



Adolescent Depression in the Digital Era: An Analysis of Prophetic Hadith as the Foundation of Humanistic Islamic Counseling

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ABSTRACT

Adolescent depression has emerged as a significant mental health challenge in the digital era, driven by excessive social media exposure, cyberbullying, identity crises, and weakened interpersonal relationships. These conditions demand a holistic counseling approach that integrates psychological, ethical, and spiritual dimensions. This study examines the prophetic hadith as a foundational framework for developing a humanistic Islamic counseling model in addressing adolescent depression. Employing a qualitative research design based on library research, this study applies a thematic (*maudhu'i*) analysis of selected hadiths related to emotional well-being, hope, patience, compassion, social support, and the prohibition of despair. The findings reveal that the Prophet Muhammad, PBUH, emphasized psychological balance, empathy, positive coping strategies, and communal responsibility as essential elements in maintaining mental health. Values such as *rahmah* (compassion), *sabr* (patience), *tawakkal* (trust in God), and emotional self-regulation are shown to be highly relevant to contemporary adolescent counseling practices. From this perspective, Islamic counseling grounded in hadith does not promote spiritual escapism but rather encourages active resilience, self-awareness, and social connectedness. The study argues that a humanistic counseling model rooted in prophetic teachings can serve as a preventive and curative approach to adolescent depression in the digital age. This research contributes to the development of Islamic counseling discourse, enriches hadith studies with mental health perspectives, and offers an alternative ethical framework for addressing youth depression in modern society.

INTRODUCTION

Adolescent depression is a mental health issue that has become increasingly concerning in recent decades, particularly amid the rapid development of digital technology. The World Health Organization (WHO) identifies depression as one of the leading causes of illness and disability among adolescents worldwide. This condition not only affects adolescents' psychological well-being but also has significant implications for their social functioning, academic performance, and spiritual development. Moreover, untreated depression increases the risk of destructive behaviors, including substance abuse, self-harm, and suicide, making adolescent depression a critical public health concern that requires comprehensive and multidisciplinary intervention (WHO, 2024).

In the digital age, adolescents inhabit an increasingly complex social environment. Social media, digital devices, and the internet provide unprecedented access to information and social connectivity; however, they also generate new forms of psychological pressure. Exposure to unrealistic standards of perfection, a pervasive culture of social comparison, cyberbullying, and digital addiction has become a significant factor intensifying adolescents' mental vulnerability (Twenge, 2017). These challenges are further exacerbated by the weakening of warm interpersonal relationships within families and local communities, resulting in adolescents often facing psychological distress in isolation without sufficient emotional support.

Within many Muslim communities, adolescent depression is frequently understood in a limited and reductionist manner. Mental health problems are often attributed solely to weak faith, insufficient religious practice, or a lack of patience (*ṣabr*). Such perspectives risk producing stigma, victim-blaming, and moral judgment, which may discourage adolescents from seeking professional mental health services or constructive social support. Consequently, there is an urgent need for a counseling approach that does not rely exclusively on psychological frameworks but instead integrates spiritual values with a strong humanistic orientation (Badri, 2000).

Islam, as a religion of mercy for all creation (*raḥmatan lil-ʿālamīn*), emphasizes holistic human well-being encompassing physical, psychological, social, and spiritual dimensions. The hadith of the Prophet Muhammad PBUH, as the second primary source of Islamic teaching after the Qur'an, contains rich ethical and humanistic principles relevant to mental health. These include prohibitions against despair, encouragement of mutual assistance, compassion, empathy, and the cultivation of hope in the face of life's difficulties (Qardhawi, 2002). Within an Islamic–psychological framework, adolescent depression can be understood as a condition affecting both *nafs* (psyche) and *rūḥ* (spiritual self). Clinically, it manifests as persistent sadness, anhedonia, disrupted sleep and appetite, and negative self-evaluation. Islam complements this view by emphasizing loss of *maʿnā* (meaning), weakened *tawakkul*, and spiritual disconnection. Prophetic hadith addressing hope (*rajāʾ*), patience (*ṣabr*), and emotional regulation offer culturally resonant therapeutic resources that remain insufficiently integrated into contemporary adolescent counseling models (Awaad & Ali, 2015; Beck et al., 1979; H. G. Koenig, 2018).

Unlike depression in adults, adolescent depression often presents through externalizing behaviors such as irritability, aggression, social withdrawal, and self-harm. The complexity of emotional development and identity formation during adolescence places this age group at heightened vulnerability to psychological distress (American Psychiatric Association, 2013).

The digital age introduces a distinct dimension to the dynamics of adolescent depression. Social media functions not only as a communication tool but also as a critical space for identity construction and self-validation. Dependence on virtual approval—such as "likes," comments, and online recognition—can intensify social anxiety and feelings of inadequacy when expectations are unmet. Furthermore, algorithm-driven content consumption encourages excessive screen engagement, contributing to mental exhaustion, emotional dysregulation, and confusion of personal values. These dynamics reinforce adolescents' susceptibility to depression and social isolation in digitally mediated environments (Turkle, 2011).

In this context, counseling approaches that solely focus on modern psychotherapy techniques often fail to fully address the spiritual needs and meaning of life of Muslim adolescents. Conversely, normative religious approaches lacking psychological sensitivity also risk deepening adolescents' emotional wounds. Therefore, an integrative counseling model is needed that combines prophetic values with principles of humanism and modern psychology (Rothman & Coyle, 2018).

Islamic counseling fundamentally aims to assist individuals in attaining holistic well-being (*sa'ādah*) through approaches that are aligned with the ethical and spiritual values of Islamic teachings. However, in its contemporary development, Islamic counseling is increasingly required to adopt a more humanistic, contextual, and responsive orientation in addressing the real challenges faced by modern society, including the growing prevalence of mental health problems among adolescents (Faqih, 2001). This shift reflects the need to engage not only with doctrinal norms but also with lived human experiences in rapidly changing social and digital environments.

The humanistic counseling approach emphasizes core principles such as empathy, unconditional positive regard, authenticity in interpersonal relationships, and respect for inherent human dignity. These principles closely resonate with the teachings embedded in the hadith of the Prophet Muhammad PBUH, which consistently place compassion, gentleness, and social responsibility at the center of human interaction. From a humanistic psychological perspective, Carl Rogers highlights empathy and acceptance as essential conditions for personal growth and psychological healing, particularly for individuals experiencing emotional distress (Rogers, 1961).

Thus, hadith-based humanist Islamic counseling is not intended to replace modern psychological approaches, but rather to enrich and direct them to be more spiritually and ethically meaningful. This type of counseling positions adolescents not as objects of preaching or "guilty" individuals, but as human beings struggling with emotional wounds and in need of empathetic support.

The hadith of the Prophet Muhammad, PBUH, contain numerous ethical and spiritual principles that are highly relevant to the treatment of depression. The prohibition against despairing of God's mercy highlights the central role of hope (*rajā'*) as a source of psychological strength and emotional resilience. Likewise, the concept of patience (*ṣabr*) in Prophetic teachings is not understood as passive endurance, but as an active and conscious form of resilience in responding to life's hardships. The Prophet PBUH also consistently demonstrated empathetic listening, attentiveness to personal suffering, and non-judgmental support toward his companions, offering emotional reassurance rather than moral condemnation in moments of distress (Al-Jauziyah, 2006).

In addition, Prophetic hadiths emphasizing social solidarity affirm that individual suffering is a shared communal responsibility. The Prophet Muhammad PBUH stated, *"The likeness of the believers in their mutual love, compassion, and mercy is like a single body; when one part suffers, the whole body responds with sleeplessness and fever"* (Muslim ibn al-Ḥajjāj, n.d., *Kitāb al-Birr wa al-Ṣilah*). This ethical principle is particularly relevant in addressing adolescent depression, where supportive family relationships, educational institutions, and community networks function as crucial protective factors against psychological deterioration.

Through a thematic (*mawḍū'ī*) reading, this study advances an epistemological novelty by reconstructing Prophetic hadith not merely as moral exhortations but as a structured epistemic foundation for Islamic counseling ethics. Hadith are repositioned as sources of therapeutic knowledge that inform recovery-oriented, preventive, and resilience-based interventions. Simultaneously, the contextual novelty lies in situating this framework within the lived realities of adolescents in the digital era, marked by algorithmic pressure, social comparison, and emotional fragmentation. By integrating Prophetic ethics—compassion, shared responsibility, emotional validation, and hope—with contemporary mental health discourse, this model offers a culturally grounded and context-sensitive response to adolescent depression.

Based on the background above, this research focuses on the main questions: (1) What is the view of the Prophet Muhammad's hadith on mental health, sadness, and despair? (2) How relevant are the values of the Prophet's hadith as a basis for developing humanist Islamic counseling in dealing with adolescent depression in the digital era?

This study aims to systematically analyze the Prophet's hadiths relating to mental health and formulate them as a conceptual foundation for humanist Islamic counseling. Theoretically, this research is expected to enrich the study of hadiths from a mental health perspective. Practically, this research contributes to the development of a more empathetic, contextual, and prophetic counseling model for adolescents.

METHODS

Research Design

This study uses a qualitative approach with library research. This approach was chosen because the focus of the study is the analysis of the text and meaning of the Prophet Muhammad's hadith related to the issue of adolescent depression and its relevance as a basis for humanistic Islamic counseling. The primary data for this study are sourced from primary hadith books such as *Ṣaḥīḥ al-Bukhārī*, *Ṣaḥīḥ Muslim*, *Sunan Abī Dāwūd*, *Sunan al-Tirmidhī*, and *Musnad Aḥmad*, as well as classical and contemporary hadith commentary literature. Secondary data were obtained from books, scientific journals, and previous research results that discuss adolescent depression, Islamic counseling, and the humanistic approach in psychology.

Data analysis was conducted using a thematic approach (*maudhu'i*), a method of studying hadith by collecting relevant hadith based on a specific theme, then analyzing them comprehensively to discover the principles, values, and patterns of meaning contained therein. The main themes examined in this study include sadness and mental stress, the prohibition of despair, patience, hope, empathy, social support, and emotional control. Each hadith was analyzed not only textually but also contextually, taking into account the historical background (*asbab al-wurud*) and the understanding of scholars.

To maintain the validity and accuracy of the analysis, this study applies limited hadith criticism, particularly to the authority of the sources and the acceptance of the hadiths by scholars. The hadiths used are prioritized from sources with high authority and widely accepted within Islamic scholarship. Furthermore, the interpretation of the hadith is linked to the general principles of Islamic teachings and compared with findings in modern psychology and counseling studies to avoid partial or ahistorical understandings.

The final stage of the analysis focused on formulating a conceptual framework for hadith-based humanist Islamic counseling. The identified prophetic values were then integrated with humanistic counseling principles, such as empathy, acceptance without stigma, and strengthening adolescents' self-potential. The results of this analysis are expected to produce an applicable and relevant conceptual model to address the challenges of adolescent depression in the digital age, while also enriching hadith studies with a contemporary mental health perspective.

RESULT AND DISCUSSION

Result

Depression is generally defined as a mood disorder marked by persistent sadness, loss of interest or pleasure, cognitive distortions, and behavioral changes that interfere with daily functioning. Within clinical psychology, adolescent depression is understood as a distinct developmental phenomenon because it emerges during a critical period of identity formation, emotional maturation, and social repositioning. Unlike adults, adolescents often have limited verbal and emotional capacities to articulate internal distress, so depressive symptoms are more frequently expressed through behavioral changes, irritability, and relational difficulties rather than explicit sadness (Steinberg, 2017). Empirical studies indicate that adolescent depression frequently manifests through irritability, withdrawal from social interaction, declining academic engagement, and increased vulnerability to risky or self-destructive behaviors (Thapar et al., 2012).

The Diagnostic and Statistical Manual of Mental Disorders, fifth edition (DSM-5), emphasises the uniqueness of this development by stating that depressive episodes in adolescents are not

always characterised by obvious sadness. Instead, persistent anger, oppositional or defiant behaviour, and somatic complaints such as headaches and fatigue are often the primary expressions of depression in this age group ([American Psychiatric Association, 2013](#)). These unusual manifestations often cause adolescent depression to go unidentified early on, resulting in delayed diagnosis and intervention during a period of development that is crucial in determining long-term mental health.

Theoretically, depression in adolescents is best understood through a biopsychosocial framework that emphasises the interaction between biological vulnerability, psychological processes, and social context. From a biological perspective, hormonal fluctuations during puberty and neurotransmitter dysfunction contribute to emotional instability and increased sensitivity to stress. Psychological factors include low self-esteem, maladaptive cognitive schemas, difficulty regulating emotions, and limited coping skills. Meanwhile, social factors include academic pressure, family conflict, peer rejection, and social marginalisation ([Myers, 2013](#)). This framework emphasises that adolescent depression cannot be reduced solely to individual pathology, but must be understood within a broader network of relationships and environments.

In contemporary society, these biopsychosocial dynamics are further reinforced by the digital environment. Digital technology has changed the way young people construct their identities, form social relationships, and assess their self-worth. Social media serves as the primary space for self-presentation, social comparison, and validation seeking. Jean M. Twenge describes today's adolescents as part of the "iGen, a generation that has grown up in an immersive digital environment and exhibits higher levels of anxiety and depression than previous generations ([Twenge, 2017](#)). Constant connectivity places adolescents in a continuous cycle of social evaluation, where self-worth is heavily dependent on online visibility and feedback.

Social comparison mechanisms become very dominant in this context. Constant exposure to idealised images of bodies, lifestyles, and achievements encourages the formation of unrealistic standards. Repeated upward comparisons can lead to feelings of inadequacy, frustration, and despair, thereby reinforcing depressive thinking patterns. Furthermore, cyberbullying has been empirically proven to correlate with increased symptoms of depression, self-harming behaviour, and suicidal ideation in adolescents ([Hinduja & Patchin, 2015](#)). Jonathan Haidt adds that the rapid expansion of social media has disrupted adolescents' emotional development by amplifying social anxiety, moral outrage, and psychological vulnerability ([Haidt, 2024](#)).

Beyond overt forms of aggression, digitally mediated relationships also have the potential to erode emotional depth. Sherry Turkle's analysis of digital culture highlights the paradox of "loneliness in connectedness, a condition in which young people have extensive online social networks but still experience profound existential loneliness. Screen-based interactions dominated by speed and performativity, rather than presence and empathy, reduce the space for deep listening and authentic emotional attachment ([Turkle, 2011](#)). This relational void exacerbates depressive tendencies as adolescents lose meaningful experiences of emotional validation.

In this complex psychosocial landscape, adolescent counselling becomes an important intervention to help individuals understand themselves, regulate their emotions, and develop adaptive coping strategies. Among the dominant counselling paradigms—psychodynamic, cognitive-behavioural, and humanistic—the humanistic approach has particular relevance for adolescents. Rooted in the thinking of Carl Rogers, humanistic counselling emphasises empathy, unconditional positive regard, and authenticity as the primary therapeutic conditions for psychological growth ([Corey, 2017](#)). This approach does not view individuals as "problems" that need to be fixed, but rather as people who are experiencing suffering and need a safe space to be heard, understood, and validated.

Rogers' concept of the actualising tendency states that humans have an innate drive towards growth, wholeness, and self-actualisation. Depression, in this perspective, is understood as a response to experiences of rejection, stigma, or conditional acceptance. For adolescents who are still in the process of identity formation and are highly dependent on social relationships, a lack of

empathic understanding can hinder this natural growth process (Rogers, 1961). Therefore, counselling that prioritises emotional validation, deep listening, and authentic presence is a developmentally appropriate response that is also grounded in relational ethics.

This humanistic perspective strongly resonates with Islamic ethical teachings, especially those derived from the hadith of the Prophet Muhammad PBUH, which emphasize gentleness (*rifq*), compassion (*rahmah*), and respect for human dignity (*karāmah al-insān*). The Prophet's interactions exemplify empathetic listening, emotional sensitivity, and avoidance of harsh judgment, values that closely parallel the core principles of humanistic counseling. Consequently, integrating humanistic counseling with Islamic values offers a more empathetic, culturally grounded, and contextually relevant model of Islamic counseling (Adz-Dzakiey, 2007).

Islamic counseling itself can be understood as a process of psychological assistance grounded in Islamic values, aimed at achieving balance in life (*tawāzun*) and well-being in both worldly and spiritual dimensions. Aunur Rahim Faqih emphasizes that Islamic counseling is not merely problem-solving oriented, but also focuses on nurturing faith, moral character, self-awareness, and a conscious relationship with Allah. Through the integration of humanistic counseling principles and Islamic ethical teachings, Islamic counseling can develop into a holistic and dignified approach capable of addressing adolescent depression in a compassionate and transformative manner (Faqih, 2001).

In practice, Islamic counseling has often remained normative and prescriptive, focusing primarily on moral exhortation and the fulfillment of religious obligations. While such an approach is valuable, it may lack sufficient sensitivity to the psychological well-being of clients, particularly adolescents experiencing depression. Consequently, contemporary scholars increasingly advocate for the development of Islamic counseling models that are more humanistic, dialogical, and oriented toward psychological recovery, without abandoning their spiritual foundations (Badri, 2000).

Humanistic Islamic counseling seeks to integrate modern psychological principles with prophetic ethical values, enabling mental health interventions that address emotional suffering while preserving spiritual meaning. Within this framework, the hadith of the Prophet Muhammad PBUH function not merely as legal or ritual references, but as sources of ethics, inspiration, and value orientation that guide the counseling relationship and process. Such integration allows counselors to engage clients empathetically, validate emotional experiences, and foster hope and resilience grounded in faith.

Although the hadith literature does not employ modern psychological terminology, it contains numerous teachings relevant to mental health concerns. Concepts such as sadness (*ḥuzn*), anxiety (*hamm*), and despair (*you is*) are discussed extensively in both hadith and classical Islamic scholarship. Ibn Qayyim al-Jawziyyah, for instance, examines diseases of the heart and soul in *al-Dā' wa al-Dawā'*, emphasizing the necessity of spiritual and emotional balance as a foundation for psychological well-being (Al-Jauziyah, 2006). His analysis reflects an early recognition of the interconnection between emotional distress and spiritual health.

Prophetic teachings consistently emphasize hope (*rajā'*) as a central element of mental resilience, as reflected in the prohibition against despairing of God's mercy. The Prophet Muhammad PBUH also modeled profound empathy in responding to individuals experiencing grief and loss, offering comfort, reassurance, and presence rather than blame or judgment (Nawawi, 1996a). Furthermore, hadiths emphasizing social solidarity underscore that personal suffering is not solely an individual burden, but a collective responsibility of the community. This principle closely aligns with contemporary counseling theories that identify social support as a critical protective factor in recovery from depression.

Methodologically, the thematic (*mawḍū'ī*) approach in hadith studies provides a systematic means of engaging these Prophetic teachings. By collecting and analyzing hadiths according to specific themes, this method enables scholars to construct a comprehensive and contextual understanding of Islamic teachings related to mental health. As emphasized by Al-Qaradawi, the thematic approach facilitates the meaningful application of hadith to contemporary issues, including

adolescent depression in the digital age, thereby strengthening the relevance of Islamic counseling in addressing modern psychological challenges (Qardhawi, 2002).

Using a thematic approach, hadiths on patience, hope, empathy, and social support can be formulated into principles of humanist Islamic counseling. This approach also helps avoid partial and textualist understandings that could stigmatize individuals with mental disorders.

Numerous studies have explored the relationship between religion, spirituality, and mental health, demonstrating that healthy and well-integrated religiosity can function as a protective factor against depression. When religious beliefs and practices are expressed within an empathetic, supportive, and inclusive framework, they contribute positively to emotional regulation, meaning-making, and psychological resilience. Such findings indicate that spirituality can play a constructive role in mental health promotion and recovery, particularly among adolescents facing emotional vulnerability (H. Koenig et al., 2012).

Despite this growing body of research, studies that specifically examine the hadith of the Prophet Muhammad PBUH as a theoretical and practical foundation for counseling interventions addressing adolescent depression remain relatively limited. This gap highlights the need for further scholarly inquiry that systematically integrates Prophetic teachings with contemporary counseling theories. Developing such an approach would not only enrich the academic discourse on religion and mental health but also provide culturally and spiritually relevant counseling models for Muslim adolescents in the context of modern psychological challenges.

Some Islamic counseling studies tend to focus on aspects of worship and morality, while the humanistic and psychological dimensions have not been explored in depth. Therefore, this research is strategically positioned to fill this academic gap by offering an integration of hadith studies, humanistic counseling, and adolescent mental health issues in the digital age.

Based on the literature review above, this study is based on the assumption that adolescent depression in the digital age requires a holistic and contextual counseling approach. The hadith of the Prophet Muhammad PBUH provide a rich ethical and spiritual foundation for building humanistic Islamic counseling that emphasizes empathy, hope, and social responsibility. Therefore, the integration of hadith and humanistic counseling is expected to significantly contribute to the development of adolescent counseling theory and practice in contemporary Muslim societies.

DISCUSSION

Prophetic Hadiths on Mental Health and Adolescent Depression

In the tradition of the Prophet Muhammad's hadith, experiences of sadness, inner turmoil, and psychological suffering are not positioned as marginal realities or something to be denied. Although modern clinical terminology, such as depression, is unknown in classical Arabic discourse, prophetic teachings have substantively recognised and named equivalent psychological conditions through concepts such as *ḥuzn* (sadness), *hamm* (anxiety), *ghamm* (oppression and inner turmoil), and *yū* (despair). The existence of these terms indicates that psychological suffering is understood as part of human nature, requiring an approach full of empathy, ethical guidance, and spiritual strengthening, rather than judgment or denial.

The personal experience of the Prophet Muhammad himself provides very strong normative legitimacy for the recognition of the reality of human sadness. The events of 'ām al-ḥuzn (Year of Sorrow), when he lost Khadijah bint Khuwailid—his wife, companion, and most important emotional support—as well as Abū Ṭālib—his uncle and social protector—became an existential moment that marked a deep sorrow in the Prophet's life (al-Tabari, 1963). This episode is important theologically and psychologically because it affirms that sadness and emotional wounds are not signs of weak faith. On the contrary, sadness is understood as a legitimate human experience, even experienced by a prophet who has the closest spiritual relationship with Allah. Ibn Qayyim al-Jawziyyah emphasises that inner suffering that is acknowledged and directed in the right way actually reflects the depth of human honesty and vulnerability, not spiritual deficiency (Al-Jauziyah, 1998).

Recognition of sadness in the life of the Prophet provides an ethical and theological basis for understanding emotional distress as an existential reality of human beings. The prophetic model does not encourage denial of emotions or repression of grief, but rather shows the importance of acknowledging pain while maintaining hope, patience, and trust in Allah. This balanced approach directly challenges stigmatising views that equate mental suffering with failure of faith. Ibn Hishām, through his sirah narrative, depicts the Prophet as a figure who felt deep sorrow, yet did not become trapped in despair, thus placing sadness within a framework of meaning and hope (Ibn Hishām, 1990).

The prophetic dimension of counselling is very clear in the hadith of the prayer taught by the Prophet PBUH to deal with psychological pressure:

حَدَّثَنَا خَالِدُ بْنُ مَخْلَدٍ، حَدَّثَنَا سُلَيْمَانُ، قَالَ حَدَّثَنِي عَمْرُو بْنُ أَبِي عَمْرٍو، قَالَ سَمِعْتُ أَنَسًا، قَالَ كَانَ النَّبِيُّ صَلَّى اللَّهُ عَلَيْهِ وَسَلَّمَ يَقُولُ "اللَّهُمَّ إِنِّي أَعُوذُ بِكَ مِنَ الْهَمِّ وَالْحَزَنِ، وَالْعَجْزِ وَالْكَسَلِ، وَالْجُبْنِ وَالْبُخْلِ، وَضَلَعِ الدِّينِ، وَغَلَبَةِ الرِّجَالِ".

"...The Prophet (PBUH) used to say, "O Allah! I seek refuge with You from worry and grief, from incapacity and laziness, from cowardice and miserliness, from being heavily in debt and from being overpowered by (other) men." (HR. al-Bukhārī, *Ṣaḥīḥ al-Bukhārī*, Kitāb al-Da'awāt, No. 374)..."

This hadith explicitly recognises *hamm* and *huzn* as conditions that burden the human soul. This prayer is not only spiritual in nature, but also has a very strong psychological dimension, as it normalises the experiences of anxiety and sadness as something that can be acknowledged and sought help for. Ibn Hajar al-'Asqalani explains that *al-hamm* refers to anxiety about something that is expected to happen in the future. At the same time, *al-huzn* relates to sadness over events that have already passed. Thus, this hadith covers two main dimensions of human psychological suffering: anticipatory anxiety and retrospective sadness, which in modern psychology are often at the core of depression and anxiety disorders (al-'Asqalānī, 1882).

Furthermore, al-'Aynī interprets that the combination of spiritual prayers with social problems such as debt and human oppression shows that psychological pressure does not stand alone, but is intertwined with structural and relational factors (al-'Aynī, 1975). From the perspective of contemporary Islamic counselling, this hadith affirms a holistic approach that is in line with modern psychological findings on the importance of emotional validation in the mental health recovery process. Recognition of negative emotions—rather than denial or stigmatisation—is a prerequisite for the formation of emotional regulation and psychological resilience (Gross, 2015). The hadith normatively affirms that anxiety (*hamm*) and sadness (*huzn*) are legitimate human experiences, so that individuals—including adolescents—are not positioned as "weak in faith," but rather as subjects who need empathetic guidance. In the context of digital adolescents, academic pressure, performative demands on social media, and family expectations have been shown to increase the risk of depression and anxiety (Twenge et al., 2019). The integration of prayer as spiritual coping in Islamic counselling serves to strengthen meaning, hope, and self-control, while concrete efforts (*ikhtiar*) encourage adaptive coping strategies. Thus, this hadith provides a relevant ethical and therapeutic basis for bridging Islamic spirituality and context-based psychological interventions.

In addition, there is also the concept of despair (*you are*). In the hadith of the Prophet, *you are* positioned as a dangerous psychological condition because it destroys hope, resilience, and the will to survive. The Prophet Muhammad PBUH consistently emphasised the importance of maintaining hope and forbade despair, because despair contradicts the fundamental Islamic understanding of the vastness of Allah's mercy. From a prophetic perspective, despair is not merely a negative emotion, but an ethical and spiritual crisis that can distance humans from their belief in divine wisdom.

This is confirmed in the hadith of the Prophet PBUH :

وَحَدَّثَنِي أَبُو دَاوُدَ، سُلَيْمَانُ بْنُ مَعْبُدٍ حَدَّثَنَا أَبُو النُّعْمَانِ، عَارِمْ حَدَّثَنَا مَهْدِيُّ بْنُ، مَيْمُونٍ حَدَّثَنَا وَاصِلٌ، عَنْ أَبِي الزُّبَيْرِ، عَنْ جَابِرِ بْنِ عَبْدِ اللَّهِ الْأَنْصَارِيِّ، قَالَ سَمِعْتُ رَسُولَ اللَّهِ صَلَّى اللَّهُ عَلَيْهِ وَسَلَّمَ قَبْلَ مَوْتِهِ بِثَلَاثَةِ أَيَّامٍ يَقُولُ " لَا يَمُوتَنَّ أَحَدُكُمْ إِلَّا وَهُوَ يُحْسِنُ الظَّنَّ بِاللَّهِ عَزَّ وَجَلَّ " .

"...I heard Allah's Messenger (PBUH) say three days before his death: None of you should die but hoping only good from Allah, the Exalted and Glorious (HR. Muslim, No. 2877)..."

This hadith places hope (raja') as an existential attitude that must be maintained even in the most difficult circumstances. Al-Nawawī explains that hope (raja') in this hadith is not a passive attitude, but rather an active belief in the vastness of Allah's mercy that encourages calmness, courage, and inner strength (Nawawi, 1996b). In youth counselling, this principle serves as a psychospiritual foundation for combating despair and building meaning for the future (Lin et al., 2024). Feelings of worthlessness, loss of meaning in life, and the belief that the future is closed off are often at the core of psychological suffering (Cheavens et al., 2006). Therefore, strengthening hope is not only a spiritual intervention but also a fundamental counselling strategy. Al-Qurṭubī emphasises that despair in God's mercy stems from a misunderstanding of God's attributes. That hope is a moral and psychological necessity for humans in the face of suffering (Al-Qurthubi, 2006).

A study explains that hope-based coping plays a significant role in reducing symptoms of depression and suicidal ideation in adolescents, especially during phases of identity crisis and high social pressure (Snyder et al., 2018). Other studies confirm that hope functions as a protective factor that mediates the relationship between digital stress, feelings of worthlessness, and depression in adolescents (Kim et al., 2023). Thus, the reinforcement of raja' in Islamic counselling is in line with contemporary positive psychology approaches that view hope as a source of resilience, emotional regulation, and future orientation. The integration between syarḥ hadith and empirical findings confirms that hope is not only a theological value, but also an evidence-based and contextually relevant counselling intervention.

In addition to emphasising hope, the Prophet PBUH also forbade fatalistic attitudes that stifle effort and motivation. The Prophet's hadith states:

حَدَّثَنَا قُتَيْبَةُ بْنُ سَعِيدٍ، عَنْ مَالِكِ بْنِ أَنَسٍ، فِيمَا قُرِئَ عَلَيْهِ عَنْ ابْنِ شِهَابٍ، عَنْ عَطَاءِ بْنِ يَزِيدَ اللَّيْثِيِّ، عَنْ أَبِي سَعِيدٍ الْخُدْرِيِّ، أَنَّ نَاسًا، مِنَ الْأَنْصَارِ سَأَلُوا رَسُولَ اللَّهِ صَلَّى اللَّهُ عَلَيْهِ وَسَلَّمَ فَأَعْطَاهُمْ ثُمَّ سَأَلُوهُ فَأَعْطَاهُمْ حَتَّى إِذَا نَفِدَ مَا عِنْدَهُ قَالَ " مَا يَكُنْ عِنْدِي مِنْ خَيْرٍ فَلَنْ أَدْخِرَهُ عَنْكُمْ وَمَنْ يَسْتَغْفِرْ يُعْفَهِ اللَّهُ وَمَنْ يَسْتَغْنِ يُغْنِهِ اللَّهُ وَمَنْ يَصْبِرْ يُصَبِّرْهُ اللَّهُ وَمَا أُعْطِيَ أَحَدٌ مِنْ عَطَاءٍ خَيْرٌ وَأَوْسَعُ مِنَ الصَّبْرِ " .

"...Abu Sa'id al-Khudri reported that some people from among the Ansar begged from the Messenger of Allah (PBUH) and he gave them. They again begged him and he again gave them, till when what was in his possession was exhausted he said: Whatever good (riches, goods) I have, I will not withhold it from you. He who refrains from begging Allah safeguards him against want. and he who seeks sufficiency, Allah would keep him in a state of sufficiency, and he who shows endurance. Allah would grant him power to endure, and none is blessed with an endowment better and greater than endurance (HR. Muslim, No. 1053)..."

Patience (ṣabr) in this hadith is not interpreted as passive resignation, but as an active moral and psychological capacity. Al-Nawawī emphasises that the phrase "there is no gift better and more extensive than patience" indicates ṣabr as the ability to manage impulses, delay instant gratification, and maintain self-respect in the face of pressure (Nawawi, 1996c). Al-Ghazālī explains that ṣabr is an inner strength that enables humans to control destructive impulses, maintain clarity of judgement, and continue to act ethically under pressure (Al-Ghazālī, 1993). Sabr functions as an emotional regulation mechanism that is in line with the concept of resilience in modern psychology. In adolescent counselling, patience can be interpreted as the ability to cope with emotional stress without losing self-esteem and hope.

Interestingly, the Prophet's emphasis on sufficiency (istighnā') and resilience (taṣabbur) also demonstrates the integration between emotional regulation and social endeavour—not the denial of emotions. The Prophet's recognition of tears as a blessing affirms the legitimacy of healthy affective expression. When a companion wept because of a misfortune, the Prophet did not forbid such emotional expression. Instead, he emphasised that tears are a manifestation of compassion. This

attitude shows that Islam does not advocate emotional repression or false resilience that sacrifices psychological health. Adaptive emotional regulation and distress tolerance are significantly associated with a decrease in adolescent depression and an increase in resilience (Compas et al., 2017; Zimmer-Gembeck & Skinner, 2016).

The prophetic dimension of counselling is also evident in the hadiths about empathy and compassion (rahmah). The Prophet PBUH said:

حَدَّثَنَا عُمَرُ بْنُ حَفْصٍ، حَدَّثَنَا أَبِي، حَدَّثَنَا الْأَعْمَشُ، قَالَ حَدَّثَنِي زَيْدُ بْنُ وَهْبٍ، قَالَ سَمِعْتُ جَرِيرَ بْنَ عَبْدِ اللَّهِ، عَنِ النَّبِيِّ صَلَّى اللَّهُ عَلَيْهِ وَسَلَّمَ قَالَ " مَنْ لَا يَرْحَمُ لَا يُرْحَمُ " .

"...The Prophet (PBUH) said, "He who is not merciful to others, will not be treated mercifully" (HR. al-Bukhārī, No. 6013)..."

This hadith emphasises the principle of *al-mu'āmalah bi al-mithl*, namely, reciprocal relations in social ethics: mercy shown to others leads to Allah's mercy descending. Ibn Hajar al-ʿAsqalānī interprets "not loved" in this hadith as meaning not completely cut off from Allah's mercy, but rather the obstruction of special mercy (*rahmah khāṣṣah*) due to the absence of social empathy (al-ʿAsqalānī, 1882). Thus, empathy is positioned as a moral competence that determines the quality of interpersonal relationships and social health.

In counselling practice, this meaning is highly relevant. Empathy is not merely an affective attitude, but a professional skill that builds therapeutic alliance. The Prophet Muhammad, PBUH, exemplified empathetic listening by providing a safe space for his companions to express their anxieties without judgment, a practice that is in line with the principle of unconditional positive regard in humanistic counselling. The counsellor's empathy contributes significantly to reduced depressive symptoms and increased client engagement, especially among adolescents (Cirasola et al., 2021; Lindqvist et al., 2023). Empathy has been shown to function as a protective factor, reducing feelings of alienation and improving emotional regulation. Thus, this hadith provides a solid ethical-theoretical foundation for contextual and evidence-based empathy-based Islamic counselling.

Furthermore, the Prophet's hadith on social solidarity emphasises that mental health is not solely an individual responsibility, but a collective one:

حَدَّثَنَا مُحَمَّدُ بْنُ عَبْدِ اللَّهِ بْنِ نُمَيْرٍ، حَدَّثَنَا أَبِي، حَدَّثَنَا زَكْرِيَّا، عَنِ الشَّعْبِيِّ، عَنِ النُّعْمَانِ بْنِ بَشِيرٍ، قَالَ قَالَ رَسُولُ اللَّهِ صَلَّى اللَّهُ عَلَيْهِ وَسَلَّمَ " مَثَلُ الْمُؤْمِنِينَ فِي تَوَادُّهِمْ وَتَرَاحُمِهِمْ وَتَعَاطُفِهِمْ مَثَلُ الْجَسَدِ إِذَا اشْتَكَى مِنْهُ عُضْوٌ تَدَاعَى لَهُ سَائِرُ الْجَسَدِ بِالسَّهَرِ وَالْحُمَى " .

"...The similitude of believers in regard to mutual love, affection, fellow-feeling is that of one body; when any limb of it aches, the whole body aches, because of sleeplessness and fever" (HR. Muslim, No. 2586)..."

This hadith emphasises the principle of *al-taḍāmun al-ijtimāʿī* (social solidarity) as the foundation of Islamic community ethics. Al-Nawawī interprets the metaphor of "one body" as a moral obligation to empathise with the suffering of others and respond to it actively, rather than merely offering passive sympathy. The pain of one member of the body symbolises a disturbance in the collective balance, so that the suffering of individuals—including psychological suffering—becomes a shared responsibility (Nawawi, 1996b). Within the framework of adolescent counselling, this hadith provides normative legitimacy for a systemic approach that involves the family, school, and community as a supporting environment. Strong social support significantly reduces the risk of depression and loneliness in adolescents, especially in the digital age characterised by relational isolation (Loades et al., 2020). Family and school involvement in adolescent mental health interventions enhances the sustainability of recovery and clients' emotional engagement (van Harmelen et al., 2016). Thus, this hadith is not only normative-theological in nature, but also consistent with contemporary psychological empirical evidence in preventing and treating adolescent depression communally and sustainably.

Thus, prophetic values such as emotional recognition, hope, patience, empathy, and social solidarity provide a solid ethical foundation for the development of humanistic Islamic counselling

grounded in hadith. This approach does not conflict with modern psychology but rather enriches the therapeutic framework with dimensions of meaning, spirituality, and profound humanity. Hadith-based Islamic counselling positions adolescents not as "problems", but as dignified subjects who have the potential for recovery and growth, and deserve compassionate guidance in facing the complexities of modern life.

Humanistic Islamic Counseling Based on Hadith

Counselling approaches that emphasise modern psychotherapy techniques alone are often unable to address the existential and spiritual needs of Muslim adolescents, as they also seek meaning in life, identity, and religious connection in the face of social and digital pressures. In Indonesia, studies on Islamic spiritual-based counselling show that integrating religious practices helps address students' psychological pressures more comprehensively than approaches that are solely clinical or religiously normative, as spiritual practices offer inner connection and coping strategies that are contextual to the local culture (Suhertina, 2025; Yandri et al., 2025). The increase in emotional disorders among adolescents in Indonesia is often linked to a lack of meaningful spiritual and social support, so an approach that is responsive to religious and psychological contexts is urgently needed (integrative Islamic counselling guidance) to improve the mental well-being of adolescents (Wahyudi et al., 2025; Yani et al., 2025).

Humanistic Islamic counselling based on hadith offers a constructive middle ground. This approach does not reject modern psychology, but places it within a prophetic ethical framework that emphasises human dignity (*karāmah al-insān*), compassion (*rahmah*), and recognition of emotional vulnerability as part of human nature. From this perspective, adolescent depression is understood as a multidimensional crisis involving psychological, relational, spiritual, and existential aspects. This view aligns with the objectives of counselling in the Islamic tradition, which are not only oriented towards healing symptoms but also towards restoring inner peace (*ṭuma'nīnah*), self-balance, and healthy connections with Allah, others, and oneself (Daradjat, 1970).

The harmony between humanistic psychology and the prophetic practice of the Prophet Muhammad, PBUH, forms an important conceptual foundation. Carl Rogers emphasised that empathy, congruence, and unconditional acceptance are essential conditions for psychological growth (Rogers, 1961). This principle resonates strongly in the hadith and sirah of the Prophet, which show that he never responded to human suffering with moral judgment. The Prophet PBUH was an attentive listener, providing a safe space for emotional expression and affirming the dignity of individuals who were feeling fragile. In the context of Indonesian youth, who often face a culture of shame and stigma surrounding mental health, this prophetic example has great practical significance.

The Prophet's hadiths explicitly acknowledge the reality of psychological suffering. The concepts of *ḥuzn* (sadness), *hamm* (anxiety), *ghamm* (inner pressure), and *you is* (despair) show that negative emotional experiences are not foreign to Islamic teachings. The Prophet's prayer PBUH narrated by al-Bukhārī—"Allāhumma innī a'ūdhu bika mina al-hammi wa al-ḥuzn..."—serves as normative validation of human psychological burdens while offering healthy spiritual coping mechanisms. Hadith scholars explain that *hamm* refers to anxiety and worry about something expected to happen in the future. In contrast, *ḥuzn* refers to sadness stemming from past events. This explanation shows that the Prophet's hadith acknowledges the temporal dimension of human psychological suffering, encompassing both future and past orientations. Ibn Hajar al-'Asqalani emphasised this distinction in his commentary on the Prophet's prayer about *hamm* and *ḥuzn*, while al-Nawawi also emphasised that the two represent different but interrelated forms of inner burden (al-'Asqalānī, 1882; Nawawi, 1996b). This understanding is consistent with modern psychology, which views depression and anxiety disorders as conditions that often stem from ruminating on the past and anticipatory anxiety about the future (Beck & Haigh, 2014).

The personal experience of the Prophet Muhammad, PBUH, during the events of 'ām al-ḥuzn provides strong theological legitimacy for the recognition of grief as a human reality. The deaths of

Khadijah bint Khuwailid and Abū Ṭālib were deeply emotional losses for the Prophet, but these events did not weaken his faith. On the contrary, this grief revealed the depth of the Prophet's humanity as well as his spiritual steadfastness within the framework of hope and prophetic commitment. Al-Ṭabarī recorded this period as the most emotionally difficult period in the Prophet's life, but it was still faced with patience and an orientation towards the prophetic mission (al-Tabari, 1963). In the context of Indonesian society, where there is still a prevailing view that excessive sadness reflects weak faith, the narrative of 'ām al-ḥuzn serves as an important theological counter-narrative. This story emphasises that sadness is not incompatible with faith, but rather part of human nature that needs to be acknowledged, understood, and accompanied with empathy, especially in responding to mental health issues (Sarfika, Malini, et al., 2025).

The Hadith of the Prophet, which states that tears are a form of compassion—"Verily, the eyes shed tears and the heart grieves"—emphasises that expressing emotions is not a sign of weak faith. The Prophet's attitude of not forbidding crying shows that Islam does not encourage emotional repression or false toughness, which are actually harmful to psychological health. This perspective is particularly relevant for Indonesian teenagers who often face pressure to be "strong", "patient", or "resigned" instantly, without space to process their emotions healthily (Heck, 2024; Zuhara, 2025).

The value of hope (*rajā'*) is a key pillar in hadith-based Islamic counselling. The words of the Prophet PBUH—"Let none of you die except in a state of good faith towards Allah"—place hope as an existential attitude that must be maintained even in the most critical conditions. Al-Qurṭubī emphasises that despair stems from a misguided understanding of Allah's nature, while hope is a moral and psychological necessity for humans (Al-Qurthubi, 2006). Contemporary psychological research shows that hopelessness is a strong predictor of depression and suicidal ideation in adolescents, while interventions that strengthen hope increase resilience and meaning in life (Liu et al., 2021). Thus, *rajā'* can be understood as a protective factor that bridges the spiritual and psychological dimensions in adolescent counselling.

Patience (*ṣabr*) in the Prophet's hadith also has an active and dynamic psychological meaning. The Prophet's saying PBUH—"There is no gift better and more extensive than patience"—shows that *ṣabr* is the capacity for emotional regulation, moral resilience, and perseverance in the face of difficulties. Al-Ghazālī explains that *ṣabr* enables humans to control destructive impulses and maintain clarity of judgement. In modern psychology, this concept is consistent with distress tolerance and resilience (Al-Ghazālī, 1993). Meta-analyses indicate that adaptive emotional regulation contributes significantly to a reduction in adolescent depression (Compas et al., 2017). Therefore, *ṣabr* in counselling should not be interpreted as passive resignation, but as an active process of building psychological resilience.

Empathy (*rahmah*) is the foundation of therapeutic relationships in Islamic counselling. The Hadith of the Prophet PBUH—"Whoever does not show mercy will not be shown mercy"—affirms empathy as a relational ethical principle. The absence of empathy hinders Allah's special mercy, which shows that empathy has moral and spiritual implications (Hidayati et al., 2025; Rosepti, 2023). In the Prophet's practice, empathy was manifested through attentive listening and non-judgmental presence (Redzwan & Bannga, 2023). Research on adolescent psychotherapy over the past five years shows that counsellor empathy and therapeutic alliance contribute significantly to a reduction in depressive symptoms and an increase in client engagement. This reinforces that prophetic ethics are consistent with evidence-based clinical practice (Labouliere et al., 2017; Probst et al., 2019).

The social dimension in the Prophet's hadith is also very strong. The Prophet's saying, "The believers are like one body," emphasises the principle of collective solidarity. Individual suffering is understood as a disruption to community balance. This principle is particularly relevant in the context of depression among Indonesian adolescents, especially in the digital age characterised by social isolation, cyberbullying, and superficial online relationships (Pham et al., 2024; Sarfika, Saifudin, et al., 2025). Empirical studies show that support from family, school, and peers significantly reduces the risk of depression and loneliness among adolescents (Loades et al., 2020;

van Harmelen et al., 2016). Therefore, hadith-based Islamic counselling requires a systemic approach involving families, schools, Islamic boarding schools, and religious communities.

In the Indonesian context, the strategic relevance of humanistic Islamic counselling based on hadith is growing stronger as social stigma surrounding mental health disorders remains strong, particularly in religious circles. Several studies show that Muslim adolescents in Indonesia often delay or avoid seeking professional help because they are worried about being labelled as individuals who "lack faith", "are impatient", or "are ungrateful", so that their psychological suffering is suppressed and has the potential to worsen (Junaedi et al., 2024). This condition confirms that mental health problems are not only clinical in nature but also cultural and theological. Humanistic integration of hadith positions religion as a source of meaning, hope, and healing rather than an instrument of oppressive moral judgment (Firdaus & Murtadho, 2025). Research in religious psychology shows that supportive, dialogical, and non-judgmental religiosity correlates positively with psychological well-being, whereas rigid and normative religiosity can actually exacerbate emotional distress (H. G. Koenig, 2018; Pargament, 2013).

This approach is also in line with the character of Islamic education in Indonesia—both in Islamic schools and Islamic boarding schools—which emphasises the development of character, social relations, and spirituality as an integrated process of human development (Mujtaba et al., 2025). In this context, humanistic Islamic counselling grounded in hadith has the potential to bridge the gap between adolescents' psychological needs and the religious values alive in educational institutions (Haryanto & Mufid, 2025; Mardison et al., 2025). Critically, this approach also offers a corrective to the reductionist paradigm in modern mental health, which focuses excessively on diagnosis, symptom classification, and technical interventions while neglecting dimensions of meaning and spirituality (Maharani et al., 2024; Suyadi et al., 2025). The Prophet's hadith views humans as holistic entities comprising body, soul, and spirit. This view aligns with Viktor Frankl's logotherapy, which places the search for meaning at the centre of psychological healing (Frankl, 2006). In Indonesia's religious society, this approach enables young people to interpret suffering not merely as a clinical disorder but as part of a meaningful life journey that can foster inner resilience.

Thus, integrating prophetic values—empathy, hope, patience, and solidarity—with humanistic psychology produces an ethical, contextual counselling model relevant to the challenges of adolescent depression in the digital age. Hadith is no longer positioned solely as a source of law and morality, but as a source of psychological ethics and humanity. This approach encourages counsellors, educators, parents, and religious leaders in Indonesia to adopt dialogical, compassionate, and stigma-free mentoring practices, while also opening up space for further empirical research to strengthen the implementation of Hadith-based Islamic counselling in real practice, both face-to-face and digitally.

CONCLUSION

Based on a thematic analysis of the hadiths of the Prophet Muhammad PBUH, this study affirms that prophetic tradition provides a strong ethical and humanistic foundation for the development of Islamic counselling in responding to adolescent depression in the digital age. The Prophet's hadith explicitly acknowledge the reality of psychological suffering, validate emotional vulnerability as part of human nature, and reject the stigma that views mental disorders as a failure of faith. Key values such as empathy (rahmah), hope (rajā'), patience (ṣabr), and social solidarity appear as important pillars in the process of recovery and strengthening adolescent mental resilience. Within this framework, adolescent depression is understood not as a moral or spiritual weakness, but as a humanitarian crisis that demands holistic intervention, including psychological counselling, ongoing social support, and the strengthening of meaning and spirituality.

The humanistic Islamic counselling approach, grounded in hadiths, positions adolescents as dignified subjects who need empathetic presence, non-judgmental understanding, and reinforcement of hope, in line with the Prophet's example in responding to sadness and emotional exhaustion. The integration of prophetic values with the principles of humanistic psychology and

development produces a counselling model that is contextual, inclusive, and relevant to contemporary challenges such as digital pressure, social comparison, cyberbullying, and identity crises. Therefore, hadith-based Islamic counselling has significant potential as an alternative and complementary framework in adolescent mental health services in Muslim communities, while encouraging the active role of counsellors, educators, parents, and religious leaders in building a dialogical, compassionate, and stigma-free approach.

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