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by Ahmad Guntur Alfianto Indari Putri Rahmadanty, Miftakhul Ulfa

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Ahmad Guntur Alfianto, Indari Putri Rahmadanty, Miftakhul Ulfa

STIKES Widyagama Husada, Malang, Indonesia

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CORRESPONDENCE

E-mail: ahmadgunturr@widyagamahusada.ac.id

No. Tlp : +6281332400366

ABSTRACT

Salafi Islamic boarding schools that adhere to traditional religious learning created literacy problems such as mental health. The emergence of stigma in salafi Islamic boarding schools makes mental health problems encountered in the educational environment. The purpose of this research was to determine the stigma of mental health in salafi Islamic boarding schools. This research method used descriptive quantitative with a survey approach. The sample size 155 students in three salafi Islamic boarding schools in Bantur, Malang District. The measuring instrument using the Peer Mental Health Stigmatization Scale (PMHSS) questionnaire. The result is of this research are self and social stigma of Z generation in salafi Islamic boarding schools is high. The conclusion of this research is stigma of mental health in Z generation in salafi Islamic boarding schools tends to be high.

INTRODUCTION

Mental health problems are currently a thing that needs to be considered. The World Health Organization (World Health Organization) in 2013 stated that there were 450 million people living with mental disorders. In Indonesia in the same year, the number was 1.7 million. In 2018, the prevalence of mental disorders increased to 7% from 2013. In addition to the prevalence of mental disorders, mental health problems also increased in prevalence to 6.1%, with individuals aged over 15 experiencing depression. The rate of emotional mental health problems also increased to 9.8% from 6% in 2013, with individuals aged 15 years and above being predominant (Riskesdas, 2018).

The increasing problem of mental health in society is caused by several factors, one of which is the lack of public knowledge about mental health care in the community (Yin et al., 2020). This lack of knowledge in handling mental health creates a stigma in society about someone with mental health problems. The results of an Indonesian study of 1,269 people noted that the stigma against someone with mental health problems is influenced by several factors, one of which was age (Hartini et al., 2018). In addition, external factors also play a part in the ability to receive knowledge that will change a person's perception of an object. These

factors will drive perceptions in either negative or positive direction. One of the external factors is the media, either directly from technology or indirectly (Baki, Birgoren, and Aktepe, 2018)

Currently, the Indonesian population is dominated by Generation Z'ers, who belong to the age range 15–25 years. Generation Z is a smart generation that is in constant use of the Internet for information and learning media (Verma, Bhardwaj, and Sachan, 2019). Currently, Generation Z is at risk of experiencing ³ mental health problems, especially the risk of early psychosis. This problem is a concern because Generation Z is often more concerned about technology than their social environment (Enos, 2020). Therefore, Generation Z experiences the stigma about mental health problems (Dupont-reyes et al., 2020). Indonesia is the country with the largest Muslim population in the world. This makes education such as one in boarding schools in Indonesia develops (Muazza et al., 2018). Many parents of Generation Z'ers today choose to send their children to Islamic boarding schools. However, this affects the children's mental health, in which case they feel sad, lonely, and excluded, face difficulties adapting, and come into fights or violent engagements between friends (Khamida et al., 2020). The mental health problems often experienced by Generation Z'ers at Islamic boarding schools lead to the emergence of stigma, which is influenced by gender and level of piety (Abuhammad and Al-Natour, 2021).

Islamic boarding schools, especially salafi ones, are known to be traditional institutions that administer informal learning, which can be problematic to Generation Z. Information about health can be poor because salafi Islamic boarding schools only focus on religious learning. Many salafi Islamic boarding school students belonging to this generation think and lead their lives under the guidance of religion (Nor, 2021). In a study on mental health among Generation Z'ers in salafi Islamic boarding schools, 3 students of Generation Z described someone as going crazy as a result of evil spirit possession, and this was usually overcome by *ruqyah*, or exorcism, by *kyai*, or religious teachers. They argued that everyone with a mental disorder has an empty heart. In addition, 2 students stated that in the Islamic boarding school female students often get possessed by evil spirits and lose their mind. The results of another survey in salafi Islamic boarding schools supported in a statement that most of those who display strange behaviors such as falling under evil spirit possession are female students. People experience mental disorder due to a lack of worship or intimacy with God. The aforementioned illustrates the problems faced by Generation Z students within the salafi Islamic boarding school environment, especially in relation to mental health. This study aimed to gain an overview of stigma, be it social stigma or self-stigma, among Generation Z in salafi Islamic boarding schools.

METHOD

This research used a quantitative design and a survey approach. The population in the study was the entire Generation Z students in salafi Islamic boarding schools. A sample of 155 students was extracted from the

population by stratified random sampling technique. The research was carried out in 3 boarding schools in Bantul District, Malang Regency. Data collection was carried out from January to February 2022.

The data were collected by distributing a questionnaire to students of salafi Islamic boarding schools in Bantul District. The questionnaire used was the Peer Mental Health Stigmatization Scale (PMHSS) (Mckeague et al., 2015). The Cronbach's alpha of the English version of the PMHSS was 0.79. This questionnaire was translated into the Indonesian language in accordance with the WHO Guidelines on Translation (World Health Organization, 2016). The questionnaire was subjected to a test with three experts using the Content Validity Index (CVI). The item-level content validity index mean was 0.90, indicating that the questionnaire had a high level of validity and was fit to be used. After the CVI test, the PMHSS was subjected to a validity and reliability test with a Cronbach's alpha of 0.95. The PMHSS consisted of 2 indicators that measured stigma agreement and stigma awareness. Stigma agreement refers to young people's own beliefs about stereotypes, prejudices, and discriminatory behavior (self-stigma), while stigma awareness refers to their perception of stigmatized attitudes espoused by most members of society (social stigma) (Nearchou et al., 2021). There were 24 question items, consisting of 8 questions on self-stigma, 8 questions on social stigma, and 8 positive questions that were not of both scales (4 questions on social stigma and 4 questions on personal stigma). A 5-point Likert scale was used (from 1, strongly disagree, to 5, strongly agree). The result of this questionnaire was that the higher the value, the greater the social stigma, self-stigma, and attitude toward mental health.

The data analysis technique used was numerically disqualified. If the data distribution was normal, then mean and standard deviation were used as a measure of data centering and deployment. However, if the data distribution was not normal, then median and percentile values were used instead. Data analysis used SPSS 25. This research received an ethical approval from the Ethics Committee of STIKES Kepanjen Malang.

RESULT

Table 1 Characteristics of Generation Z respondents in salafi Islamic boarding schools (n = 155)

No	Characteristics	Frequency	Percentage (%)
1	Gender		
	Male	66	42.5
	Female	89	75.5
2	Age		
	Early adolescent (12–16 years old)	95	61.2
	Late adolescent (17–25 years old)	60	38.8
3	Reason to enroll in boarding school		
	Peer invitation	34	21.9
	Voluntary decision	43	27.8

	Parent's advice	64	41.2
	A desire to escape	14	9.0
4	Have you ever seen or met a friend who has strange behavior?		
	Yes	148	86.5
	No	7	4.5
5	The cause of mental health problem is traumatic experience.		
	Agree	15	9.7
	Disagree	140	90.3
6	Mental health problems are God's punishment.		
	Agree	149	96.1
	Disagree	6	3.9
7	Mental health problems are resulted from possession or similar phenomenon.		
	Agree	140	90.3
	Disagree	15	9.7
8	The cause of mental health problems is physical violence.		
	Agree	94	60.6
	Disagree	61	39.4

Table 1 describes the characteristics of the respondents, with data on gender, age, reason for enrolling in boarding school, and knowledge about the causes of mental health problems. Most of the respondents were female (75.5%) and in their early adolescence (12–16 years) (61.2%). Forty-one point two percent of the respondents confessed that they enrolled in boarding school due to their parents' advice. With regard to their knowledge about the causes of mental health problems, nearly all the respondents disagreed that traumatic experience is the cause of mental health problems (90.3%). The majority of them believed that mental health problems are God's punishment (96.1%) and are caused by possession or similar phenomenon (90.3%). Some students also perceived that physical violence causes mental health problems (60.6%). The next data provide a picture of stigmatization of mental health problems in Generation Z in salafi Islamic boarding schools. The chart below shows that the data on mental health stigma among Generation Z in salafi Islamic boarding schools mostly went along a line, but some strayed far from the line. Therefore, the data were assumed not to be normally distributed.

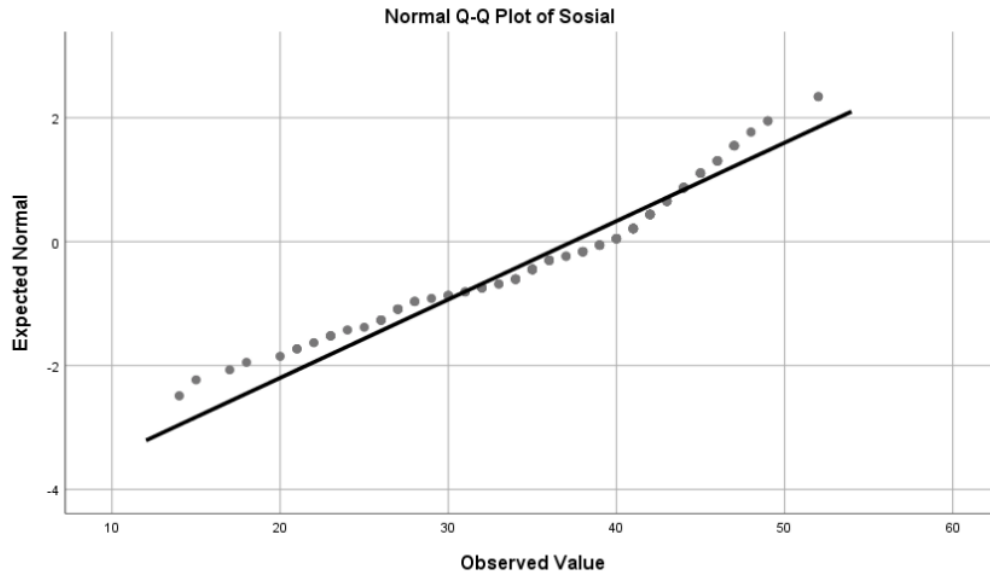


Figure 1. Q-Q plot of mental health stigma among Generation Z in salafi Islamic boarding schools

The data on mental health stigma among Generation Z in salafi Islamic boarding schools (n = 155) were also calculated in a Kolmogorov-Smirnov normality test, and the result was 0.000 (< 0.05). Therefore, it was concluded that the data were abnormal. In consequence, the concentration and dissemination of data were measured using median and percentile values.

Table 2. Distribution of the data on mental health stigma among Generation Z in salafi Islamic boarding schools per indicator (n = 155)

Indicator	Minimum	Maximum	Median
Social Stigma	14	52	40
Self-stigma	12	56	40

Table 2 provides data on mental health stigma for each of the following indicators: social stigma and self-stigma. The indicator social stigma had a median value of 40, which means that the respondents demonstrated a high level of mental health stigma. The same was the case with self-stigma, with a median value of 40.

Table 3. Distribution of data on mental health stigma among Generation Z in salafi Islamic boarding schools (n = 155)

Variable	Minimum	Maximum	Median
Mental health stigma	26	102	80

Table 3, meanwhile, provides data on overall mental health stigma among Generation Z in salafi Islamic boarding schools, with a median value of 80. In conclusion, both per-indicator and overall mental health stigma were high among Generation Z in salafi Islamic boarding schools.

DISCUSSION

The mental health problem found in Generation Z in salafi Islamic boarding schools is a matter of stigma. The stigma of mental disorders in Generation Z in salafi Islamic boarding schools is distinguished in two types, namely self-stigma and social stigma. The self-stigma among Generation Z'ers in this study was high. It is a feeling of having mental health problems, and the person experiencing it is able to recognize and approve of the stigma of their condition. It can result in the person behaving negatively toward themselves (Schwarzbold et al., 2021). The factors affecting self-stigma include sociodemographic ones (e.g., gender, age, status, and education) (Kalisova et al., 2018). In this study, the factors included age and education. Generation Z is of the productive age range (12–25 years old), and it is especially well-versed in using technology (Jaciow and Wolny, 2021)

The social stigma among Generation Z in salafi Islamic boarding schools was also found to be high. Social stigma refers to negative characteristics attached to a person due to environmental influence (Jung, von Sternberg, and Davis, 2017). This high level of stigma was attributed to the level of knowledge on mental health problems of the students in boarding schools. Lack of knowledge gives rise to stigma. Poor knowledge about mental health issues raises problems such as prejudices, stereotypes, discrimination, and exclusion (Stangl et al., 2019). Salafi Islamic boarding schools still adhere to traditional boarding school education systems, and the learning methods employed are still centered on the study of yellow books (*kitab kuning*) or standard Arabic literature. The novelty literature available is minimal (Musaddad, 2021). This fact is highly influential to the literacy level of Generation Z in salafi Islamic boarding schools related to mental health problems, especially on self-stigma and social stigma.

The phenomenon of high levels of stigma in Islamic boarding schools related to mental health is not only influenced by age and education. Another factor is the education system applied in Islamic boarding schools, including the use of technology as a source of literacy to improve students' knowledge (Kholili, 2021). The learning model in salafi Islamic boarding schools, especially in relation to health problems, is also a problem. Phenomena such as Islamic boarding schools or *kyais* (religious teachers) not involving health workers in health problems prevention are extremely widespread. To make matters worse, many students have more confidence in the words of *kyais* when it comes to health than in health workers (Bajari, Wahyudin, and Erlandia, 2019).

The mental health stigma among Generation Z in boarding schools can actually be prevented by cross-sectorial prevention cooperation. For instance, establishing a poskestren (health unit in boarding school) enables prevention of health problems in boarding schools. The use of learning media and especially

technology related to health knowledge is also very important, given that Generation Z is heavily dependent on technology to learn (Seibert, 2021).

Prevention of mental health stigma can also be performed using a psychotherapeutic approach. This approach includes therapies such as psychoeducation. In addition to mental health education, a psychological approach can also be utilized. It is hoped that these approaches will help prevent mental health problems in the community (Alfianto et al., 2019). There are many other ways in which Islamic boarding schools can prevent mental health problems, one of which is playing sufi music (Gurbuz-Dogan et al., 2021). The spiritual approach used by *kyais* is also believed by students to be able to prevent mental health problems in Islamic boarding schools (Saniri, 2021). Therefore, the stigma of mental health problems in Generation Z in Islamic boarding schools can be overcome using a *kyai*-centered approach in collaboration with health workers.

CONCLUSION

The stigma of mental health problems among Generation Z in salafi Islamic boarding schools is high. It is divided into two types, namely self-stigma and social stigma. Both self-stigma and social stigma among Generation Z against mental health issues are high. Therefore, efforts to reduce and prevent the stigma in salafi Islamic boarding schools through a technology-centered approach and cross-sectorial cooperation (with puskesmas/health workers) are important.

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