

## Exploring the Relationship between Religiosity and Psychological Distress among University Students in Punjab, Pakistan

Mussarat Hussain<sup>1</sup> Zoraiz Tahir Chaudhry<sup>2</sup> Umm-e-Habiba<sup>3</sup> Tauqeer Ahmed Lak<sup>4</sup> Zahra Zulfiqar<sup>5</sup>

<sup>1</sup> Lecturer, Department of Sociology & Criminology, University of Sargodha, Sargodha, Punjab, Pakistan.

✉ [mussarat.hussain@uos.edu.pk](mailto:mussarat.hussain@uos.edu.pk) |  <https://orcid.org/0000-0001-7395-8541>

<sup>2</sup> M.Phil. Scholar, Department of Sociology & Criminology, University of Sargodha, Sargodha, Punjab, Pakistan.

✉ [zoraiztahir55@gmail.com](mailto:zoraiztahir55@gmail.com)

<sup>3</sup> M.Phil. Scholar, Department of Sociology & Criminology, University of Sargodha, Sargodha, Punjab, Pakistan.

✉ [habibajabbar244@gmail.com](mailto:habibajabbar244@gmail.com)

<sup>4</sup> Lecturer, Department of Sociology & Criminology, University of Sargodha, Sargodha, Punjab, Pakistan.

✉ [tauqeer.ahmed@uos.edu.pk](mailto:tauqeer.ahmed@uos.edu.pk) |  <https://orcid.org/0000-0001-8230-7679>

<sup>5</sup> M.Phil. Scholar, Department of Sociology & Criminology, University of Sargodha, Sargodha, Punjab, Pakistan.

✉ [zahrazulfiqarali@gmail.com](mailto:zahrazulfiqarali@gmail.com)

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**Abstract:** The current study examines the connection between psychological distress and religiosity among Pakistani university students in Punjab. Students frequently experience serious mental health issues in a society where religious values are ingrained in the fabric of society and higher education is characterized by intense academic pressure. In order to investigate these two dynamics, 305 students were chosen from Punjab's public universities using a quantitative research design and simple random sampling. SPSS Version 26 was used to analyze the data that was gathered using a structured questionnaire. The study looked at the relationship between gender and mental health outcomes and religious expression, providing information about how male and female students experience and express religiosity differently. According to the findings, religion has a complex impact on students' mental health, serving as a buffer against harm as well as a possible cause of it, depending on the situation and the individual. These findings demonstrate how crucial it is to integrate frameworks that are sensitive to cultural and religious differences into mental health interventions in Pakistani universities. The results support acknowledging the role of religious belief in both vulnerability and resilience, rather than pathologizing it.

**Keywords:** Religiosity, Psychological Distress, University Students, Pakistan, Mental Health, Religious Coping, Faith and Well-being, Higher Education



### Corresponding Author:

**Zoraiz Tahir Chaudhry**

M.Phil. Scholar, Department of Sociology & Criminology, University of Sargodha, Sargodha, Punjab, Pakistan.

✉ [zoraiztahir55@gmail.com](mailto:zoraiztahir55@gmail.com)

## Introduction

Religion has, for a long time, influenced people's mental and emotional health. It reassures people, giving them hope, helping them find structure to process trouble and advising them how to cope. The research shows that questions about the link between how religious someone is, and their mental health are complicated. Although several investigations point out that religious faiths can reduce sense of depression, anxiety and tension (Koenig, 2019; Pargament, 2018), there are also studies that mention pressures associated with religious duties (Malinakova et al., 2020). So, the influence that religiosity has on mental health is still widely debated by mental health researchers.

## Religiosity and Psychological Well-being: A Global Perspective

According to a few studies, people who are religious usually feel more happiness, handle stress better and experience less mental discomfort (Koenig et al., 2012; Koenig et al., 2018). Taking part in religion through prayer and community gatherings seems to help people experience lower levels of anxiety and depression (Smith et al., 2019). Research tells

us that consistently attending religious services may help people who are having difficulties feel less stressed and socially connected (Ellison & Levin, 2019; Levin, 2018). It is Find out also been recognized that having these strategies can make people happier and brings them peace of mind. Traditionally such strategies consisted of religious views on suffering and accepting that interventions from the divine are possible (Ano & Vasconcelles, 2020; Wong, 2019). Yet, religiousness includes many areas such as individual beliefs, traditions and things people do to help the community (Pargament, 2019). How people's social environment, the culture they live in, and their own views affect them emotionally is affected by all of these things.

Having anxiety, depression, fatigue and sadness distracts a person from dealing well with different challenges in life (Diener et al., 2019). Alternatively, mental well-being means an individual has enough strength and balance to deal with life's difficulties (Keyes, 2018). People say that religion can decrease as well as increase mental health issues. Religious faith helps many people understand what they are experiencing, let go of grudges, experience calmness and hope in trying times (Hill & Pargament, 2018). Those with greater religious ties usually view stressful events in a better light which helps keep them mentally strong and lowers their unhappiness (Park, 2019). Both religion and spirituality can provide fragile seniors with a sense of purpose and link them to helpful social groups (Koenig et al., 2018).

### **Religion, Stress, and Student Mental Health in Pakistan's Context**

According to Villani et al. (2019), having religious beliefs is connected to staying away from addictive substances, enjoying healthy relationships and handling mental stress. Then again, the link between religions is so important in Pakistan, the relationship between scholastic stress and religiosity is a unique field of study there. Because they face strong competition at school, need to please their families, struggle to pay for their education and lack many job opportunities, Pakistani university students experience very high levels of stress (Rehman & Bilal, 2019). A lot of these circumstances make anxiety, depression and general psychological distress worse (Zada, 2021). What people make of their religious beliefs can either alleviate their stress or add to it depending on the situation.

Although religion is known to offer emotional support, little investigation has taken place in Pakistan on how it affects university students' mental health. Some students might find comfort in their beliefs or spiritual groups, but the strict rules of their faith, worry caused by guilt or fear of divine punishment might give others anxiety (Javaid et al., 2024). In addition, how children experience these things is strongly influenced by gender. It was found by researchers that male students tend to suffer from traditional religious demands to control their feelings and perform, while female students must deal with more significant psychological stress, brought on by unspoken social and religious norms (Raza et al., 2016). It is important to know the differences between pupils to provide for their psychological needs well.

Pakistan also faces a big problem: there is not enough institutional mental health support. Because many university students are unable to utilize professional therapy, a lot of them depend on spiritual support instead (Munawar et al., 2020). Religious strategies might work for some people, though others may use them only so much that they avoid normal psychological therapies (Raza et al., 2016). Because mental health support for this group is low, we need to examine in depth how religious beliefs mix with educational stress and psychological worry. I intend to learn how religion plays a role in improving the mental health of university students from Punjab who experience mental discomfort, mainly at test times. Studying differences in gender will give new insight into whether and how, religiosity either favors or harms students' well-being. The information the study gathers will support educators, mental health specialists and legislators in building interventions that take care of students and respect their religious traditions.

### **Literature Review**

The link between how Punjabi students feel mentally at university and their religious practices is being investigated more deeply in Pakistan. Having and using mental health support is often linked to religious beliefs, activities and belonging to a community. Though, psychological effects are still complicated by how people view their circumstances, their age and how much pressure they feel from their studies. Analyses of research prove that such deep spiritual beliefs are related to both a higher level of resilience and a lower degree of psychological distress. Strongly religious



students seemed to feel more purpose and had better emotional health, shielding them from stress, anxiety and depression. A connection with religion seems to boost self-care methods, lower unpleasant emotions and enhance overall health, reports Pargament et al. (2018). The authors also pointed out that strong spiritual connection tends to result in more emotion stability and less stress.

In these cases, religion practiced mainly for rewards or social reasons has usually been linked to greater psychological distress. Based on their research, these authors pointed out that many youngsters who took part in religion for social reasons were more likely to find tension and anxiety because they didn't truly relate to their faith. Because extrinsically motivated people use religion in a practical way, they risk emotional pain, as Allport and Ross (2018) also identified in their work on the topic.

People also rely on their beliefs to deal with the mental pain caused by problems. Pargament (2018) made a distinction between two forms of religious coping: seeing stress as due to a higher power's judgment and requesting aid for it from a higher power. Ano and Vasconcelles (2018) learned that methods of unwindings like ignoring my problems or escaping into my thoughts led to more anxiety and depressed symptoms than when I prayed or turned to my faith. Doing things such as praying or studying scriptures as they cope with life can help university students avoid stress, but negative approaches to religion cannot.

Religious disagreements can sometimes make psychological discomfort even worse. These researchers discovered that people who experience religious discomfort usually feel more anxious and sadder. Exline and Rose (2018) discovered that as spiritual troubles such as noticeable inconsistencies in religious beliefs or failures, appeared, discomfort increased a lot. This study showed that strict religious beliefs may also result in students feeling shame and blaming themselves when they find religiously expected behaviors hard to achieve. More details are introduced by the unique socio-cultural setting in Pakistan.

Because we are a very religious community, kids may be compelled by faith to obey rules which could be helpful or harmful for their mental well-being. Sadiq (2023) points out that students could feel more anxious if they don't connect with the main religious beliefs. These experiences are further shaped by gender disparities; Shakeel et al. (2022) imply that cultural and religious expectations may cause additional stress for female students. Nonetheless, other research (Idler, 2018) contends that religion can operate as a protective factor against psychological distress by giving women social support and emotional stability.

## Objectives

1. To investigate the relationship between religiosity and psychological distress among university students in Pakistan.
2. To examine the influence of socio-demographic factors on religiosity and psychological distress.
3. To analyze differences in psychological distress across students from various educational disciplines and institutions.

## Research Question

What is the relationship between religiosity and psychological distress among university students in Punjab, Pakistan?

## Hypotheses

**H1:** Religiosity has a significant relationship with psychological distress among university students in Punjab, Pakistan.

**H2:** Higher levels of religiosity are associated with lower levels of psychological distress.

## Material and Methods

A quantitative, positivist research design is used in this study to investigate the connection between psychological distress and religiosity among Pakistan's university students. The sample includes students of three well-reputed universities with diversity of subjects, gender of participants, and level of study, such as Punjab University, Fatima Jinnah Women University and University of Sargodha. In order to ensure the robustness and the representativeness the formula of the World Health Organization (WHO) was used to estimate sample size (WHO, 2001). According to this



calculation, it was recommended that at least 305 participants be recruited to ensure statistical validity and generalization. Simple Random sampling method was employed to ensure sufficient representation in terms of key factors, such as gender, academic departments, and level of study. At first, 350 students in all were invited to take part in the study. However, only 305 valid and reliable questionnaires were kept for the final analysis because of a number of limitations, such as some participants' inaccessibility and the submission of inconsistent or incomplete responses. The dataset's integrity and quality were preserved to this meticulous selection procedure. Self-administered questionnaires were used to gather data, and in order to increase accessibility and participation, they were made available both offline and online. The instruments were created to capture both religious and psychological aspects pertinent to the Pakistan's university setting using a self-constructed Religiosity Scale and the Kessler Psychological Distress Scale (K10), in addition to four additional questions for scale adaptation. To investigate the underlying relationships and patterns among the variables, regression and correlation analyses were conducted using SPSS version 26. Strict ethical guidelines were followed during the study. Prior to data collection, each participant gave their informed consent, and throughout the study, their anonymity and confidentiality were maintained. The information was safely kept and used only for research. The appropriate university authorities approved the study protocol through the Institutional Review Board (IRB).

## Results and Findings

**Table 1**

*Reliability of Measurement Scales*

Sr#	Variable Name	No of Items	Reliability Statistics
1	Psychological Distress	14	.933
2	Religiosity	12	.859

The reliability of the scales was assessed using Cronbach's alpha: Psychological Distress (14 items) has a Cronbach's alpha of 0.933, indicating excellent internal consistency. Religiosity (12 items) has a Cronbach's alpha of 0.859, reflecting high internal consistency as well. These results suggest that both scales are reliable measures for assessing psychological distress and religiosity among university students in Punjab.

**Table 2**

*Frequency and Percentage Distribution of Demographic Variables*

Demographic Items	Frequencies	Percentages	Mean	STD
Gender				
Male	137	44.9%	1.5541	.50445
Female	167	54.8%		
Prefer not to say	1	0.3%		
Age				
17-25	245	80.3%	1.2033	.49190
26-35	58	19.0%		
36-45	2	0.7%		
Educational level				
Undergraduate	195	63.9%	1.4984	.75273
Masters	74	24.3%		
M-Phil	30	9.8%		
PhD	6	2.0%		
Field of Study				
Social sciences	113	37.0%	3.3279	2.26763
Natural Sciences	23	7.5%		
Business & Economics	40	13.1%		
Engineering and Technology	25	8.2%		
Arts & Humanities	38	12.5%		
Medical & Health Sciences	16	5.2%		
Others	50	16.4%		



Demographic Items	Frequencies	Percentages	Mean	STD
Religion				
Islam	279	91.5%	1.0885	2.9586
Christian	25	8.2%		
Other	1	0.3%		
Family Background				
Urban	159	52.1%	1.4787	.50037
Rural	146	47.9%		
Socioeconomic Status				
Lower class	12	3.9%	2.0098	.29786
Middle class	278	91.1		
Upper class	15	4.9%		

The table revealed the frequency and percentage distribution of demographic variables a diverse but generally similar group in important ways. In terms of gender, women comprise the majority at 54.8%, followed by men at 44.9%, with 0.3% choosing not to reveal their gender. The vast majority of responders (80.3%) are between the ages of 17 and 25, indicating that the sample is primarily young. Only 0.7% are between the ages of 36 and 45, and 19.0% are between the ages of 26 and 35. 63.9% of students are enrolled in undergraduate programs, 24.3% are pursuing master's degrees, 9.8% are enrolled in M-Phil programs, and 2.0% are PhD candidates. The respondents come from a variety of academic backgrounds, with the social sciences accounting for the largest percentage (37.0%), followed by business and economics (13.1%), the arts and humanities (12.5%), engineering and technology (8.2%), the natural sciences (7.5%), and medical and health sciences (5.2%). The remaining 16.4% are from other fields. The majority of the sample (91.5%) is Muslim, followed by Christians (8.2%) and people of other religions (0.3%). The participants' family backgrounds are nearly evenly distributed, with 47.9% coming from rural areas and 52.1% from urban areas. Last but not least, 91.1 percent of respondents say they are middle class, compared to 3.9% who say they are lower class and 4.9% who say they are upper class. The sample is largely young, middle-class, and socially diverse, with a strong preference for the social sciences in education, according to this demographic distribution.

### Hypothetical Findings

**H1:** Religiosity has a significant relationship with psychological distress among university students in Punjab, Pakistan

**Table 3**

		Religiosity	Psychological_Distress
Religiosity	Pearson Correlation	1	.198**
	Sig. (2-tailed)		.000
	N	305	305
Psychological_Distress	Pearson Correlation	.198**	1
	Sig. (2-tailed)	.000	
	N	305	305

\*\* . Correlation is significant at the 0.01 level (2-tailed).

The Pearson correlation coefficient between religiosity and psychological distress is 0.198, which is statistically significant at the 0.01 level ( $p = .000$ ). This indicates a positive but weak relationship, suggesting that as religiosity increases, psychological distress also slightly increases among university students in Punjab. Although modest, this finding supports Hypothesis 1 (H1) and implies that higher religiosity may be linked to greater psychological distress potentially due to factors such as religious guilt, internal conflict, or pressure to adhere to religious norms.



## Regression Analysis

H2: Higher levels of religiosity are associated with lower levels of psychological distress

**Table 4**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.198 <sup>a</sup>	.039	.036	.90437

a. Predictors: (Constant), Religiosity

The regression model shows an R value of 0.198, indicating a weak positive correlation between religiosity and psychological distress. The R Square value is 0.039, which means that religiosity explains only 3.9% of the variance in psychological distress among university students. The Adjusted R Square (0.036) accounts for the number of predictors in the model and confirms a similar level of explained variance. The standard error of the estimate is 0.904, indicating the average distance between the observed and predicted values of psychological distress. Importantly, the direction of the relationship is positive, not negative as hypothesized. This suggests that higher religiosity is associated with slightly higher not lower levels of psychological distress, contrary to H2. Although the model is statistically significant (as shown in the earlier correlation table), its explanatory power is limited, and the results challenge the assumption that religiosity serves a protective role in reducing distress for this population.

**Table 5**

ANOVA<sup>a</sup>

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	10.162	1	10.162	12.425	.000 <sup>b</sup>
	Residual	247.819	303	.818		
	Total	257.981	304			

a. Dependent Variable: Psychological\_Distress

b. Predictors: (Constant), Religiosity

The ANOVA results indicate that the regression model is statistically significant, with  $F(1, 303) = 12.425$  and a p-value of .000. This confirms that religiosity significantly predicts psychological distress among university students. In other words, the model explains a meaningful portion of the variance in psychological distress.

**Table 6**

Coefficients<sup>a</sup>

Model		Unstandardized Coefficients		Standardized Coefficients		t	Sig.
		B	Std. Error	Beta			
1	(Constant)	2.496	.156			15.968	.000
	Religiosity	.256	.073	.198		3.525	.000

a. Dependent Variable: Psychological\_Distress

The regression coefficient for religiosity ( $B = 0.256$ ,  $p = .000$ ) shows a statistically significant positive effect on psychological distress. This means that for each one-unit increase in religiosity, psychological distress increases by 0.256 units, on average. The standardized beta value of 0.198 further confirms a weak but significant positive relationship.

## Discussion

The recent study aimed to explore the relationship between psychological distress and religiosity of students from universities in the Punjab region of Pakistan. Results demonstrate that there is a weak yet significant positive relationship between the two variables. This indicates that psychological distress intersects with religiosity to some extent. This means that in some cases, religion may serve as a coping mechanism for some students; however,





despondently it may also cause emotional stress because of factors such as internal conflict, religious guilt, or tension to conform to religious expectations. The results emphasize students' mental and emotional health as a multifaceted and situationally diverse dynamic of religion that, relative to the individual and context, can differently serve to bolster or undermine mental well-being.

This finding is in agreement with previous investigation by Stoppa and Lefkowitz (2010) who had also shown that, although frequency of formal worship activities might decrease with age due to academic pressure, faith in religion remains a protective factor for psychological stress. Religious training is instilled in daily life and in the education system in Punjab, so students are often brought up with religious ideologies from their childhood. Such continuous exposure may be creating a 'belief in belief' that underpins psychological resilience.

Religious education is integrated into the academic curriculum, much like in Indonesia. Consistent exposure to religious belief systems can help students view life's challenges from a spiritual perspective, which can promote acceptance, hope, and meaning. One significant protective factor against psychological distress was found to be communal religious practices. Joining a religious community offers chances for emotional support, social interaction, and a sense of belonging, all of which are critical for lowering stress and anxiety during college. This is in line with research by Frankel and Hewitt (1994), which discovered that students who were actively involved in religious communities particularly Christian ones on Western campuses reported feeling healthier, happier, and more capable of handling stress. The same reasoning applies to students in Pakistan, who may benefit from peer support and emotional reassurance through common religious experiences, which lessens psychological stress and feelings of loneliness.

It's interesting to note that students' scores on the belief dimension were higher than their scores on actual religious practice in this study. This result is consistent with that of Stoppa and Lefkowitz (2010), who proposed that while students' religious practices may become erratic as a result of their academic workload and contemporary lifestyles, their fundamental beliefs remain unwavering. Many students in Punjab expressed that they didn't have enough time or energy to participate in regular religious activities, particularly when there were tests or deadlines to meet. Their internal dedication to religious principles, however, did not appear to be impacted by this. People might act differently from what they believe because religion is understood internally as a personal source of strength rather than just a public practice. Research showed that having intellectual knowledge about religion was related to feeling less psychological distress. Part of the intellectual dimension involves studying religious texts, religious knowledge and pondering spiritual advice. The results could be due to the extra burdens that can come with knowledge of religion such as focusing on sin, what is morally right or wrong or feeling spiritually inadequate. Those who heavily consider religious teachings might notice their flaws which can give them a feeling of guilt, remorse or fear they will be punished by a higher power. When such cultures are conservative about religion and going against the rules may lead to problems in both social and spiritual life, this natural reaction can result in serious emotional conflicts and increased upset.

There was also a positive connection discovered here between stress and having private religious practices, including fasting, praying alone or devoting yourself. This is not in line with what Rosmarin et al. (2009) reported, since they found that religion-related activities at home usually cause less stress.

However, the increased level of personal religious effort in Pakistan may not always be consoling; rather, it may be linked to internal conflicts or religious guilt, particularly when carried out under duress or in a state of spiritual insecurity. More psychological strain rather than relief may be felt by students who feel they are not "enough" religious or who use these practices primarily as a coping strategy. This complexity can also be viewed through the prism of Pakistani student life, which is characterized by a great deal of pressure from family, society, and the classroom. When it comes to psychological distress, students are a particularly vulnerable group, as noted by Greenberg (2002). Academic competition, financial limitations, job insecurity, and, frequently, gender-specific cultural expectations are just a few of the ongoing difficulties they encounter. Because there is limited access to formal mental health services in the nation, these sources of distress frequently go untreated. Consequently, a lot of students use religion as a different coping mechanism.



According to Towbes and Cohen (quoted in Greenberg, 2002), transitions, high demands, and role expectations make university students of all ages especially susceptible to stress. Religious expectations that might not always align with contemporary student life in Pakistan exacerbate these pressures. According to research by Shakeel et al. (2022), for instance, cultural and religious expectations about academic performance, domestic responsibilities, and modesty frequently cause psychological distress among female students. In the meantime, male students are under pressure to live up to religious standards of self-control, leadership, and fiscal responsibility. The nature of the connection between religiosity and psychological distress is further shaped by these gender-specific experiences, necessitating an intersectional analysis of the problem. Furthermore, using religion as the only coping mechanism can occasionally postpone seeking help.

While spiritual beliefs can provide solace, they may also discourage students from seeking psychological counseling, particularly when mental health is stigmatized or misunderstood in religious communities. In these situations, an over-reliance on spiritual justifications for distress could cause people to forego necessary psychological treatments. The study's overall conclusions highlight the complex role that religion plays in Pakistani students' lives. While religious belief and communal practices generally promote emotional well-being, some aspects, like excessive private religious practice or intellectual engagement with religious teachings, can occasionally make distress worse. This complexity emphasizes the need for culturally aware mental health practices that acknowledge the beneficial and sometimes difficult roles that religion plays in students' lives.

### Recommendations

- ▶ Provide university mental health services that are sensitive to cultural and religious differences.
- ▶ To encourage balanced participation, teach students about the emotional effects of religious rituals.
- ▶ Counselors should be taught to appreciate and comprehend the connection between mental health and religion.
- ▶ Establish peer support groups based on common spiritual or religious beliefs.
- ▶ Campaigns to raise awareness of mental health issues should include religious literacy.
- ▶ Create gender-sensitive mental health treatments in response to academic and religious demands.
- ▶ By providing professional mental health support that is compatible with one's faith, stigma can be reduced.

### Conclusion

This research demonstrates that psychological distress and religiosity is highly associated in university students in Punjab, Pakistan. Religious practices and beliefs can offer comfort and emotional strength, except when they make people more stressed out. Highly religious students, especially, may face added mental stress from internal conflict, guilt, or pressure to conform to strict religious or cultural standards. Religion serves as a salve for personal pain in a culture where, with limited access to mental health care and still considerable social stigma surrounding asking for such care, students may turn to religion to fill a gap. This can be a source of resilience and hope, but it can also be difficult, particularly when personal experiences and feelings clash with religious expectations. Universities and other educational institutions must thus acknowledge the nuanced role that religion plays in students' mental health. Students' spiritual needs should be respected and taken into account when designing mental health services, in addition to their emotional health. Teachers and counselors can support students experiencing psychological distress more effectively and compassionately if they recognize religion as a complex and intensely personal part of student life



## References

- Allport, G. W., & Ross, J. M. (2018). Personal religious orientation and prejudice. *Journal of Personality and Social Psychology*, 5(4), 432–443. <https://psycnet.apa.org/doi/10.1037/h0021212>
- Ano, G. G., & Vasconcelles, E. B. (2020). Religious coping and psychological adjustment to stress: A meta-analysis. *Journal of Clinical Psychology*, 61(4), 461–480. <https://doi.org/10.1002/jclp.20049>
- Diener, E., Oishi, S., & Tay, L. (2019). Advances in subjective well-being research. *Nature Human Behaviour*, 3(3), 206–213. <https://doi.org/10.1038/s41562-018-0307-6>
- Ellison, C. G., & Levin, J. S. (2019). The religion-health connection: Evidence, theory, and future directions. *Health Education & Behavior*, 27(6), 700–720. <https://doi.org/10.1177/109019819802500603>
- Exline, J. J., & Rose, E. (2018). Religious and spiritual struggles. In *APA Handbook of Psychology, Religion, and Spirituality* (Vol. 1, pp. 459–475). American Psychological Association.
- Frankel, B. G., & Hewitt, W. E. (1994). Religion and well-being among Canadian university students: The role of religious practices. *Journal for the Scientific Study of Religion*, 33(1), 62–73. <https://doi.org/10.2307/1386637>
- Greenberg, J. S. (2002). *Comprehensive stress management* (7th ed.). McGraw-Hill.
- Hill, P. C., & Pargament, K. I. (2008). Advances in the conceptualization and measurement of religion and spirituality: Implications for physical and mental health research. *Psychology of Religion and Spirituality*, 5(1), 3–17. <https://doi.org/10.1037/1941-1022.s.1.3>
- Idler, E. L. (2018). *Religion as a social determinant of health*. Oxford University Press.
- Javaid, Z. K., Naeem, S., Haroon, S. S., Mobeen, S., & Ajmal, N. (2024). Religious coping and mental well-being: A systematic review on Muslim university students. *International Journal of Islamic Studies and Culture*, 4(2), 363–376. <http://ijisc.com.pk/index.php/IJISC/issue/view/192>
- Keyes, C. L. M. (2018). Mental health as a complete state: How the salutogenic perspective completes the picture. In M. Slade, L. Oades, & A. Jarden (Eds.), *Wellbeing, recovery and mental health* (pp. 43–63). Cambridge University Press.
- Koenig, H. G. (2012). Religion, spirituality, and health: the research and clinical implications. *ISRN Psychiatry*, 2012, 278730. <https://doi.org/10.5402/2012/278730>
- Koenig, H. G. (2019). *Religion and mental health: Research and clinical applications*. Academic Press.
- Koenig, H. G., King, D. E., & Carson, V. B. (2018). *Handbook of religion and health* (2nd ed.). Oxford University Press.
- Levin, J. (2018). Religion and mental health among Israeli Jews: Findings from the SHARE-Israel Study. *Social Indicators Research*, 90(3), 349–359. <https://doi.org/10.1007/s11205-012-0113-x>
- Malinakova, K., Tavel, P., Meier, Z., van Dijk, J. P., & Reijneveld, S. A. (2020). Religiosity and mental health: A contribution to understanding the heterogeneity of research findings. *International Journal of Environmental Research and Public Health*, 17(2), 494. <https://doi.org/10.3390/ijerph17020494>
- Munawar, K., Abdul Khaiyom, J. H., Bokharey, I. Z., Park, M. S.-A., & Choudhry, F. R. (2020). A systematic review of mental health literacy in Pakistan. *Asia-Pacific Psychiatry: Official Journal of the Pacific Rim College of Psychiatrists*, 12(4), e12408. <https://doi.org/10.1111/appy.12408>
- Pargament, K. I. (2018). *The psychology of religion and coping: Theory, research, practice*. Guilford Press.
- Pargament, K. I. (2019). What role does religion play in promoting health and well-being? In R. F. Paloutzian & C. L. Park (Eds.), *Handbook of the psychology of religion and spirituality* (2nd ed., pp. 405–422). Guilford Press.
- Pargament, K. I., Smith, B. W., Koenig, H. G., & Perez, L. (2018). Patterns of positive and negative religious coping with major life stressors. *Journal for the Scientific Study of Religion*, 37(4), 710–724. <https://doi.org/10.2307/1388152>
- Park, C. L. (2019). Religiousness/spirituality and health: A meaning systems perspective. *Journal of Behavioral Medicine*, 30(4), 319–328. <https://doi.org/10.1007/s10865-007-9111-x>
- Raza, H., Yousaf, A., & Rasheed, R. (2016). Religiosity in relation with psychological distress and mental wellbeing among Muslims. *International Journal of Research Studies in Psychology*, 5(2). <https://doi.org/10.5861/ijrsp.2016.1371>
- Rehman, M. Z., & Hanif, R. (2018). Religious coping and mental health among Pakistani university students. *Pakistan Journal of Psychological Research*, 33(2), 405–421.
- Rosmarin, D. H., Krumrei, E. J., & Andersson, G. (2009). Religion as a predictor of psychological distress in patients with anxiety disorders. *Psychology of Religion and Spirituality*, 1(2), 115–122. <https://doi.org/10.1080/16506070802477222>



- Sadiq, Z., Siraj, A., & Zeeshan, Z. (2023). Islamic Religious Coping and its Effects on Psychological Distress Implications for Practice in Pakistan. *Pakistan Research Journal of Social Sciences*, 2(4). <https://prjss.com/index.php/prjss/article/view/19>
- Shakeel, S., Fazal, S., & Majoka, M. I. (2022). Academic stress among university students in Pakistan: Causes and consequences. *Research Journal of Social Sciences and Economics Review*, 3(2), 27-34. [https://doi.org/10.36902/rjsr-vol3-iss2-2022\(27-34\)](https://doi.org/10.36902/rjsr-vol3-iss2-2022(27-34))
- Smith, T. B., McCullough, M. E., & Poll, J. (2003). Religiousness and depression: evidence for a main effect and the moderating influence of stressful life events. *Psychological Bulletin*, 129(4), 614-636. <https://doi.org/10.1037/0033-2909.129.4.614>
- Stoppa, T. M., & Lefkowitz, E. S. (2010). Longitudinal changes in religiosity among emerging adult college students. *Journal of Research on Adolescence*, 20(1), 23-38. <https://doi.org/10.1111/j.1532-7795.2009.00630.x>
- Villani, D., Sorgente, A., Iannello, P., & Antonietti, A. (2019). The role of spirituality and religiosity in subjective well-being of individuals with different religious status. *Frontiers in Psychology*, 10, 1525. <https://doi.org/10.3389/fpsyg.2019.01525>
- Wong, P. T. P. (2019). Meaning-centered approach to research and therapy: Second wave positive psychology with a focus on meaning. In A. Batthyany (Ed.), *Logotherapy and existential analysis* (pp. 149-184). Springer. <https://psycnet.apa.org/doi/10.1037/hum0000062>
- World Health Organization. (2001). *Sample size determination in health studies: A practical manual*. Geneva: WHO.
- Zada, S., Wang, Y., Zada, M., & Gul, F. (2021). Effect of mental health problems on academic performance among university students in Pakistan. *Int. J. Ment. Health Promot*, 23, 395-408. <http://dx.doi.org/10.32604/IJMHP.2021.015903>