. A qualitative approach with a descriptive phenomenological design was employed. Data were collected using an open-ended questionnaire administered through Google Forms to ten second-semester students purposively selected according to specified criteria from a population of 112 students. Data were analyzed using Miles, Huberman, and Saldana's interactive model, comprising data condensation, data display, and conclusion drawing. The findings indicate that students understand mental health as an active capacity to regulate emotions and withstand pressure, rather than merely the absence of mental disorder. Academic pressure is interpreted as a trial from Allah that offers opportunities for growth. Patience, trust in Allah, gratitude, and sincerity are perceived as psychological resources. Students maintain their well-being through a combination of ritual worship, social support, and physical recovery. This study contributes to the development of mental health programs grounded in Islamic values that are better aligned with the needs of Muslim students in Indonesia.

Kata Kunci :

Kesehatan Mental; Mahasiswa; Psikologi Islam.

ABSTRAK

Kesehatan mental mahasiswa merupakan isu mendesak, tetapi pendekatan untuk mengatasinya masih kurang mempertimbangkan nilai-nilai agama sebagai sumber daya psikologis. Penelitian ini mengeksplorasi bagaimana mahasiswa Pendidikan Biologi memaknai kesehatan mental, mengidentifikasi nilai-nilai Islam yang membentuk pemaknaan tersebut, serta mendeskripsikan praktik yang mereka lakukan untuk menjaga kesejahteraan psikologis dari perspektif psikologi Islam. Penelitian ini menggunakan pendekatan kualitatif dengan desain fenomenologi deskriptif. Data dikumpulkan melalui kuesioner terbuka menggunakan Google Forms yang diberikan kepada sepuluh mahasiswa semester dua yang dipilih secara purposif berdasarkan kriteria tertentu dari populasi sebanyak 112 mahasiswa. Data dianalisis menggunakan model interaktif Miles, Huberman, dan Saldaña, yang meliputi kondensasi data, penyajian data, serta penarikan kesimpulan. Hasil penelitian menunjukkan bahwa mahasiswa memahami kesehatan mental sebagai kemampuan aktif untuk mengelola emosi dan menghadapi tekanan, bukan sekadar ketiadaan gangguan mental. Tekanan akademik dimaknai sebagai ujian dari Allah yang memberikan kesempatan untuk berkembang. Kesabaran, tawakal kepada Allah, rasa syukur, dan keikhlasan dipandang sebagai sumber daya psikologis.

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Mahasiswa menjaga kesejahteraan psikologis melalui kombinasi ibadah ritual, dukungan sosial, dan pemulihan fisik. Penelitian ini memberikan kontribusi bagi pengembangan program kesehatan mental berbasis nilai-nilai Islam yang lebih sesuai dengan kebutuhan mahasiswa Muslim di Indonesia.

INTRODUCTION

Mental health has become a serious health concern worldwide. One in eight people, or approximately 970 million individuals, live with a mental disorder. Anxiety and depression are the most common conditions, and 82% of those affected live in developing countries (Basrowi et al., 2024). In Indonesia, the 2018 Basic Health Research survey recorded more than 19 million people aged over 15 years experiencing mental and emotional problems, with a depression prevalence of 6.1% (Kemenkes RI, 2018). Mental health conditions were recorded as the second-largest contributor to the loss of healthy life years, at 1,304 cases per 100,000 population, exceeded only by cardiovascular disease. This situation is compounded by Indonesia having only 0.3 psychiatrists per 100,000 population, far below the global average, leaving many affected individuals unable to access the services they need (Basrowi et al., 2024).

University students are among the groups most vulnerable to mental health problems. The Indonesia National Adolescent Mental Health Survey (I-NAMHS) reported that one in three Indonesian adolescents, equivalent to 15.5 million individuals, had experienced mental health problems during the preceding 12 months (National Adolescent Mental Health Survey [I-NAMHS], 2022). A study of 666 first-year students at Poltekkes Tasikmalaya found that 41.14% experienced moderate depression and 34.53% experienced moderate anxiety. The greatest sources of pressure were concerns about the future, including graduation and employment (76.9%), followed by examinations and assessment (76.6%) and coursework demands (70.3%) (Gustiadi & Lazuardi, 2025). In a study of 227 students at Universitas Sebelas Maret, Setyanto found that 54.7% experienced depressive symptoms and 86.8% experienced high levels of anxiety (Setyanto, 2023).

Although research on this topic continues to expand, several gaps remain. First, most existing studies measure depression and anxiety quantitatively without exploring how students themselves interpret these conditions within the framework of their faith (Che Rahimi et al., 2021; Saleem et al., 2021; Setyanto, 2023). Second, discussions of the importance of trust in Allah, patience, and gratitude remain largely literature-based, leaving uncertainty about how students actually apply these values in everyday life (Aprilianti, 2024; Gumiandari et al., 2022). Third, relatively few studies explore the lived experiences of specific groups, such as Biology Education students whose training in scientific thinking coexists with religious commitments (Anlı, 2025). Fourth, Basrowi recommended integrating mental health awareness into culturally appropriate educational curricula, while Subu called for further research on stigma and students' understandings of mental health on Indonesian campuses (Basrowi et al., 2024; Subu et al., 2024). These recommendations have received limited follow-up through in-depth qualitative research.

Accordingly, this study has three objectives. First, it explores how Biology Education students interpret mental health, including stress, anxiety, personal resilience, and psychological well-being, within the framework of faith and Islamic values. Second, it identifies the Islamic values that actually influence students' understandings of mental health. Third, it describes what Biology Education students do to maintain and enhance their psychological well-being from an Islamic psychology perspective. The study is expected to address gaps in the literature and contribute to culturally and religiously appropriate mental health programs in Islamic higher education in Indonesia.

LITERATURE REVIEW

Student Mental Health and Its Influencing Factors

Similar patterns have been observed in other Muslim-majority countries. Che Rahimi reported that 36% of students at Universiti Sains Malaysia experienced psychological disturbances during the COVID-19 pandemic, a proportion higher than that in the general population (Che Rahimi et al., 2021). In a survey of 1,525 students in Pakistan, Saleem found that more than 60% experienced depression and more than 55% experienced anxiety at varying levels (Saleem et al., 2021). These cross-national findings indicate that mental health problems among Muslim students occur across multiple settings and require appropriately targeted responses.

Student mental health problems arise not only from academic pressure but also from various other factors. Campbell found that loneliness and social disconnection were the strongest factors influencing mental health among students in the United Kingdom, followed by childhood trauma and difficulties with adjustment (Campbell et al., 2022). Six major factors affecting Indonesian students' mental health are undergraduate theses or final projects, financial problems, friendships, family, organizational activities, and romantic relationships (Setyanto, 2023). Brooks found that young Indonesians tend to view mental disorders as signs of personal weakness, which discourages them from seeking help (Brooks et al., 2022).

Islamic Values as Psychological Resources

Most mental health programs in Islamic higher education tend to draw on Western psychological models, which often do not align with Muslim students' beliefs (Jamaluddin et al., 2026). Western psychology tends to focus on the self, whereas spirituality is a primary source of support for Muslim students facing pressure (Aprilianti, 2024). When religiosity was included as a factor in a study, the model's explanatory power for student mental health increased from 18% to 57% (Saleem et al., 2021). Drawing strength from religion was associated with greater protection against psychological disorders (Che Rahimi et al., 2021). Programs based on Islamic values, including practices of gratitude, patience, trust in Allah, and remembrance of Allah, consistently improve students' psychological well-being (Anlı, 2025). These findings indicate that religiosity is a central component of mental health support for Muslim students.

An individual's health is understood through three dimensions: the intellect as a safeguard against uncontrolled desires, the heart as the center of spiritual life shaping faith and moral character, and the soul as the source of inner life (Zulkipli et al., 2022). The Quran describes several states of the human soul, ranging from the soul inclined toward wrongdoing, through the self-reproaching

soul, to the tranquil and peaceful soul. These states are directly related to an individual's mental condition (Jamaluddin et al., 2026). The Islamic principle of balance emphasizes that mental disorders often arise from imbalances among the spiritual, physical, social, and intellectual dimensions of life. Psychological resilience is understood as both a psychological capacity and a reflection of faith. Values such as patience, trust in Allah, gratitude, contentment, sincerity, and repentance correspond to capacities for coping with pressure, including emotional regulation, optimism, self-efficacy, and finding meaning in life (Gumiandari et al., 2022).

These values help students address academic pressure. Trust in Allah can reduce anxiety about outcomes; patience helps students persevere and interpret failure as part of learning; and gratitude encourages a more positive outlook on difficulties (Aprilianti, 2024). Regular worship, including ritual prayer, remembrance of Allah, and Quran recitation, has also been shown to promote calm and reduce pressure and fatigue. These findings align with the positive psychology conception of well-being encompassing positive emotions, engagement, meaningful relationships, meaning, and accomplishment, which are also consistent with Islamic values (Anlı, 2025).

METHODS

This study employed a qualitative approach with a descriptive phenomenological design to explore how Biology Education students make sense of mental health through Islamic values. This approach was selected because the phenomenon cannot be adequately understood through numerical data alone and requires exploration of participants' experiences and perspectives (Creswell & Poth, 2018).

The study population comprised all second-semester Biology Education students across three classes: Class A with 37 students, Class B with 38, and Class C with 37, totaling 112 students. Ten respondents were selected through purposive sampling. The criteria included having experienced pressure during their studies, willingness to provide open responses, and representation of different genders and classes. Ten respondents were considered adequate for a phenomenological study prioritizing depth of data over statistical representativeness (Moser & Korstjens, 2018).

Data were collected through an open-ended questionnaire administered using Google Forms. This format enabled respondents to express their experiences and perspectives more freely in writing, including personal matters that might be difficult to disclose directly (Opdenakker, 2006). The researchers developed focused questions and provided guidance during completion to obtain responses of sufficient depth for the study objectives.

Data were analyzed using Miles and colleagues' interactive analysis model, comprising data condensation, data display, and conclusion drawing (Miles et al., 2014). During condensation, respondents' answers were summarized and focused on information relevant to the research objectives. The data were then presented thematically to facilitate identification of response patterns. Finally, conclusions were drawn from the most prominent themes across the dataset.

RESULTS

The results are organized around the three research objectives: interpretations of mental health, Islamic values shaping those interpretations, and practices for maintaining psychological well-being. Additional findings concerning artificial intelligence and the need for solitude are presented based on respondents' answers.

Students' Interpretations of Mental Health within a Framework of Faith

Conceptual Understandings of Mental Health

The first question explored students' initial associations with the term mental health. Most respondents defined it as stability of thoughts and feelings and the ability to regulate emotions in everyday life.

Respondent B provided the most comprehensive definition, encompassing the ability to manage stress, maintain emotional stability, think positively, understand oneself, and interact with others. Respondent C used an analogy grounded in everyday experience:

> "Just like physical health, mental health also needs care. The key is knowing when to keep going and when to rest without feeling guilty." (Respondent C)

This statement conveys an important principle: taking a break from pressure is a legitimate part of self-care rather than a sign of weakness. Respondent H offered a more concise definition, describing mental health as maintaining healthy and stable thoughts and feelings while navigating life. Respondent J defined it as the ability to withstand mental burdens while avoiding harmful conduct, integrating psychological and spiritual dimensions.

Interpreting Academic Pressure as a Divine Trial

The second question explored students' concrete experiences of pressure arising from academic demands. Eight of the ten respondents reported having experienced significant academic pressure. The dominant interpretation was to view this pressure as a trial from Allah carrying opportunities for growth.

Respondent C provided the most detailed account:

> "Seeing academic pressure as a trial from Allah is a powerful way to persevere. This perspective turns exhaustion into a process of growth and a reminder that students are not walking alone." (Respondent C)

The phrase "not walking alone" reflects the belief that Allah is actively present in the difficulties experienced by His servants. This dimension of support cannot be provided by any human source. Respondent A interpreted substantial academic pressure as a trial from Allah while continuing to make an effort. Respondent E addressed it by personally sharing concerns directly with Allah.

Respondent J offered the most candid and complex account. This student acknowledged that faith could waver when circumstances did not meet expectations, while emphasizing that, in moments of greatest exhaustion, the most comforting place to turn was to Allah through ritual prayer.

> "When I feel exhausted by the world, the most comforting place to share my troubles is with Allah, the Creator, through prayer." (Respondent J)

The Relationship between Mental Strength and Strength of Faith

The third question explored whether mental strength and strength of faith were separate, identical, or complementary constructs. The responses reflected diverse ways of navigating the relationship between psychological and spiritual dimensions.

The dominant view was that the two were distinct but mutually reinforcing. Respondent C expressed this concisely:

> "Mental strength is about controlling yourself, while strength of faith is about surrendering to Him. Together, they make you whole." (Respondent C)

The word "whole" reflects an integrative view of mental health and strength of faith as complementary dimensions. Respondent D described this relationship more cautiously:

> "Having strong faith does not mean that someone will immediately be mentally strong. However, strong faith can gradually help someone develop mental strength, or at least keep them from going too far in doing things that could harm themselves." (Respondent D)

Respondent D's statement avoids a simplistic interpretation. Faith is viewed as a protective factor that prevents poor mental health from developing into more dangerous conditions, rather than as a guarantee of perfect mental health. Respondent G offered a different perspective, defining mental strength as the courage to act and strength of faith as the courage not to fear supernatural phenomena, with courage serving as the common ground between the two.

Islamic Values That Shape Interpretations of Mental Health

Patience as an Active Mechanism of Emotional Regulation

Patience (sabr) was the most universally mentioned value in this study, appearing in the responses of all ten respondents. More important than its frequency was how students understood it: as an active source of strength rather than passive resignation.

Respondent D provided the most detailed account:

> "Patience helps me reassure myself that what I feel now will not last forever. There will be a time when someone moves beyond this phase." (Respondent D)

This statement portrays patience as temporal distancing, the ability to frame suffering as time-limited so that it does not feel permanent (Wilson & Dunn, 2004). Respondent C stated that patience strengthened the mind and reduced susceptibility to stress. Respondent A described it as a source of calm and persistence when facing numerous assignments.

Trust in Allah as Acceptance after Effort

Trust in Allah (tawakkul) was mentioned by seven of the ten respondents in a highly consistent pattern. It always followed maximum effort and was never presented as a substitute for it. Respondent I identified trust in Allah, understood as entrusting everything to Him, as the most

meaningful value. Respondent H stated that it fostered confidence that every difficulty had a way forward.

Respondent D clearly articulated the relationship between effort and trust in Allah:

> "After trying to move beyond a period of academic pressure, it is acceptable to surrender to Allah. But do not forget to keep making an effort and praying." (Respondent D)

Gratitude as a Shift in Perspective on Pressure

Gratitude (shukr) was mentioned by eight of the ten respondents. Respondent E provided the most concrete example:

> "I always feel grateful that I can attend university when I see friends who have been unable to continue their education." (Respondent E)

Sincerity as Willingness to Accept Outcomes

Beyond the three values explicitly addressed in the questionnaire, Respondent G introduced sincerity (ikhlas) without prompting:

> "Being mentally strong means being able to carry on despite considerable pressure. Having strong faith is more about sincerity, doing things with an accepting heart even under considerable pressure." (Respondent G)

Fluctuations in Faith

The fifth question, concerning the state of faith during stress, elicited the most varied and candid responses. Some respondents reported stronger faith, others acknowledged fluctuations, and others openly stated that their faith felt unsettled.

Respondent J provided the most detailed account:

> "Sometimes it grows stronger, and sometimes it wavers. When I feel exhausted by the world, the most comforting place to share my troubles is with Allah. Yet sometimes, in that exhaustion, the joy of faith also wavers because everything I experience seems to fall short of my expectations. That is when a person's faith reaches its lowest point." (Respondent J)

The expression "the lowest point of faith" reflects a degree of intellectual honesty rarely encountered in responses to religious questionnaires. This acknowledgment illustrates the diversity of spiritual experiences that needs to be considered in the analysis. Across the dataset, one respondent admitted that faith often wavered because accumulated assignments delayed prayer, but found that Quran recitation eased anxiety. This account illustrates a dynamic, bidirectional relationship between academic pressure and the state of faith.

Students' Responses to Spiritual Stigma

The sixth question explored students' responses to the view that stress indicates insufficient gratitude or weak faith. All respondents rejected this view for different reasons, while agreeing on one principle: stress is a human experience and cannot be used to measure the quality of a person's faith.

Respondent B stated that stress and anxiety were normal because individuals differed in their capacity to cope with pressure. Respondent D emphasized that someone experiencing psychological distress usually needed support and a listening ear rather than judgment.

Respondent J offered the most critical argument:

> "Stress does not arise because faith is weak or gratitude is lacking; it is simply part of human nature when facing life's problems." (Respondent J)

Across the dataset, one respondent added a strong theological argument: even prophets with profound faith experienced intense psychological distress. This statement challenges spiritual reductionism that equates faith with the absence of negative feelings. Respondent F preferred a more inward approach, choosing not to argue but to act in ways considered best for oneself without disturbing others.

Practices for Maintaining and Enhancing Well-Being from an Islamic Psychology Perspective

Ritual Worship as a Mechanism of Emotional Regulation

All ten respondents mentioned ritual prayer (salat) or remembrance of Allah (dhikr). This consistency reflects the central role of ritual worship in Muslim students' psychological lives.

Respondent A described the effects of worship concretely: thoughts felt lighter and the heart more relieved even when the problem had not immediately been resolved. Respondent B added a sense of increased capacity, reporting greater ability to regulate emotions after worship. Respondent H stated:

> "When I pray or engage in dhikr while feeling stressed, I feel calmer, my thoughts feel lighter, and my heart feels more at ease than before." (Respondent H)

The phrase "than before" deserves attention because it indicates a change experienced as real by the respondent, rather than an abstract sense of calm. Respondent J added a spiritual dimension extending beyond ordinary relaxation:

> "I feel calmer and more relieved, and believe that no matter how difficult life's trials are, Allah is still by our side." (Respondent J)

One respondent described prayer as feeling ordinary, yet still reverent. This suggests that the psychological effects of worship are not uniform and are strongly influenced by the quality of inner attentiveness. Aprilianti (2024) emphasized that worship undertaken with full awareness produces substantially greater psychological effects than mechanically performed worship.

Personal Supplication as Direct Dialogue with Allah

Several respondents described a more personal and spontaneous form of supplication: sharing concerns directly with Allah outside formal prayer times, without a prescribed format or schedule. This practice emerged organically without prompting from the questionnaire.

Respondent I described it simply as walking alone or sharing concerns with Allah. Respondent E explained that personal appeals to Allah always involved addressing Him by name. Respondent

J stated that, at moments of greatest exhaustion, the most comforting place to share concerns was with Allah through ritual prayer.

Social Support Preferences and Gender Patterns

The ninth question explored preferred sources of support when students experienced severe psychological distress. Close friends were the first choice for eight female respondents. Respondents A, B, C, E, H, I, and J mentioned friends or family members as the first people with whom they shared their concerns. Their reasons were consistent: comfort, trust, and emotional accessibility.

A different pattern appeared among male respondents. Respondent G gave the briefest and most direct answer:

> "I prefer to sleep and keep everything to myself." (Respondent G)

Respondent F initially chose to distance themselves from their surroundings, sharing concerns only with a genuinely trusted friend. This pattern became clearer across the dataset. Several male respondents explicitly preferred to resolve problems on their own.

Recreational and Physical Strategies as Complementary Forms of Recovery

Alongside spiritual and social practices, students mentioned various recreational and physical strategies. Respondent H called their parents and engaged in positive activities. Respondent J described personal time involving walking, shopping, and eating favorite foods. Respondent E offered the most varied account: eating favorite foods, listening to music, sharing experiences, and sleeping.

Across the dataset, one respondent described a sequence of recovery: crying first and, once calm, eating desired foods or reading a book. This sequence illustrates two complementary phases: emotional catharsis followed by recovery through enjoyable activities (Bylsma et al., 2008).

Artificial Intelligence as a Space for Sharing Personal Concerns

An unanticipated finding emerged from the dataset. One female student reported choosing to share her concerns with artificial intelligence when experiencing severe psychological distress.

Solitude as a Legitimate Psychological Need

A fairly consistent pattern appeared in the data but has received limited attention in the literature on coping among Muslim students: the need for solitude as a conscious and intentional recovery strategy.

Respondent D described this with self-awareness, choosing to create distance from others and minimize interaction with their surroundings. This choice was understood as a decision to process inner experiences without external social pressure rather than an escape from problems. Respondent G initially chose sleep and keeping feelings to themselves. Respondent I preferred walking alone before eventually sharing concerns with Allah.

DISCUSSION

Interpretations of Mental Health and Academic Pressure

Overall, students' definitions encompass the dimensions proposed in Keyes's (2002) mental health continuum model: emotional, psychological, and social well-being. None of the respondents defined mental health as the absence of mental disorder. All viewed it as an active capacity to manage difficulties and persevere. This understanding aligns with positive psychology, which regards well-being as something actively developed (Seligman, 2011).

In psychology, interpreting pressure as meaningful and purposeful is known as meaning-making and has been shown to correlate significantly with psychological resilience (Park, 2010). Within an Islamic framework, this mechanism has a theological foundation in the concept of ibtila', trials understood as a process of spiritual maturation ordained by Allah for His servants (Quran, Al-Baqarah 2:155–157). Aprilianti (2024) found that this interpretation consistently produced more adaptive responses than fatalistic interpretations.

These varied perspectives align with Keshavarzi and Haque's (2013) integrative model of Traditionally Islamically Integrated Psychotherapy (TIIP), which positions faith as a spiritual, or ruhiyyah, dimension organically connected to emotional, intellectual, and physical dimensions. Jamaluddin et al. (2026) likewise emphasize that mental health cannot be separated from the quality of an individual's relationship with Allah as a fundamental source of meaning.

Islamic Values and the Dynamics of Faith

Theoretically, the psychological functions described by students correspond to distress tolerance in Dialectical Behavior Therapy: the ability to endure emotional discomfort without acting impulsively (Linehan, 1993). Gumiandari et al. (2022) found positive correlations between patience, emotional regulation, and tolerance of frustration among Muslim students.

The psychological function of trust in Allah closely resembles acceptance in Acceptance and Commitment Therapy (ACT): allowing unpleasant experiences to be present without responding destructively while continuing to act according to personally held values (Hayes et al., 2006). Anli (2025) confirmed that tawakkul significantly predicted lower anxiety and higher self-efficacy among Muslim students.

The mechanism described by Respondent E represents downward social comparison: comparing one's circumstances with less favorable circumstances so that what one possesses becomes more meaningful (Emmons & McCullough, 2003). Respondent D extended gratitude to a deeper dimension, suggesting that difficult circumstances might be the fulfillment of prayers offered in the past. This perspective resembles posttraumatic growth, in which appropriately interpreted adversity can become an opportunity for meaningful growth (Tedeschi & Calhoun, 2004).

For Respondent G, sincerity means more than willingness to accept outcomes; it is a way of proceeding without being burdened by demands for particular results. This construct resembles process orientation in psychology, where engagement is driven by satisfaction with the process itself and has been shown to reduce performance anxiety (Dweck, 2006). Sincerity as a

psychological mechanism has received insufficient empirical attention in Islamic psychology and merits further research.

In Islamic tradition, scholars have long acknowledged fluctuations in faith through the concept iman yazid wa yanqusu: faith increases and decreases according to the state of the heart and one's actions. Pargament (2011) describes spiritual struggle as a process that, when effectively addressed, may deepen and strengthen faith over time. The present findings provide empirical confirmation that such experiences are not exceptional but are widely encountered by Muslim students under academic pressure.

Religiously grounded stigma surrounding mental health problems is a major barrier to professional help-seeking among Muslim students (Basrowi et al., 2024; Brooks et al., 2022). Students' ability to question this stigma independently represents valuable social capital for developing campus mental health literacy programs.

Worship Practices and Social Support

From a neuroscience perspective, rhythmic movements in ritual prayer, repeated phrases in dhikr, and regulated breathing during worship activate the parasympathetic nervous system, reduce cortisol levels, and increase serotonin production (Newberg & Waldman, 2009; Che Rahimi et al., 2021). Zulkipli et al. (2022) confirmed that Islamic worship practices consistently correlate with reduced anxiety symptoms and a greater sense of meaning in life.

This practice parallels the intimate relationship with God examined by Pargament (2011): a close personal relationship with Allah, who is understood as unconditionally present and never lacking the capacity to receive concerns. For students reluctant to burden others, it offers a safe space without social consequences. Sabry and Vohra (2013) describe this as a distinctive element of Islamic coping that differentiates it from coping mechanisms in Western psychology.

This pattern reflects restrictive emotionality, a traditional masculine norm that views expressions of emotional vulnerability as threats to male identity (Levant, 2011). Long-term emotional suppression correlates with increased risks of depression and psychosomatic disorders (Hayes et al., 2006). The finding has direct implications for campus mental health programs seeking to engage male students through approaches that do not shame vulnerability.

Campus counselors were rarely mentioned by any respondent as a proactive choice for support. This aligns with Rickwood et al. (2005), who found that young adults generally prefer peers as their initial source of support before turning to professionals. Barriers include social stigma, limited awareness of available services, and the belief that personal problems can be adequately addressed through worship (Subu et al., 2024).

Enjoyable recreational activities are empirically recognized components of cognitive behavioral interventions for improving mood and interrupting negative rumination (Folkman & Moskowitz, 2004). Adequate sleep also has a strong biological basis: sleep deprivation significantly increases amygdala reactivity, impairing emotional regulation (Walker, 2017). Students' combination of

spiritual, social, and recreational strategies reflects an intuitive understanding of holistic psychological needs, consistent with Islamic Positive Psychology (Gumiandari et al., 2022).

Additional Findings and Research Implications

This choice reflects a need for a safe, nonjudgmental space perceived as insufficiently available within the student's social environment. Turkle (2015) cautions that interaction with machines cannot replace genuine human connection because it lacks mutual human understanding. Although this finding is insufficient for drawing conclusions, it provides a relevant direction for further research given the rapid development of artificial intelligence.

In psychology, voluntarily chosen solitude differs fundamentally from unwanted loneliness. Long and Averill (2003) found that consciously chosen solitude offers psychological benefits, including mental clarity and recovery from social fatigue. Students' intuitive distinction between the need for solitude and isolation is relevant to the development of campus well-being programs.

This study offers a comprehensive account of how Biology Education students interpret mental health within a framework of Islamic values. Overall, the experiences of ten respondents indicate that mental health is understood as an active ability to regulate emotions, withstand pressure, and continue functioning in everyday life, rather than passively as the absence of disorder. This perspective aligns with Keyes's (2002) mental health continuum model, which views well-being as something developed rather than merely possessed. In an Islamic context, it corresponds to nafs al-mutmainnah, the tranquil soul: tranquility arises not from freedom from trials but from the ability to face them while relying on Allah (Jamaluddin et al., 2026).

The interpretation of academic pressure as a divine trial was the strongest and most consistent finding. Eight of the ten respondents spontaneously viewed academic pressure as a process of personal maturation ordained by Allah rather than as a threat. This interpretation produces more adaptive responses than viewing pressure as a meaningless threat. It operates through meaning-making, the ability to find meaning in adversity, which consistently correlates with psychological resilience (Park, 2010). In Islam, this mechanism has a theological foundation in ibtila', as expressed in Al-Baqarah 2:155–157. This illustrates that faith is spiritually meaningful and also functions as a tangible psychological resource in respondents' accounts.

The three Islamic values most actively influencing students' mental states were patience, trust in Allah, and gratitude. Patience was understood as active endurance that enabled students to believe that pressure was temporary. Trust in Allah helped release anxiety about outcomes beyond one's control after maximum effort had been made. Gratitude shifted attention from what was lacking to what was already present, making burdens feel lighter. These values formed a mutually supportive psychological system rather than operating separately. Sincerity emerged organically as a fourth value with a distinct psychological function: proceeding without being burdened by demands for specific outcomes. These findings provide an empirical account that can be compared with the literature-based conceptual discussions of Aprilianti (2024) and Gumiandari et al. (2022).

Students' practices for maintaining psychological well-being were layered and comprehensive. Ritual prayer, dhikr, and Quran recitation were the main strategies mentioned by all respondents, with consistently reported effects: lighter thoughts, greater inner calm, and a sense of safety even before problems were resolved. Students also relied on social support from close friends and family and on physical recovery through rest and enjoyable activities. These dimensions were combined flexibly according to circumstances, reflecting an intuitive awareness that psychological recovery requires several sources of support. This pattern aligns with Islamic Positive Psychology, which emphasizes balance among spiritual, emotional, social, and physical needs (Gumiandari et al., 2022).

Three additional findings emerged beyond the questionnaire's explicit questions and enriched the analysis. First, one female student chose artificial intelligence as a safe space for sharing concerns without fear of judgment, a phenomenon that has received limited attention in Indonesian Islamic psychology. Second, several students consciously chose solitude as time to process inner experiences without social pressure rather than as an escape, consistent with voluntarily chosen solitude (Long & Averill, 2003). Third, one female student described crying as a necessary first step before other recovery activities, reflecting a healthy awareness of emotional catharsis (Bylsma et al., 2008). These findings suggest that students' responses to pressure are more diverse than existing theories assume.

The study makes three contributions. First, it provides qualitative empirical data on Islamic psychology and Indonesian student mental health, complementing quantitative studies with depth of meaning that numerical data cannot capture. Second, it shows that Islamic values fundamentally shape how Muslim students perceive, interpret, and respond to pressure rather than serving merely as supplementary influences. Third, findings on gender patterns in support-seeking, artificial intelligence as a space for sharing concerns, and fluctuations in faith under pressure open directions for research employing more diverse methods and broader participant groups.

CONCLUSION

This study addresses its three original objectives. First, Biology Education students interpret mental health as an active ability to regulate emotions and withstand pressure rather than merely being free from disorder. Most respondents view academic pressure as a trial from Allah that offers opportunities for growth and spiritual maturation. Their understanding of mental strength and strength of faith is integrative: the two are distinct but mutually reinforcing, with faith viewed as a foundation that prevents worsening mental health from becoming more dangerous.

Second, patience, trust in Allah, and gratitude are the Islamic values most clearly influencing students' interpretations and responses, functioning as a mutually supportive system. Patience provides active endurance, trust in Allah releases anxiety about outcomes, and gratitude shifts perspective. Sincerity emerged unexpectedly as a fourth value with a distinct psychological function. All respondents rejected stigma equating stress with weak faith, demonstrating an understanding that extends beyond commonly circulating stereotypes.

Third, students maintain psychological well-being through layered coping that flexibly combines ritual worship, social support, and physical recovery according to their needs. Prayer and dhikr were consistently reported to bring noticeable emotional changes. A clear difference appeared between female respondents, who tended to seek social support proactively, and male respondents, who tended to keep their feelings to themselves. This difference deserves attention in the design of campus mental health programs.

The findings indicate that Islamic values play an important role in how respondents interpret and respond to psychological pressure. Within the group studied, the maintenance of psychological well-being combines spiritual, social, and physical resources.

LIMITATION AND RECOMMENDATION

Study Limitations

This study involved ten second-semester Biology Education students purposively selected from a single program context. The findings describe this group's experiences and are not intended to be statistically generalized to all university students. An open-ended questionnaire allowed respondents to express their experiences in writing but limited opportunities for follow-up questions. Self-reported data may also be influenced by respondents' recollections and a tendency to provide answers regarded as socially or religiously appropriate.

The study did not employ clinical measures, physiological measures, or a longitudinal design. Emotional changes following worship therefore represent respondents' reported experiences rather than evidence of causality or clinical effectiveness. Gender patterns in social support and the use of artificial intelligence should be treated as exploratory findings because of the limited number of respondents. The manuscript also does not detail procedures for participant consent, ethical review, or assessment of data trustworthiness; these details need to be completed based on the actual conduct of the study.

Recommendations

Campus mental health programs may consider patience, trust in Allah, gratitude, and sincerity as relevant resources for Muslim students, alongside peer support and access to professional services. Programs should provide safe spaces for sharing concerns and avoid stigma linking mental health problems to weak faith. Individual differences in needs and help-seeking preferences should inform service design.

Further research should include participants from more varied semesters, programs, and institutions and use in-depth interviews to clarify their experiences. Longitudinal or mixed-methods designs could examine changes in experience and relationships among constructs more systematically. Gender-related support preferences, fluctuations in faith, the need for solitude, and artificial intelligence as a space for sharing personal concerns are potential areas for future research.

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