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The Power of Belief: Unpacking Religion's Role in Mental Health Outcomes

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ABSTRACT

Every human being has experienced various problems in his life, so it has an impact on his mental health. The purpose of this paper is to look at the extent of the influence of religion on mental health. This paper uses a literature study by looking for information both from books and journals and the latest research related to the theme of discussion. The main sources used in this study are books about God in the human brain. The results of this research show that religion can have an influence on mental health. This is because there is an attitude of surrender to the Most High, namely God. This attitude of surrender causes optimism towards a person so that various positive feelings such as happiness, pleasure, and calm arise when facing various life problems.

Contribution: By synthesizing information from multiple sources about religion's impact on mental health, the article contributes to ongoing discussions in both academic and clinical settings about how best to support individuals facing psychological difficulties through their faith.

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1. INTRODUCTION

Humans are creatures who have various activities that can cause boredom, stress, depression and other psychological problems (Eastwood et al., 2012). In addition, with the development of the times, humans are required to follow the social scenarios found in society with various demands (Hedegaard, 2020). With so many demands, there will certainly be a lot of problems, both mental and other problems, such as anxiety, despair or other deviant attitudes. Due to prolonged hypocritical attitudes, modern society suffers from mental disorders such as anxiety, loneliness, boredom and deviant behavior (Mubarok, 2000; Rahman & Mufti, 2021). Human needs are not only physical needs but also psychological needs. One of the most important elements in human life is having mental health because, with a healthy soul, everything can be enjoyed in the journey of life. In his book, Yusa Burhanuddin explains that someone who has mental health will have a normal personality so that his actions and behavior are in accordance with the wishes of the general public because they are in accordance with applicable regulations (Yusuf et al., 2022). A series of acts of worship carried out by a person, such as praying, reading the holy book and accompanied by following religious teachings properly, can have a strong influence on health, higher satisfaction, anxiety about death, levels of alcoholism and also the use of

illegal drugs, and lower depression. This statement explains that religious activities have a close relationship with humans' physical condition (Sucianing & Heriyanti, 2022).

Many studies explain the relationship between religiosity or religious adherence and its impact on health. In America, at the Academy of Physicians meeting in 1996, almost all doctors believed that religious beliefs could cure illnesses and 75% of them believed that prayers from other people could influence healing (Satrianegara, 2014). Elmer Hees, chairman of the Medical Association, said that when a doctor enters a patient's room, he is actually not alone even though he has medical equipment, but more than that, he believes that it is a higher power that carries out all his other duties (Grunau et al., 2020). Apart from that, he emphasized, "If you put forward a doctor who denies the existence of a Supreme Being, then I will say that he has no right to practice medicine." This view was also reinforced by Robert C. Pale, a surgeon, as saying:

Religion has great benefits for medical science. Thanks to the faith of the injured or sick person, I, as a surgeon, always see healing that was thought to be impossible. I have also seen unpleasant results with religion alone or scientific treatment alone. Therefore, I have given us both to fight sickness and sorrow. If both are used simultaneously as weapons against disease, the possibilities for good results are limitless (Rosyad, 2016).

Religion is a public virtue in which religion has a big role in improving a person's quality of life if religion becomes a control for individuals and groups. Religion is needed by society to guide and provide calm in life when problems arise (Derung et al., 2022).

2. METHOD

This research uses a qualitative method based on a literature study to analyze the influence of religion on mental health. The data used is secondary, obtained from books, scientific journals and relevant research reports. Data collection techniques were carried out through documentation by tracing and recording the contents of literature discussing the relationship between religiosity and mental health (Sugiyono, 2013). Data were analyzed using the content analysis method with steps in the form of identifying themes, grouping data, and interpreting results based on a relevant theoretical framework (Denzin & Lincoln, 2011). Data validity is maintained through source triangulation, namely comparing various literature to ensure the accuracy of the information (Prasad, 2008). This approach is expected to provide comprehensive insight into the role of religion in improving the quality of mental health.

3. RESULTS AND DISCUSSION

Discussing Religion and Mental Health

Religion is a term that is often spoken and understood in society. In accordance with its function and meaning, religion can be understood as something strategic, namely mastering, subordinating and also a habit (Wijaya, 2022). Religion includes something that contains rules that its adherents must obey (Tirivangasi & Nyahunda, 2024). Religion means a bond that humans must hold and obey. This bond can have a big influence on human life. The bond comes from a higher power. A magical power that cannot be obtained by the five senses (Harun, 1985). Religion and mental health are two important, interrelated aspects of human life. According to J.H. Leuba, religion can be interpreted as a belief system or as emotions that have a special pattern (Leuba, 1950). Leuba emphasized that religion is not only a formal institution with a set of doctrines but also includes a psychological dimension that can shape a person's way of thinking and emotions. A similar view was also expressed by Thouless, who defined religion as the practical relationship that a person feels with something he believes to be a higher being than humans (Thouless, 1972). This definition highlights aspects of the personal and transcendental relationship between individuals and spiritual forces. Meanwhile, Ramayulis emphasized that religion not only has a role in the spiritual dimension, but also in shaping the practical functions of human life, such as being a source of values, a forum for overcoming frustration, and a medium for meeting knowledge needs (Ramayulis, 2008)

As a source of values, religion provides principles of morality that serve as guidelines for individuals and society. The values contained in religious teachings, such as justice, compassion and social responsibility, become a reference in thinking and acting (Indriana, 2020). These values are not only individual but also collective because they are able to direct the behavior of society as a whole. In this case,

religion plays a balancing role in maintaining individual morality while building social harmony. When someone understands religious values well, he will tend to act in accordance with these principles, which ultimately creates a more dignified life order (Nur, 2018). Apart from being a source of values, religion also functions as a forum for dealing with frustration. Frustration often arises when individuals experience heavy life pressure or face failure that is difficult to accept. In situations like this, religion provides hope and calm through belief in God or divine power (Harris, 2021). Based on Ramayulis' observations, people who experience frustration tend to become more religious, because religion provides a sense of security and meaning in life, which helps a person to rise from adversity (Gonzales, 2022). In this context, religion functions as an effective mental therapy to overcome psychological stress.

Another function of religion is as a medium to fulfill knowledge needs. Religion provides answers to various existential questions, such as the purpose of life, human origins, and the meaning of death. These answers help individuals to understand themselves and the world around them. In this perspective, religion is not only a spiritual means but also an intellectual one, because it is able to provide guidance for humans in facing various life problems (Puri et al., 2023). This function confirms that religion has a multidimensional role in human life. On the other hand, the concept of health is also an integral part of human life. Indonesian Law Number 23 of 1992 defines health as a condition of physical, mental and social health that allows a person to live a productive life in social and economic aspects (UU No. 23/1992) (Japar et al., 2024). In this case, mental health is one of the main aspects that must be considered, because mental health not only affects individuals personally but also has an impact on social relationships and work productivity (DM et al., 2022).

World Federation of Mental Health (WFMH), at a 1948 conference in London, defined mental health as an optimal condition, both from intellectual and emotional aspects, which allows a person to live their daily life well (WFMH, 1948) (Thong, 2013). This definition highlights the importance of balance between intellectual and emotional abilities in creating a mentally healthy life. Karl Menninger, a psychiatrist, also defined mental health as a person's ability to adapt to their environment happily and optimally (Hiltner & Menninger, 1963). Menninger's view emphasizes that mental health depends not only on the individual's internal conditions but also on the ability to adapt to the external environment. H.B. English, a psychologist, provides the view that mental health is a relatively stable condition in which a person can adapt well, has a passion for life, and strives to achieve self-actualization (English, 1950). Self-actualization is an important indicator of mental health because it reflects an individual's ability to optimize their potential and live a life with meaning. Meanwhile, Killander added that people with good mental health have emotional maturity, the ability to accept reality, the pleasure of living with other people, and strong life principles even when facing life complications (Killander, 2022).

A more holistic approach to mental health is proposed in the Sixty-sixth World Health Assembly (WHO, 2023). In this meeting, mental health is understood as an individual's state of well-being which is characterized by the ability to overcome stress, have skills, and contribute positively to society. This perspective emphasizes that mental health involves a balance between personal well-being, intellectual ability, and social contribution. In this context, mental health is not only seen as the absence of mental disorders but also as a condition that allows individuals to live productive and meaningful lives (Organization, 2023).

Zakiyah Daradjat (2001) provides a comprehensive definition of mental health. Here, mental health is the harmony of mental functions that allows a person to face life's problems positively and optimize their potential (Daradjat, 2001). Daradjat also identified six categories of mental health, namely: (1) having a positive inner attitude towards oneself, (2) being able to self-actualize, (3) having good psychological integration, (4) having self-autonomy, (5) having good perception. objective towards reality, and (6) able to harmonize environmental conditions with oneself (Zakiyah, 2001). This definition shows that mental health includes interrelated emotional, intellectual and social dimensions.

In the context of the relationship between religion and mental health, it can be concluded that both have a mutually supportive role. Religion provides a foundation of values and meaning in life that helps individuals to maintain mental balance. On the other hand, good mental health allows a person to carry out religious practices more optimally. Therefore, integration between religion and mental health is important in creating a holistically healthy life (Ziaulhaq & Sen, 2021).

The Influence of Religion on Mental Health

Religion has long been an interesting topic of study, especially in relation to mental health. In recent decades, various scientific studies have shown that religious practices can provide significant benefits, both

for a person's physical health and mental health (Koenig, 2018). A study shows that individuals who regularly practice religious teachings tend to have a longer life expectancy, a lower risk of diseases such as stroke and heart disease, more stable blood pressure, and better immune system function compared to those who do not practice. religion. These findings confirm that religion (or spirituality) not only the human body but also the individual's mental and emotional balance (Koenig, 2012).

These studies also reinforce the idea that religion has a profound influence on mental health. Before 1994, the American Psychiatric Association (APA) still classifies strong involvement in religious practices as a form of mental disorder. However, various recent research shows that religious beliefs and practices can actually significantly improve a person's emotional well-being and mental health. For example, individuals who have high religious involvement tend to have a lower risk of psychological disorders such as depression, anxiety, or severe stress compared to the general population. In addition, for those who experience mental disorders, involvement in religious practices has been shown to help their recovery be faster and more effective (Pargament, 2002).

Religious beliefs and practices are also closely related to reducing levels of dependence on addictive substances such as alcohol and drugs. Some studies show that rates of drug abuse, alcoholism, and even suicide rates, are lower in individuals who actively practice their faith compared to the general population (Bonelli & Koenig, 2013). This indicates that religion can function as a protective factor that protects a person from the risk of serious mental health disorders. Involvement in a religious community also provides strong social support, which is an important component in maintaining the stability of an individual's mental health (Levin, 2010).

Apart from that, religion also has a significant influence in reducing levels of depression and anxiety. People who are active in religious activities tend to have a better ability to cope with life's stresses and face emotional challenges. In fact, for those who have been diagnosed with anxiety disorders or depression, spiritual practices such as prayer, meditation, or religious reflection can speed up the healing process. This religious activity not only creates a sense of inner peace but also helps individuals develop a more optimistic and confident mindset (Koenig, 2012). In this context, religion acts as a means to provide meaning and purpose to life, which is very important for a person's mental health.

Religious practices can also improve interpersonal relationships and improve a person's quality of life. Participation in religious activities such as social service, helping others, or praying together can create a deeper sense of connectedness between individuals and fellow humans (Koenig et al., 2012). This encourages the formation of supportive communities, which in turn can help reduce feelings of loneliness and isolation. In many cases, individuals who have strong social connections through their religious community tend to be better able to face life's stress and challenges with a more positive attitude (Ellison & Levin, 1998)

Meditation and prayer, two practices that are often part of religious life, have also been shown to have a calming effect on mental health. Religious meditation, for example, can help reduce levels of cortisol, a stress hormone that often triggers psychological disorders. Meanwhile, prayer provides a sense of calm and hope, especially when someone faces a difficult or stressful situation. This activity creates space for self-reflection so that individuals can better understand their emotions and gain a healthier perspective on the problems they face (Imran & Leng, 2024).

Religion also functions as a source of moral values and guidance that helps individuals in making decisions and determining the direction of life. In this case, religion provides a framework that allows a person to regulate behavior, set priorities, and confront moral dilemmas. These values not only help a person in everyday life but also provide a sense of emotional stability. By having strong beliefs, individuals can be more confident in facing various life challenges, including emotional or mental ones (Saunders & Stephenson, 2024).

Furthermore, religion has a unique function in helping individuals overcome feelings of frustration and uncertainty. In stressful situations, people tend to seek answers to existential questions such as "Why is this happening to me?" or "What is my life purpose?" Religion, with its teachings that offer meaning to life, provides a sense of hope and purpose that can help individuals escape from states of frustration. In this context, religion can be an effective coping mechanism, especially in dealing with situations that cannot be controlled or changed (Koenig, 2012).

On the other hand, religion also provides a means for fulfilling human intellectual needs. Religious teachings often provide answers to big questions about the origins of life, the purpose of life, and what

happens after death (Wilt et al., 2024). By providing this intellectual framework, religion helps individuals find meaning in their lives, ultimately improving their mental well-being. In addition, religion also encourages a person to develop their potential, explore their abilities, and achieve self-actualization, all of which are important components of optimal mental health (Maslow, 1970).

In the broader context of mental health, religion also plays a role in shaping an individual's relationship with society. Religion, as a social institution, provides a platform for individuals to participate in collective activities, such as congregational worship or community service. Participation in these activities helps individuals feel part of something bigger than themselves, which can provide a sense of meaningfulness and improve mental well-being. Moreover, religious values that emphasize love, compassion and respect for fellow humans help create a more supportive and harmonious social environment (Abachi et al., 1995).

However, it is important to remember that the influence of religion on mental health is not always universal. Some individuals may not experience the same benefits from religious practices, especially if they have negative views of religion or feel alienated from their religious community. In some cases, religion can even be a source of stress if individuals feel burdened by religious rules or experience internal conflict regarding their beliefs. Therefore, it is important to understand that the influence of religion on mental health is very dependent on how individuals interpret and practice religious teachings in their lives (DeRossett et al., 2021). By providing a sense of meaning, purpose, and hope, religion helps individuals deal with life's stresses and maintain their emotional balance. Additionally, through religious communities, spiritual practices, and the moral values they instill, religion creates an environment that supports mental well-being. However, like other aspects of life, these benefits depend on how individuals view and utilize religion in their daily lives (Hasan et al., 2024).

In the last few decades, studies on the relationship between religion, spirituality and health have experienced significant development. More than 200 medical studies have been conducted highlighting the important role of religion and spirituality in improving the quality of health, both physically and mentally. One study that presents scientific evidence of this relationship is that conducted by Edward Larson from the US National Institutes of Health. Larson, a psychiatrist and epidemiologist, along with Jeff Levin and Harold Koenig, collected clinical evidence about the relationship between health and spiritual experiences (Koenig et al., 2012). In 1980, these three experts conducted a study known as a systematic review to select a number of clinical and evidence-based research. This approach allows them to carry out a more thorough selection of research results that have a strong scientific basis. From this study, Larson and colleagues found that among 158 medical studies that discussed the relationship between health and spirituality, around 77% of the studies showed clinically positive effects of spirituality on health. These findings illustrate that spirituality, or more precisely, religion, can have a very significant impact on a person's physical and mental condition (Koenig, 2012).

One of the most famous studies resulting from this research was conducted at the Dartmouth Hitchcock Medical Center in 1995. This study concluded that one of the best predictors of survival for heart surgery patients was the comfort they derived from their religious beliefs. In the study, patients who had religious beliefs were shown to have three times lower odds of death compared to those who did not have religious beliefs (Tafe et al., 2015). This suggests that religion can be an important protective factor in improving the quality of life and extending a person's lifespan, especially in the face of critical medical situations. Another similar study also found that blood pressure in churchgoers tended to be lower compared to individuals who were not involved in religious activities, even after taking into account factors such as smoking and socioeconomic status. These findings further strengthen the view that involvement in religious or spiritual activities can have a positive impact on physical health, especially on blood pressure, which is an indicator of heart health (Abbas et al., 2024).

Furthermore, another study conducted by the National Institute on Aging in 1966 of 4,000 elderly people living at home in North Carolina showed that people who regularly attended mass or church services had lower stress levels and better health conditions. better than those who do not involve themselves in religious activities (McGrath & Blike, 2015). These results provide a strong indication that religion not only plays a role as a spiritual means but also as a tool to improve a person's emotional and mental condition. Other similar studies also show that women who are involved in church activities have a much lower risk of death from coronary heart disease compared to those who are rarely or never involved in religious activities. Interestingly, social and economic factors were also taken into account in this research, further strengthening

the understanding that religion can be a protective factor against various health problems related to stress and lifestyle factors (Counted et al., 2022).

Apart from that, there are also findings showing that those who have strong religious beliefs experience less depression and anxiety disorders. On the other hand, people who are not involved in religious activities tend to be more susceptible to mental problems such as depression and even suicide. Research finds that people who never go to church have a suicide rate that is four times higher than those who regularly attend church services (Cordell et al., 2012). These findings increasingly show that religion can function as a protective mechanism that helps individuals deal with life stress and reduces the risk of serious mental disorders (Ibrahim et al., 2021). For example, one study revealed that female patients who were recovering from hip fractures and who saw God as a source of strength and regularly attended religious services had lower levels of depression and were able to walk further than those who did not share the same religious beliefs. These results show that religious beliefs can play a role in accelerating a person's physical and mental healing process because they can provide a sense of calm and hope in the midst of difficulties (Ozcan et al., 2021).

These studies are in line with what was conveyed by the Fetzer Institute, which emphasizes that the relationship between spirituality and health can be explained through four main mechanisms: behavioral mechanisms, social mechanisms, psychological mechanisms, and physiological mechanisms (physiological mechanisms). Behavioral mechanisms show that spirituality can protect a person from health problems by encouraging a healthy lifestyle. Some religions, for example, prohibit the consumption of alcohol and certain foods that can have a bad impact on health. If individuals consistently follow the teachings of their religion, they will be more likely to maintain a healthy lifestyle which can reduce the risk of disease. Social mechanisms explain that spiritual groups can provide significant emotional support, which not only strengthens social ties but also creates a sense of solidarity that can reduce stress levels. Joining a religious community gives the feeling that individuals are not alone in facing life's problems, so they feel more able to overcome the challenges that arise (Nguyen, 2020).

Psychological mechanisms highlight that religious groups often offer a view of life that connects individuals to concepts of divinity, ethics, relationships with fellow humans, and death, which can have a positive impact on mental well-being (Saud et al., 2021). Religion provides a framework for overcoming existential anxiety and providing meaning in life. Finally, physiological mechanisms suggest that religious commitment may act as a buffer that protects individuals from major and minor stressors, via direct physiological pathways. In other words, spiritual experiences can influence physical health through biological processes related to stress management, emotional regulation, and hormonal influences that impact the immune system (Foster et al., 2022).

This view is also in line with what was presented by Iklima Salji et al in the article entitled The Influence of Islam on the Mental Health of Its Believers. In the article, it is concluded that the Islamic religion has a huge influence on the mental health of its adherents. Salji and his colleagues explained that many of the principles in psychology originate from Islamic teachings, so Islam and mental health have a close relationship. Religious values applied in everyday life can provide a better life, especially related to mental health (Saji & dkk, 2022). In Islam, teachings to maintain a balanced life, avoid excessive stress, and focus on good relationships with God and others, contribute to the creation of a healthier mental condition (Zolkefley et al., 2023). By implementing religious values, individuals can gain inner peace, which in turn can reduce levels of stress, anxiety and depression which often cause mental health disorders.

Good mental health, according to Islam, as taught in the Qur'an and Hadith, is closely related to a person's ability to maintain a balance between the worldly and the hereafter, as well as maintain a good relationship with God and fellow human beings (Ali et al., 2023). In this context, the Islamic religion provides a clear life guide on how to manage emotions, face life's trials, and maintain inner peace. When religious values are applied in everyday life, this not only improves the quality of social relationships but also helps individuals manage anxiety and stress, which can contribute to better mental health (Al Ayub Ahmed et al., 2022).

Existing scientific evidence and research show that religion and spirituality have a huge impact on a person's physical and mental health. By providing inner peace, strengthening social bonds, and offering clear life guidance, religion can help individuals overcome stress, improve emotional well-being, and ultimately achieve better health (Huda & Slamet, 2024). Religion provides a foundation for individuals to live a more meaningful and balanced life, which in turn impacts their mental and physical health. Therefore, the

role of religion in mental and physical health cannot be underestimated, and more and more research is revealing how important spirituality is in supporting overall health (Karimullah, 2023).

In Alya Permatasari's research, as quoted by Nurjanah, the influence of religious rituals on mental health is very significant, especially prayer rituals in the Islamic religion. Based on data collected from 81 respondents, many of them felt the positive impact of prayer on their mental condition (Nurjanah et al., 2022). Prayer, as an obligatory act of worship for Muslims, is not only seen as a form of spiritual devotion, but also as a means of maintaining mental health. This is related to the psychological aspect where prayer is a form of expression of gratitude to Allah SWT for the various blessings that have been given, such as health, family, sustenance, and all other forms of gifts (Alfain et al., 2023). By expressing gratitude in prayer, individuals experience a feeling of calm and are able to minimize feelings of anxiety, restlessness, or even depression that are often experienced due to the pressures of life.

Prayer, as a ritual that requires Muslims to involve the body, heart and mind, helps stabilize emotions. When a person focuses on praying and remembering Allah, he can feel inner peace which is very important for maintaining mental balance. This not only creates a feeling of gratitude but also leads to a more positive attitude change. As explained in Permatasari's research, the practice of praying consistently can reduce symptoms of depression, improve quality of life, and improve overall mental condition. Thus, prayer not only provides spiritual benefits but also plays an important role in maintaining mental health (Nurjanah et al., 2022).

In a broader context, the influence of religion on mental health has been widely researched and proven by various figures, including biochemists who state that there is a relationship between religious beliefs and mental health (Hassan et al., 2021). Many researchers believe that religion can provide a sense of calm and peace within a person, which in turn affects his mental quality. This emphasizes that religion has dimensions that are not only related to moral or spiritual aspects but also to physical and mental health (Syme & Hagen, 2020). Research shows that individuals who have a religious life tend to be more emotionally stable and better able to cope with life's stresses compared to individuals who do not have strong religious ties.

This argument is also supported by the thoughts of major ulama figures, one of whom is Ibn Al-Qayyim Al-Jauzi, a biochemist scholar who is famous for his medical views in relation to mental health. Ibn Al-Qayyim emphasized the important role of religion in the process of treating mental illness (Elzamzamy et al., 2024). In his view, a doctor who cannot provide treatment related to spiritual and moral aspects, such as advising patients to have a closer relationship with Allah and remember the last days, will not be considered a real doctor. According to Ibn Al-Qayyim, mental health really depends on the balance between physical, emotional and spiritual aspects. Therefore, treatment of mental illness must involve religious elements that can provide inner peace, such as worship, prayer, and always remembering Allah (Mafruchati, 2024).

Various studies have revealed the importance of religion in mental health. For example, in research conducted by Zakiyah Daradjat (2001), he explained that mental health is a condition where individuals have harmony between mental functions and the ability to overcome various life problems with a positive attitude (Daradjat, 2001). In this context, religion is one of the main pillars in forming this positive attitude. Religion provides values that guide individuals in facing various life problems, as well as providing a clearer meaning and purpose in life (Zakiyah, 2001). By adhering to religious teachings, individuals can feel stronger in facing life's challenges, reduce feelings of stress, and improve their mental well-being.

In this case, prayer is one of the main rituals in the Islamic religion which has a positive impact on mental health. This prayer process, which is carried out five times a day, provides an opportunity for Muslims to reflect, pray, and communicate directly with God (Karo-Karo et al., 2024). This is a moment where individuals can calm their minds, overcome feelings of anxiety, and reflect on their lives (Malviya et al., 2022). In prayer, there is an element of inner calm that comes from an attitude of submission and sincerity to Allah SWT. This serves as a balance in everyday life which is full of stress and challenges. Apart from that, prayer also teaches discipline, which is closely related to mental health because individuals who are disciplined in carrying out their worship tend to have a more regular and emotionally stable lifestyle (Ahmad et al., 2022).

Apart from prayer, many other religious rituals also have a positive impact on mental health. One of them is dhikr, which is a constant reminder of God (Embong et al., 2024). In practice, dhikr provides peace of mind and can relieve anxiety (Saniotis, 2018). A number of studies have shown that dhikr activities can reduce stress levels and improve mental well-being (Adnan et al., 2024; Miichi, 2019). This is related to the

ability of dhikr to create deep focus, as well as divert attention from the problems faced, thereby providing a sense of peace within oneself (Mubarak, 2023; Tursunovna & Munisxon, 2021).

Apart from that, religious beliefs can also provide a sense of security and hope, which is very important when facing life's difficulties. Religion teaches about life after death and provides an understanding that everything that happens in this world is part of destiny that has been determined by God (Sidik & Sarwanto, 2024). By having this view, a person tends to be more patient and accept his life conditions with grace. They are not easily trapped in feelings of despair because they believe that every difficulty has a lesson and that God is always with them in every step of their life. This belief provides mental strength to keep going, even in difficult situations (Phan et al., 2020). Religion also has a big influence on shaping a person's social attitudes. In Islamic religious teachings, for example, the importance of sharing with others, providing assistance to those in need, and maintaining good relationships with other people is greatly emphasized (Elsayed et al., 2023). These attitudes not only bring social benefits but also have a positive impact on the mental health of individuals. Sharing affection, providing assistance, and maintaining good social relationships with others can increase feelings of happiness and life satisfaction. Individuals who have healthy social relationships tend to be more emotionally stable and better able to overcome feelings of loneliness or depression (Abu-Ras et al., 2022).

The influence of religion on mental health is increasingly important in a world that is increasingly complex and full of challenges. In this modern era, life pressure is increasingly high, with various social, economic and political problems that often cause stress, anxiety and even depression (Hammoudi Halat et al., 2023). Therefore, it is important for every individual to have a belief system that can provide inner peace, and help them to remain strong in facing life's challenges. Religion, with its various teachings, provides an invaluable resource in maintaining mental health. Scientific evidence supporting the positive influence of religion on mental health is also increasingly being found. Recent studies show that religion has an important role in reducing symptoms of stress, depression and anxiety, and improving quality of life (Grossoehme et al., 2020). Religion not only provides clear life guidance but also helps individuals deal with feelings of fear, anxiety and uncertainty that often arise in life. Therefore, it is important to continue to dig deeper into the role of religion in mental health, so that more people can feel its benefits (Aggarwal et al., 2023).

Thus, it can be understood that religion has a significant influence on mental health. Religious rituals, such as prayer, dhikr, and prayer, not only provide spiritual peace but also have a positive impact on an individual's mental well-being. This is proven through various studies which show that religion can help reduce stress, depression and anxiety, as well as improve the quality of life. By understanding the role of religion in mental health, we can utilize religious teachings as a means to achieve a healthier and happier life (Hamid, 2017).

4. CONCLUSION

Religion is a belief that people believe in God, which is manifested through various religious rituals. Meanwhile, mental health is a condition where a person is free from disorders such as stress, depression, anxiety and other psychological problems. Various references show that religion has a positive influence on mental health, especially when someone lives a life with a high level of spirituality. Belief in God, which is implemented in daily life through activities such as prayer, dhikr, and other religious rituals, can provide a sense of calm and strength in facing various life problems. By recognizing the benefits of spirituality and religious involvement—such as enhanced coping mechanisms, increased resilience against stress, and improved emotional well-being—clinicians can provide more holistic care that aligns with patients' beliefs and values. This integration can foster a sense of community and support, which is crucial for individuals facing mental health challenges.

References

Abachi, S., Abbott, B., Abolins, M., Acharya, B. S., Adam, I., Adams, D. L., Adams, M., Ahn, S., Aihara, H., & Alitti, J. (1995). Observation of the top quark. *Physical Review Letters*, 74(14), 2632.

Abbas, A., Ekowati, D., Suhariadi, F., & Anwar, A. (2024). Human capital creation: a collective psychological, social, organizational and religious perspective. *Journal of Religion and Health*, *63*(3), 2168–2200.

Abu-Ras, W., Senzai, F., Laird, L., & Decker, E. (2022). The influence of religious identity, culture, and values on

- the practice of American Muslim physicians. Social Sciences, 11(11), 499.
- Adnan, A., Rahman, M. T., & Jamaludin, A. N. (2024). Tijaniyah Sufi Order's Contribution to Social Righteousness Practices. *Hanifiya: Jurnal Studi Agama-Agama*, 7(2), 233–242.
- Aggarwal, S., Wright, J., Morgan, A., Patton, G., & Reavley, N. (2023). Religiosity and spirituality in the prevention and management of depression and anxiety in young people: a systematic review and meta-analysis. *BMC Psychiatry*, *23*(1), 729.
- Ahmad, S., Long, A. S., Malek, J. A., & Rahman, A. (2022). A Significance On The Importance Of Mujāhadah Al-Nafs, Mental Illness And Mindfulness Among University Students Based On Islamic Views. *Journal of Pharmaceutical Negative Results*, 4299–4313.
- Al Ayub Ahmed, A., Komariah, A., Chupradit, S., Rohimah, B., Anita Nuswantara, D., Nuphanudin, N., Mahmudiono, T., Suksatan, W., & Ilham, D. (2022). Investigating the relationship between religious lifestyle and social health among Muslim teachers. *HTS Teologiese Studies/Theological Studies*, 78(4), 7335.
- Alfain, S. N. I., Soleh, A. K., & Yamani, M. R. (2023). The Role of Patience in Coping Mental Problems: A Quranic Perspective. *Tribakti: Jurnal Pemikiran Keislaman, 34*(2), 195–212.
- Ali, Z., Ismail, N., & Ahmad, K. (2023). A Study of Imam Al-Ghazali's Approach in Strengthening Spirituality, Psychology and Mental Health of Muslims. *Journal for ReAttach Therapy and Developmental Diversities*, 6(10s (2)), 409–421.
- Amirul Nur, W. (2018). *Nilai Religius Tradisi Ziarah Makam Bathara Katong Pendiri Peradaban Islam di Ponorogo:* Sebuah Kajian Etnografi. Universitas Sebelas Maret.
- Bonelli, R. M., & Koenig, H. G. (2013). Mental disorders, religion and spirituality 1990 to 2010: a systematic evidence-based review. *Journal of Religion and Health*, *52*, 657–673.
- Cordell, M. N., Foster, T. C., Baker, E. R., & Fildes, B. (2012). Collaborative maternity care: Three decades of success at Dartmouth-Hitchcock Medical Center. *Obstetrics and Gynecology Clinics of North America*, 39(3), 383–398.
- Counted, V., Pargament, K. I., Bechara, A. O., Joynt, S., & Cowden, R. G. (2022). Hope and well-being in vulnerable contexts during the COVID-19 pandemic: Does religious coping matter? *The Journal of Positive Psychology*, *17*(1), 70–81.
- Daradjat, Z. (2001). Islam & Kesehatan Mental. Jakarta: Toko Gunung Agung.
- Denzin, N. K., & Lincoln, Y. S. (2011). The Sage handbook of qualitative research. sage.
- DeRossett, T., LaVoie, D. J., & Brooks, D. (2021). Religious coping amidst a pandemic: Impact on COVID-19-related anxiety. *Journal of Religion and Health*, *60*(5), 3161–3176.
- Derung, T. N., Mandonza, M., Suyatno, G. A., & Mete, A. (2022). Fungsi Agama terhadap Perilaku Sosial Masyarakat. *In Theos: Jurnal Pendidikan Dan Theologi, 2*(11), 373–380.
- DM, M. Y., Akmal, A. R., Yasmin, N. A., Sari, R., & Saragih, G. M. (2022). Hubungan Kelalaian Medis Dengan Malpraktik Yang Dilakukan Oleh Tenaga Medis. *Jurnal Pendidikan Dan Konseling (JPDK)*, 4(6), 7045–7052.
- Eastwood, J. D., Frischen, A., Fenske, M. J., & Smilek, D. (2012). The unengaged mind: Defining boredom in terms of attention. *Perspectives on Psychological Science*, 7(5), 482–495.
- Ellison, C. G., & Levin, J. S. (1998). The religion-health connection: Evidence, theory, and future directions. *Health Education & Behavior*, *25*(6), 700–720.
- Elsayed, K. G., Lestari, A. A., & Brougham, F. A. (2023). Role of religion in shaping ethical and moral values among the youths in Athens, Greece.
- Elzamzamy, K., Bader, R. K., & Bircan, F. B. (2024). Contemporary Scholarship on Classical Islamic Psychology: A Scoping Review. *Journal of Muslim Mental Health*, *18*(1).
- Embong, R., Abd Rashid, R., & Kamaruddin, K. (2024). Fostering Spiritual And Intellectual Growth Through Dhikr: An Integrated Educational Approach Inspired By Surah Ali Imran. *Jurnal Islam Dan Masyarakat Kontemporari*, 25(1), 15–24.
- English, H. B. (1950). Child psychology.

- Foster, T., Liu, S., Kirkland, K. B., & Batalden, P. (2022). Teaching the Triangle: The Dartmouth-Hitchcock Leadership Preventive Medicine Residency Program. In *Sustainably Improving Health Care* (pp. 69–94). CRC Press.
- Gonzales, M. (2022). Emotional Intelligence for students, parents, teachers and school leaders. *A Handbook for the Whole School Community*.
- Grossoehme, D. H., Friebert, S., Baker, J. N., Tweddle, M., Needle, J., Chrastek, J., Thompkins, J., Wang, J., Cheng, Y. I., & Lyon, M. E. (2020). Association of religious and spiritual factors with patient-reported outcomes of anxiety, depressive symptoms, fatigue, and pain interference among adolescents and young adults with cancer. *JAMA Network Open*, *3*(6), e206696–e206696.
- Grunau, B., Kime, N., Leroux, B., Rea, T., Van Belle, G., Menegazzi, J. J., Kudenchuk, P. J., Vaillancourt, C., Morrison, L. J., & Elmer, J. (2020). Association of intra-arrest transport vs continued on-scene resuscitation with survival to hospital discharge among patients with out-of-hospital cardiac arrest. *Jama*, *324*(11), 1058–1067.
- Hamid, A. (2017). Agama dan kesehatan mental dalam perspektif psikologi agama. *Jurnal Kesehatan Tadulako*, 3(1).
- Hammoudi Halat, D., Soltani, A., Dalli, R., Alsarraj, L., & Malki, A. (2023). Understanding and fostering mental health and well-being among university faculty: A narrative review. *Journal of Clinical Medicine*, *12*(13), 4425.
- Harris, R. (2021). The Reality Slap 2nd Edition: How to survive and thrive when life hits hard. Hachette UK.
- Harun, N. (1985). Islam ditinjau dari berbagai aspeknya Jilid II. Yayasan Obor Indonesia.
- Hasan, M. M., Al Amin, M., Arefin, M. S., & Mostafa, T. (2024). Green consumers' behavioral intention and loyalty to use mobile organic food delivery applications: The role of social supports, sustainability perceptions, and religious consciousness. *Environment, Development and Sustainability*, *26*(6), 15953–16003.
- Hassan, A. N., Ragheb, H., Malick, A., Abdullah, Z., Ahmad, Y., Sunderji, N., & Islam, F. (2021). Inspiring Muslim minds: Evaluating a spiritually adapted psycho-educational program on addiction to overcome stigma in Canadian Muslim communities. *Community Mental Health Journal*, *57*, 644–654.
- Hedegaard, M. (2020). Children's perspectives and institutional practices as keys in a wholeness approach to children's social situations of development. *Learning, Culture and Social Interaction, 26,* 100229.
- Hiltner, S. E., & Menninger, K. E. (1963). Constructive aspects of anxiety.
- Huda, M., & Slamet, S. (2024). Mental health concept in Islamic education. *International Journal of Educatio Elementaria and Psychologia*, 1(3), 172–182.
- Ibrahim, R. Z. A. R., Zalam, W. Z. M., Foster, B., Afrizal, T., Johansyah, M. D., Saputra, J., Bakar, A. A., Dagang, M. M., & Ali, S. N. M. (2021). Psychosocial work environment and teachers' psychological well-being: The moderating role of job control and social support. *International Journal of Environmental Research and Public Health*, *18*(14), 7308.
- Imran, M. H., & Leng, X. (2024). A Critical Review on Pargament's Theory of Religious Coping: In the Context of the COVID-19 Pandemic. *Journal of Religion and Health*, 1–15.
- Indriana, N. (2020). Common Word Dalam Tiga Agama Samawi: Islam, Kristen Dan Yahudi. *An-Nas: Jurnal Humaniora*, 4(1), 32–44. https://doi.org/10.36840/an-nas.v4i1.250
- Japar, M., Semendawai, A. H., & Fahruddin, M. (2024). Hukum Kesehatan Ditinjau dari Perlindungan Hak Asasi Manusia. *Jurnal Interpretasi Hukum*, *5*(1), 952–961.
- Karimullah, S. S. (2023). Holistic Approach in Islamic Education to Improve Mental Health. *EDUCARE: Jurnal Pendidikan Dan Kesehatan*, 1(1), 1–10.
- Karo-Karo, D., Zuhri, A., & Simamora, N. A. (2024). Uncovering The Power of Dhikr from The Perspective of Sufism and Its Relevance in Resisting the Destruction of The World. *Tadrib: Jurnal Pendidikan Agama Islam*, *10*(1), 645–654.
- Killander, M. (2022). Constitutional protection of socio-economic rights in Africa. In Comparative Constitutional

- Law in Africa (pp. 292–311). Edward Elgar Publishing.
- Koenig, H. G. (2012). Religion, spirituality, and health: The research and clinical implications. *International Scholarly Research Notices*, *2012*(1), 278730.
- Koenig, H. G. (2018). Religion and mental health: Research and clinical applications. Academic Press.
- Koenig, H. G., King, D., & Carson, V. B. (2012). Handbook of religion and health. Oup Usa.
- Koenig, M. A. (2012). Beyond semantic accuracy: Preschoolers evaluate a speaker's reasons. *Child Development*, *83*(3), 1051–1063.
- Leuba, J. (1950). "Women Who Fall." The International Journal of Psycho-Analysis, 31, 6.
- Mafruchati, M. (2024). Embryology In The Qur'an: Study on Human Creation Process as a Basis for Studies on Animal Embryos. Zifatama Jawara.
- Malviya, S., Zupan, B., & Meredith, P. (2022). Evidence of religious/spiritual singing and movement in mental health: A systematic review. *Complementary Therapies in Clinical Practice*, 47, 101567.
- Maslow, A. H. (1970). New introduction: Religions, values, and peak-experiences. *Journal of Transpersonal Psychology*, *2*(2), 83–90.
- McGrath, S. P., & Blike, G. T. (2015). Building a foundation of continuous improvement in a rapidly changing environment: The Dartmouth-Hitchcock Value Institute experience. *The Joint Commission Journal on Quality and Patient Safety, 41*(10), 435-AP3.
- Miichi, K. (2019). Urban Sufi and politics in contemporary Indonesia: the role of dhikr associations in the anti-'Ahok'rallies. *South East Asia Research*, *27*(3), 225–237.
- Mubarak, A. K. (2023). Dzikir as a Therapy for Healing Mental Disorders in the Perspective of Imam Al-Ghazali. *Spirituality and Local Wisdom, 2*(2), 41–50.
- Mubarok, A. (2000). Jiwa dalam al-Qur'an: solusi krisis keruhanian manusia modern. Penerbit Paramadina.
- Nguyen, A. W. (2020). Religion and mental health in racial and ethnic minority populations: A review of the literature. *Innovation in Aging*, 4(5), igaa035.
- Nurjanah, T., Abidin, A., Hidayah, F. N., & Isnaini, R. (2022). Efek Ponsel Terhadap Perilaku Remaja Dalam Melaksanakan Sholat Lima Waktu Di Desa Jojog Kecamatan Pekalongan Kabupaten Lampung Timur. *International Journal of Islamic Communication*, 1(2), 83–113.
- Organization, W. H. (2023). WHO Policy Brief on the health aspects of decriminalization of suicide and suicide attempts. World Health Organization.
- Ozcan, O., Hoelterhoff, M., & Wylie, E. (2021). Faith and spirituality as psychological coping mechanism among female aid workers: a qualitative study. *Journal of International Humanitarian Action*, *6*(1), 15.
- Phan, H. P., Ngu, B. H., Chen, S. C., Wu, L., Lin, W.-W., & Hsu, C.-S. (2020). Introducing the study of life and death education to support the importance of positive psychology: an integrated model of philosophical beliefs, religious faith, and spirituality. *Frontiers in Psychology*, *11*, 580186.
- Prasad, B. D. (2008). Content analysis. Research Methods for Social Work, 5(le20).
- Puri, A., Bamel, P., & Sindhu, B. (2023). Recent advances in psychotherapy in the Indian scenario-subconscious energy healing therapy: SEHT for infertility counselling. *J Psychol Clin Psychiatry*, *14*(6), 182–194.
- Rahman, M. T., & Mufti, M. (2021). Massification of youth religious studies to prevent juvenile delinquency in Bandung. *HTS Teologiese Studies/Theological Studies*, 77(4), 9.
- Rita Ramayulis, D. C. N. (2008). Menu dan resep untuk penderita kolesterol. Penebar PLUS+.
- Rosyad, R. (2016). Pengaruh agama terhadap kesehatan mental. Jurnal Syifa Al-Qulub, 1(Juli).
- Saji, I., & dkk. (2022). Pengaruh agama Islam terhadap kesehatan mental penganutnya. *Universitas Pendidikan Indonesia*, 4(1).
- Saniotis, A. (2018). Understanding mind/body medicine from Muslim religious practices of Salat and Dhikr. *Journal of Religion and Health*, *57*, 849–857.
- Satrianegara, M. F. (2014). Pengaruh religiusitas terhadap tingkat depresi, kecemasan, stres, dan kualitas hidup penderita penyakit kronis di kota makassar (kajian survei epidemiologi berbasis integrasi islam dan

- kesehatan). Jurnal Kesehatan, 7(1).
- Saud, M., Ashfaq, A., Abbas, A., Ariadi, S., & Mahmood, Q. K. (2021). Social support through religion and psychological well-being: COVID-19 and coping strategies in Indonesia. *Journal of Religion and Health*, *60*, 3309–3325.
- Saunders, N., & Stephenson, Z. (2024). Reviewing the use of the Brief Religious Coping Scale (Brief RCOPE) across diverse cultures and populations. *Journal of Religion and Health*, *63*(5), 3926–3941.
- Sidik, M. A., & Sarwanto, S. (2024). The Emergence of Free Will and Predestination: Genealogical Studies in History of Early Islamic Thought. *Journal of Philology and Historical Review, 2*(1), 62–74.
- Sucianing, K. A., & Heriyanti, K. (2022). Pengaruh Agama Terhadap Psikis Manusia (Perspektif Psikologi Agama). SWARA WIDYA: Jurnal Agama Hindu, 2(1).
- Sugiyono, D. (2013). Metode penelitian pendidikan pendekatan kuantitatif, kualitatif dan R&D.
- Syme, K. L., & Hagen, E. H. (2020). Mental health is biological health: Why tackling "diseases of the mind" is an imperative for biological anthropology in the 21st century. *American Journal of Physical Anthropology*, 171, 87–117.
- Tafe, L. J., Gorlov, I. P., De Abreu, F. B., Lefferts, J. A., Liu, X., Pettus, J. R., Marotti, J. D., Bloch, K. J., Memoli, V. A., & Suriawinata, A. A. (2015). Implementation of a molecular tumor board: the impact on treatment decisions for 35 patients evaluated at Dartmouth-Hitchcock Medical Center. *The Oncologist*, *20*(9), 1011–1018.
- Thong, D. (2013). *Memanusiakan Manusia*. Gramedia Pustaka Utama.
- Thouless, R. H. (1972). *An introduction to the psychology of religion*. Cambridge University Press.
- Tirivangasi, H. M., & Nyahunda, L. (2024). The interplay of Christianity and Ndau African traditional religion in shaping climate change adaptation in Zimbabwe: An Afrocentric analysis. *Sustainable Development*.
- Tursunovna, S. O., & Munisxon, G. (2021). The Subject of dhikr in the Teachings of Tasawwuf by Hoja Muhammad Porso. *Central Asian Journal of Literature, Philosophy and Culture, 2*(3), 13–17.
- Wijaya, M. R. (2022). Islamic Education in the View of Sufism: Critical study of the role of Sufism in Islamic Education. *Ri'ayah: Jurnal Sosial Dan Keagamaan*, 7(2), 127–139.
- Wilt, J. A., Exline, J. J., & Pargament, K. I. (2024). Coping with religious and spiritual struggles: Religious and secular techniques. *Spirituality in Clinical Practice*, *11*(2), 143.
- Yusuf, M., Rahmadani, A. L., Lestari, Y., & Kurniawan, D. S. (2022). Urgensi Pendidikan Islam Dalam Menjaga Kesehatan Mental Remaja Di Lingkungan Sekolah Pada Era Media Sosial. *Ilmu Al-Qur'an (Iq) Jurnal Pendidikan Islam, 5*.
- Zakiyah, D. (2001). Peran Agama Dalam Kesehatan Mental. *Jakarta: Gunung.*
- Ziaulhaq, M., & Sen, H. (2021). Transforming Hate into Compassion as an Islamic Nonviolent Thought of Bediüzzaman Said Nursi. *Wawasan: Jurnal Ilmiah Agama Dan Sosial Budaya*, *6*(1), 13–30.
- Zolkefley, M. K. I., Che Mohd Nassir, C. M. N., & Jaffer, U. (2023). Work-Life Balance in Managing Stress, Job Satisfaction and Performance: The Wasatiyyah Concept and Neuroscience Perspective. *Global Journal Al-Thagafah*, 13(2), 27–39.