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DESCRIPTION OF MENTAL HEALTH IN YOUNG WOMEN WHO PARTICIPATE IN ISLAMIC MENTORING AT STIKES BUDI LUHUR CIMAH

¹Dyeri Susanti, ²Fathimah Az-Zahra, ³Marzita Wardany, ⁴Syakirina Agnia
^{1,2,3,4}STIKes Budi Luhur Cimahi

ABSTRACT

Mental health is the condition of a person who is aware of his abilities and is physically, mentally, spiritually and socially healthy. Mental health no longer only discusses mental disorders, but healthy groups and risks also need to be known so that people take appropriate action, one of which is mental health in adolescents. The aim of this research is to determine the mental health picture of young women who take part in Islamic mentoring at STIKes Budi Luhur Cimahi. This research uses a descriptive approach method. Sampling was taken using simple random sampling with a total sample of 96 people, namely young women at STIKes Budi Luhur Cimahi. The instrument used was a mental health questionnaire in the form of a Google form. Data were analyzed using univariate analysis.

Keyword : mental health; teenager; Islamic religious mentoring; emotional disturbance

INTRODUCTION

The mental and emotional health of adolescents is an important issue that influences individual development and society in general. Among the Muslim youth community in Indonesia, Islamic spiritual values have a significant role in shaping their mental and emotional health. This research aims to provide an overview of the emotional mental health of Muslim adolescents at the Budi Luhur Cimahi College of Health Sciences (STIKes), by focusing on the level of application of Islamic spiritual values.

Teen mental and emotional health is a topic that is gaining increasing attention at the national level. According to data from the Ministry of Health of the Republic of Indonesia, the prevalence of mental health disorders among teenagers continues to increase. This data reveals that mental health problems not only include serious disorders such as depression, but also more general emotional problems such as anxiety (Indonesian Ministry of Health, 2018).

According to the Indonesia-National Adolescent Mental Health Survey 2022, 15.5 million (34.9 percent) teenagers experience mental problems and 2.45 million (5.5 percent) teenagers experience mental disorders. Of that number, only 2.6 percent accessed counseling services, both emotional and behavioral. According to data compiled by Our zworld Data 2019, Indonesian women are more likely to suffer from mental health disorders than men.

Coordinator of the SDGs National Secretariat Expert Team of the Ministry of National Development Planning (PPN)/National Development Planning Agency (Bappenas) Yanuar Nugroho said that the mental health condition of young people is currently classified as worrying. In fact, they are the key for Indonesia to get out of the middle-income trap and take advantage of the demographic bonus.

At the West Java level, the province with the largest population in Indonesia, adolescent mental health problems are also a serious concern. Factors such as urbanization, academic pressure, and socio-economic changes can influence the mental health of adolescents in this region (West Java Provincial Central Statistics Agency, 2020).

Cimahi City, which is the location where this research took place, has unique characteristics that can influence adolescent mental health. The rapid growth of cities, changes in the social environment, and cultural differences within them can influence how teenagers deal with stress and challenges in their lives (Cimahi City Government, 2021).

The mental health of students, especially female students, is often influenced by a number of complex background factors. Several factors that can contribute to mental health outcomes for female students include academic pressure, relationship problems, feelings of equality, environmental changes, body image and body shaming, stigma related to mental health, social supports, biological factors, and multiple demands.

METHOD

a. Types and Research Design

The type of research used by researchers is quantitative research using a descriptive research design. This research aims to find out about the mental health picture of young women who take part in Islamic mentoring.

b. Time and Place of Research

This research will be carried out in January at the Budi Luhur Cimahi College of Health Sciences (STIKes).

c. Population and Sample

1. Research Population

This research included all young women who took part in Islamic mentoring at STIKes Budi Luhur Cimahi with a total of 526 people.

Table 3.1

Research population data

DIII MIDWIFERY	NUMBER OF STUDENTS
TIER 1	26
TIER 2	33

Table 3.2

Research population data

DIII NURSING	NUMBER OF STUDENTS
TIER 1	59
TIER 2	57

Table 3.3

Research population data

SI NURSING	NUMBER OF STUDENTS
TIER 1	193
TIER 2	196

Table 3.4

Research population data

SI MIDWIFERY	NUMBER OF STUDENTS
TIER 1	9

2. Research Sample

In the research, the author took a sample of approximately 59 respondents, considering that this number was expected to be representative as a research sample. The following is the form of Yount's formula (1999), as follows:

Population size	Sampel Size
0-100	100%
101-1.000	10%
1.0001- 5.000	5%
5.000-10.000	3%
>10.000	1%

Based on the population of 526 young women, the sample in this study was 59 young women. This calculation uses the following formula:

$$\begin{aligned}
 N &= \text{Population} \times 10\% \\
 &= 526 \times 10\% \\
 &= 52.6 \text{ (53)}
 \end{aligned}$$

3. Sampling Technique

In this research, researchers used probability sampling. In this study, simple random sampling was used.

d. Data collection technique

1. Research Data Source

The data source used by researchers to research is primary data, because researchers take data directly by distributing questionnaires. Primary data is data collected based on direct interaction between the collector and the data source.

2. Data collection technique

The following are the steps taken by researchers in collecting data:

- a) Request research permission from the Head of the Academic Administration Board of the Budi Luhur Cimahi College of Health Sciences
- b) Submit an application for ethical clearance to the Health Research Ethics Commission of the Budi Luhur Cimahi College of Health Sciences
- c) Researchers approach respondents according to the lottery results
- d) Researchers explain the aims and benefits of the research to potential respondents
- e) Provide an application form and consent to become a respondent
- f) Give questionnaires to respondents, explain how to fill out the questionnaire, and inform respondents to fill in the questionnaire completely
- g) Give respondents the opportunity to ask questions if there is an unclear explanation
- h) Collect and double-check the completeness of the respondent's questionnaire
- i) Carry out data processing and analysis
- j) Research variable is something or an object that can be measured. The main variable in this research is the mental health of young women.

e. Research Instrument

The instrument used by researchers in this study was a questionnaire. The questionnaire was chosen considering the large number of respondents and the type of research in the form of a questionnaire to measure the picture of mental health in young women at STIKes Budi Luhur Cimahi. The questionnaire used in data collection was the MHC-SF which was standardized and translated into Indonesian by Raden Farras.

Mental Health Continuum-ShortForm (MHC-SF) (Keyes et al., 2008) which measures emotional well-being, social well-being and psychological well-being. The Mental Health Continuum-Short Form has a total of 14 items and has a Cronbach Alpha coefficient value of 0.845. The emotional well-being subscale has 3 items (Cronbach's alpha = 0.693). An example of an item measuring emotional well-being is: "In the last two weeks, how often have you felt happy?" The range of responses available is from "Never - Every Day." The social well-being subscale has 5 items (Cronbach's alpha = 0.787). An example of an item from measuring social well-being is: "In the last two weeks, how often have you felt that you had something to give

to society?" The range of responses available is from "Never-Every Day." The psychological well-being subscale has 6 items (Cronbach's alpha = 0.842). An example of an item measuring social well-being is: "In the last two weeks, how often did you feel able to manage your daily personal responsibilities?" The range of responses available is from "Never-Every Day."

RESULT

Based on the research results, it is known that the majority of respondents had a low mental health category, namely 27 people (50.9%).

Adolescence is a developmental phase between childhood and adulthood, lasting between the ages of 10 – 19 years. During adolescence, many changes occur, both biological, psychological and social. Girls' physical development begins to develop at the age of 10.5 years and is fastest at the age of 12 years. Physical development in girls includes: 1) rapid physical growth (aged 10 – 11 years); 2) breast growth (10 – 11 years); 3) growth of pubic hair (10 – 11 years), and armpit hair (12 – 13 years); 4) vaginal discharge (10 – 13 years); 5) production of sweat glands (12-13 years); 6) menstruation (11 – 14 years). Physical development in girls does not seem to be in line with psychological maturation. Breasts that grow prematurely often cause feelings of shame because they are treated as adults even though teenagers are not ready to face it.

A teenager can no longer be called a child, but cannot be considered an adult either. On the one hand, he wants to be free and independent, free from parental influence, but on the other hand, basically he still needs the help, support and protection of his parents. Parents often do not know or understand the changes that occur so they do not realize that they have grown into teenagers, no longer children who are always helped. Parents become confused about dealing with the emotional lability and behavior of teenagers so that conflict will occur between the two. If conflicts that occur between parents and teenagers are not resolved, they will have a negative impact on the teenagers themselves or the relationship between teenagers and their parents. Conditions like this, if not treated immediately, can continue into adulthood and can develop in a more negative direction. Among other things, mental problems and disorders can arise from mild to severe.

Examples

Table 2: Frequency Distribution of Student Grades

Intervention Group Evaluation	Frequency	Percent
Did Not Pass	x	Y
Pass	Q	R
Total	O	P

Table 3. Average Distribution of Student Grades

Variable	Mean	Std. Deviation	Minimum Value	Max Value	N
X1	A	B	C	D	E

DISCUSSION

The discussion section delves into the research findings. It is written in Arial 11, single-spaced, with no indentation for the first paragraph. Subtitles are omitted, and the manuscript is formatted in a single column aligned left and right. From the second paragraph onward, a Special First Line indentation of 0.5" is applied.

CONCLUSION AND SUGGESTIONS

This section contains conclusions and suggestions. It is written in Arial 11, single-spaced, with no indentation for the first paragraph. Subtitles are omitted, and the manuscript is

formatted in a single column aligned left and right. Starting from the second paragraph, a Special First Line indentation of 0.5" is employed.

ACKNOWLEDGEMENTS

Based on the research results, it can be concluded that the majority of respondents had a low mental health category, namely 27 people (50.9%).

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