Contentment (Qana'ah) and Mental Health on Fishermen in Pena'ah Village, Indonesia

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Keywords: Mental health, qana'ah, fishermen

Abstract: The majority of fishermen in Pena'ah experienced a decline in income which caused them to be burdened economically. This has an impact on increasing mental health problems, while mental health services are not available in Pena'ah village. People who have contentment (qana'ah) characteristics feel enough with the least sustenance they have and do not demand more than what they have. This is one of the characteristics of a person who is likely to prevent the emergence of mental health problems. Therefore, the purpose of this study was to determine whether there was a relationship between qana'ah and the mental health of fishermen in Pena'ah village. The subjects of this study were 112 fishermen in Pena'ah village aged 17-50 years. The sampling technique used is cluster random sampling. The instrument used is the Mental Health Inventory (MHI-38) which has been adapted in Indonesian and the Qana'ah questionnaire developed by researchers based on Rusdy's (2016) and Hamka (2017) theory. Based on the results of statistical analysis using Pearson product moment correlation, it is known that there is a significant positive relationship between qana'ah and mental health, with a value of r = 0.196 and sig = 0.034 (sig <0.05). It can be concluded that increasing qana'ah in a person will be followed by an increase in mental health. Qana'ah is one of the positive qualities in humans that can prevent the emergence of mental health problems.

1 INTRODUCTION

The mental health of people in the world today is quite apprehensive where it is seen from many cases involving mental health disorders that cause death. Based on data released by the World Health Organization (WHO) in 2012, the global suicide ratio is 11.4 people per 100,000 populations annually, and in Southeast Asia, the suicide rate ratio is 17.7 people per 100,000 populations. One of the causes of suicide is caused by mental disorders where the most common mental disorders that lead tosuicidal behaviour are depression and alcohol abuse.

Based on statistical data regarding suicide, it was found that 80% of suicides occur in countries with low to moderate income, where mental disorders are the main cause of suicide (WHO, 2013). This is reinforced by several research results which prove that poverty is one of the factors that cause the emergence of mental disorders. The results of research by Kuruvilla and Jacob (2007), McPherson (2014), Liputo (2014) showed that poor people are at higher risk of experiencing mental disorders, and poverty has a negative impact on mental health. From the above statement, it can be concluded that poverty is one of the main factors of mental health problems.

Indonesia is one of the countries with middle or medium income where the average per capita income is US \$ 13.12 with an estimated monthly income of 4 million rupiah, however, many Indonesians still earn below that average.

According to Central Bureau of Statistics data in 2017, Lingga Regency is the poorest district in Riau Islands Province with a total income of 387,244.00 rupiah. The poverty rate in Lingga Regency continues to increase. In 2012 the number of poor people in Lingga Regency was 12,393 and in 2016 increased to 12,760 people. This is due to the low budget given by the Indonesian government for the development of Lingga Regency. In addition, it is also due to the difficulty of access to reach all regions in Lingga Regency (Maris, 2018).

Lingga Regency has many remote areas that are difficult to manage and experience poverty problems, where one of them is the village of Pena'ah. The income of the people in Pena'ah village ranges from 500,000 - 1,000,000 rupiah per month

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which according to the Regional Financial Management Officer, if the income earned is less than 2,600,000 rupiah per month, this is categorized as middle to lower class. Low income for fishermen in Pena'ah village is expected to trigger mental health problems.

Besides the problem of poverty, this is exacerbated by the difficulty of accessing the Pena'ah community to the surrounding area. To reach the nearest village that has Primary Health Care, the Pena'ah people have to go through sea transportation for 2 hours, and to reach the capital of the Riau Islands, the Pena'ah people have to take a 6hour sea trip. The problem of poverty and the difficulty of access to the surrounding area are thought to cause mental health problems in the Pena'ah community, which has found some people who have or show symptoms of psychological disorders. Nevertheless, there is no definite data regarding the number of people with mental disorders in Pena'ah village, but based on observations by researchers, there are a number of problems that lead to mental disorders such as withdrawal behaviour from the social environment, and other symptoms that lead to depression.

The mental health problems that occurred in Pena'ah were not followed by the availability of mental health facilities, where Pena'ah village had only one health service facility which was a subsection of Primary Mental Health Care in the capital city of Lingga Regency with only one paramedic ie nurses. Therefore, people are more likely to choose alternative medicine such as going to a witch doctor (dukun) to ask for water that was given a mantra. Research from Suharmiati (2012) stated that most people prefer to seek treatment with a witch doctor because of cultural factors and the cost of treatment to a witchdoctor is cheaper than seeking treatment from health workers such as nurses and midwives. This is also exacerbated by the lack of public knowledge of mental health problems.

The unavailability of mental health facilities makes religion a way to deal with mental health problems. Ardani (2012) states that someone who surrenders himself or surrenders completely to his religion can bring positive feelings to the person, where the role of religion is to be able to reassure the heart, as a helper in achieving happiness in life, and can be used as mental therapy and mental improvement. According to Dradjat (2001) one of the internal factors that affect human mental health is religion, if someone who has been taught good religious values from a young age, it will be a good person. Other research shows that someone who has strong faith in religion is predicted to have a higher life satisfaction and higher personal happiness. In addition, religiosity or religion can improve mental health, especially psychological well-being, and reduce anxiety and depression (Amawidayanti & Utami, 2006; Archentari, 2011; Marchia, 2007; Affandi, 2007).

The statements and research above have shown how religiosity affects mental health, but the concept of religiosity above is considered still very common, where the concept of religiosity in Islam does not only consist of aspects of belief and worship, but one's faith can also influence the establishment of morality (noble qualities) such as patient, surrender to god (tawakkal), gratitude, contentment (qana'ah) and others.

In this study, one of the characters studied was contentment (qana'ah). This is because research on qana'ah has not been done much. Research on qana'ah has only begun since 2016 by researcher Ani entitled "Understanding qonaah values and increasing self-esteem through group discussion (study of orphanage in Nurul Haq Yogyakarta orphanage)". There have been no studies of qana'ah which show how the relationship between qana'ah and mental health directly.

Research on morals other than qana'ah in the context of Islamic psychology has been widely practiced. As with the research conducted by Dipoalam (2014), it showed that patience is negatively correlated with anxiety, meaning that high levels of patience are followed by low anxiety in a person. Husnair, Saniah, and Nashori (2017) also found that surrender to God (tawakkal) can reduce academic stress levels in students. Besides that, the nature of gratitude was also found to be positively correlated with psychological well-being, meaning that the welfare of psychological wellbeing of a person depends on the nature of gratitude that is owned. This means that the nature of gratitude can increase the psychological well-being of someone.

There has been much research on the nature of patience, surrender to God (tawakkal), gratitude and its influence on mental health. However, there is no research that shows how the relationship between contentment (qana'ah) and mental health.

Qana'ah is one of the noble traits that are characterized by a feeling of satisfaction, sufficient, and fulfilled all their needs, so that people who are qana'ah are always grateful for the blessings that have been given and when given disaster by God, they will always be patient. People who have qana'ah always believe in power that exceeds human power and that power determines the destiny of every human being. People who are qana'ah, their lives are always simple and not excessive so that in living their lives, they do not make themselves difficult (Al-Faruq, 2012; Ali, 2014; Rusdi, 2016; Hamka, 2017).

People who have the nature of qana'ah are people who have gained satisfaction in their lives because they feel that everything they need has been fulfilled. The characteristic of qana'ah has a connection with one of the meanings of a mentally healthy person that is a mentally healthy person who has successfully fulfilled the needs of his life. If someone feels the needs in his life have not been fulfilled, then he will feel anxious and will be disturbed by emotional stability (Burhanuddin, 1999).

Another characteristic of qana'ah is always grateful for the blessings given by God (gratitude). People who have a high level of gratitude will also have a high level of happiness because they tend to be more satisfied and optimistic when compared to individuals who are not thankful (Sativa&Helmi, 2014). This is related to one aspect of mental health that is feeling happiness in his life (Semiun, 2006).

The next characteristic of qana'ah which is related to mental health is acceptance of all things that have been destined or given by God, where according to Semiun (2006), to achieve mental health, people must accept their condition as they are, with all the strengths and weaknesses.

Someone who is qana'ah, their life is always simple, not excessive and their life orientation is not materialistic so they do not make themselves difficult by pursuing material possession. Therefore, people who possess the qana'ah nature more easily achieve life satisfaction.

The above statements have been proven by research conducted by Noorhayati (2016) which states that in the absence of qana'ah, it can affect mental conditions, where a person becomes easily agitated and uncertain. If someone has the nature of qana'ah, they will always be kind (husnuzhan) to God even though their destiny is not in accordance with what they want, it is not easy to blame others and always introspective that what happened is really as a result of what he did, his soul will always be calm, because he will face all the events with the conviction and sincerity that everything that happens to him is God's decision that must occur.

The statement and research above shows how qana'ah can affect a person's mental health, so researchers are interested in conducting research to find out how the relationship between qana'ah and mental health. In addition, as far as what is known by researchers, no research has been found on how the nature of qana'ah affects a person's mental health condition.

2 METHOD

The method used in this research is quantitative research method where the dependent variable is mental health and the independent variable is contentment (qana'ah). The criteria of the subjects in this study were the Pena'ah people aged 17-50 years who were fishermen. The number of fishermen population in Pena'ah village was 193, the researchers determined the number of samples based on the Slovin formula where the researcher used an error rate of 5%. The results of calculations with the Slovin formula obtained 130 samples. The sampling technique used was cluster random sampling where the researcher randomized each RT to obtain 26 samples for each RT. However, during the data collection process there were 18 samples whose data were incomplete so that the subjects used in this study were only 112 samples.

2.1 Research Procedures

The procedure in this study is divided into 3 stages: research preparation, research instrument development, and research implementation.

2.1.1 Research Preparation

At the preparation stage of the research, researchers prepared the facilities and infrastructure needed in the study,the research was approved by the Dean of the Psychology Faculty of the Islamic University of Riau under 530 / E-UIR / 27-F.Psi / 2018. The permit was given to each chairperson of the Neighborhood Association to obtain approval from each Neighborhood Association to conduct research on residents who live in the Neighborhood Association. After obtaining the approval of each Neighborhood Association, the researchers asked for informed consent from each prospective sample in this study.

2.1.2 Development of Research Instruments

The instrument used in this study is the Qana'ah scale and Mental Health Inventory-38 (MHI-38). The qana'ah scale is prepared by the researcher

based on the characteristics of qana'ah people stated by Rusdi (2017) and Hamka (2016). The MHI-38 used in this study was taken from Veit and Ware (1983) which was adapted into Indonesian by Faizha and Amna (2017).

Qana'ah Scale

The qana'ah scale is compiled based on the theory of Hamka (2017) and Rusdi's theory (2016). Hamka (2017) states that the nature of qana'ah consists of: 1) accepting willingly something that exists; 2) asking God for an additional sustenance that is appropriate and always trying to get what is desired; 3) accepting patiently for God's provisions; 4) surrendering to God and 5) not being interested in materialistic things. Researchers also use Rusdi's (2016) theory which says that the nature of qana'ah is characterized by 1) accepting with little sustenance and 2) not demanding more.

The characteristics expressed by Hamka and Rusdi were used as a basis for making 80 items consisting of favorable and unfvorable items. The items that have been compiled are validated by asking for judgment from one Islamic psychology expert to assess the accuracy of item content or item relevance to the qana'ah characteristics mentioned. Of the 80 items, 11 items were declared invalid, so the item was not used in qana'ah instruments. Of the 80 items, only 69 items were declared valid consisting of 38 favorable items and 31 unfavorable items.

After going through the content validation process, researchers conducted a try-out process on qana'ah instruments using 60 try out subjects who were fishermen in Pena'ah village. From the results of the trial, there are 25 items that have item-total correlation values ≤ 0.25 and are declared invalid. A item that is considered valid for 44 items. The researcher then tested the reliability of the 44 items and obtained the Alpha Cronbach value of 0.921 and the item-total correlation value moved from 0.285 to 0.627. The qana'ah scale is declared valid and reliable to be used as a data collection instrument in this study.

Mental Health Inventory

To measure the mental health of the sample in this study, researchers used the Mental Health Inventory-38 compiled by Veit and Ware (1983) and adapted into Indonesian by Faizah and Amna (2017). The MHI-38 scale has been tested by researchers in a sample of 60 fishermen samples in Pena'ah village and obtained alpha cronbach (α) value of 0.882. This shows that the Indonesian version of the MHI-38 scale is suitable for use in research data collection.

2.1.3 Research Implementation

The study was conducted on May 17 - May 30 2018 with a total sample of 112 fishermen. The study was conducted in the morning when fishermen had not gone to sea. Prior to the distribution of research instruments, the subjects had expressed their willingness to follow research without coercion by signing informed consent. Then, the researcher distributed questionnaires to 112 fishermen who had been given briefing in advance regarding the procedures for filling the scale. Each subject received a questionnaire booklet containing two scales, namely qana'ah scale and MHI-38.

3 RESULTS

The results of this study are described in 4 parts, namely 1) description of demographic data, 2) description of contentment and mental health score categories, 3) results of prerequisite analysis tests, 4) results of hypothesis testing.

3.1. Decsription of Demograhic Data

This study was conducted on 112 fishermen in Pena'ah village aged 17-50 years. The demographic table of the research sample can be seen in table 1. Based on table 1, it is known that the most number of samples in this study were fishermen aged 41-50 years (53.57%), graduated from elementary school (58.03%), married (91.07), have 0-3 children (83.93), monthly income of 250,000-1,000,000 rupiahs (41.96%), and has been a fisherman for 11-20 years (34.82%).

Table	1:	Demographic	data
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Details of dem	ographic data	f	%
Age	17-21 years old	2	1,78
	22 – 40years	50	44,64
	old		
	41 – 50 years	60	53,57
	old		
Education	Not completed	9	8,03
	in Elementary		
	School		
	Graduate	65	58,03

	Elementary		
	School		
	Graduate Junior	15	13,39
	High School		
	Graduate	23	20,53
	Senior High		
	School		
	Graduate	1	0,89
	Diploma		
	Graduate	2	1,78
	Bachelor		
	Degree		
Marital	Single	10	8,93
status	Married	102	91,07
Number of	0-3	94	83,93
children	4-6	18	19,07
Monthly	250.000-	47	41,96
income	1.000.000		
	1.500.000-	45	40,18
	2.000.000		
	2.500.000-	14	12,5
	4.000.000		
	5.000.000-	6	5,36
	6.000.000		
			33,03
How long	0-10 years	37	34,82
became a	11-20 years	39	25
fisherman	21-30 years	- 28	4,46

3.2 Description of Contentment and Mental Health Score Categories

Researchers categorized contentment and mental health scale scores into 5 categories determined based on empirical mean scores and standard deviations of each scale. The mean score of the contentment scale was 185.34 and the standard deviation was 8.843, while the mean score of mental health was 162.42 and the standard deviation was 20.354. Score categorization was divided into five categories: very high, high, medium, low, and very low. Contentment and mental health score category can be seen in table 2 and table 3.

Table 2: Contentment score categories	Table 2:	Contentment s	score categories
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Categories	Score	f	%
Very High	>198,86	5	4.46
High	189,76-198,86	33	29,46
Medium	180,91-189,76	40	35,714
Low	172,075-180,91	24	21,42
Very Low	<172,075	10	8,92
Count		112	100

Based on table 2, it can be concluded that the highest number of subjects had contentment level in the medium category with a percentage of 35.714%.

Table 3 : Mental health score categories

Categories	Score	f	%
Very High	>192,95	9	8,035
High	172,60 -192,95	22	19,64
Medium	152,243-172,6	48	42,85
Low	131,89-152,24	27	24,107
Very Low	<131,89	6	5,357
Count		112	100

Based on table 3, it can be concluded that most of the subjects in this study had a level of mental health in the medium category with a percentage of 42.85%.

3.3 The Results of Prerequisite Analysis Tests

Before testing the hypothesis, the researcher conducted a prerequisite analysis test using the data distribution normality test and linearity test. Normality test is a test conducted to determine whether the distribution of data is normal or not where this is determined by using a significance value of p>0.05 to indicate the data is normally distributed. Researchers used the One Sample Kolmogorov Smirnov statistical analysis to show the normality of data distribution. The results of the normality test on data contentment obtained a pvalue of 0.200 (p> 0.05) and in mental health data obtained a p-value of 0.075 (p> 0.05), it means that both data are normally distributed. Furthermore, the linearity test, the data is linear if the value of F (Linearity)>0.05. Linearity test results show that F (Linearity) is 4.068 with a p-value of 0.047 (p<0.05), it means that the two variables are declared linear.

3.4 Hypothesis Test Results

Statistical analysis to test the hypothesis in this study is the analysis of Pearson Product Moment Correlation, which obtained the correlation coefficient (r) of 0.196 (*) with a value of p=0.034(p<0.05). It can be concluded that there is a significant positive correlation between contentment and mental health in fishermen in Pena'ah village. The higher contentment score is followed by the higher mental health score. Conversely, the lower contentment score is followed by the lower mental health score.

Researchers also tested the correlation between contentment and psychological distress and psychological well-being which are also parameters of a person's mental health. The results of the Pearson Product Moment Correlation test found that there was a significant relationship between contentment and psychological distress with a correlation coefficient of -0.194 with p=0.041 (p <0.05). This showed that there is a negative relationship between contentment and psychological distress which means higher contentment followed by lower psychological distress.

The results of testing the correlation between contentment and psychological well-being found that contentment also has a significant relationship with psychological well-being which obtained a correlation coefficient of 0.199 with a value of p=0.036 (p<0.05). This shows that there is a positive relationship between contentment and psychological well-being, which means that the higher contentment score is followed by a higher psychological well-being.

4 **DISCUSSION**

Mental health consists of 2 major components, namely psychological distress, and psychological well-being. People who are mentally healthy are people who do not have psychological distress but have psychological well-being. Psychological distress can be triggered by a stressor. In this study, the stressors that may be experienced are economic problems, namely poverty. Poverty is predicted as one of the causes of mental disorders, in which several studies have shown that poor people have a higher risk of experiencing mental disorders (Kuruvilla & Jacob, 2007; McPerson 2014).

Lingga Regency is the district with the highest level of poverty in the Riau Islands province. One of the villages that experienced the worst poverty problem in Lingga district was Pena'ah village. The majority of the population in Pena'ah are fishermen, where the average monthly income is Rp. 500,000.00 - Rp. 1,000,000.00. The level of income is far from enough to meet their living needs for a month. The low income of fishermen in Pena'ah village is expected to trigger mental health problems.

Besides the problem of poverty, this condition is exacerbated by the difficulty of access to the surrounding area. To reach the nearest village that has Primary Health Care, the people of Pena'ah have to go by sea transportation for 2 hours. These factors are thought to also trigger the emergence of mental health problems in the village of Pena'ah.

In a study conducted by Patel and Kleinman (2003), it showed that people who experience poverty tend to feel insecure, which creates fear and anxiety. Besides creating insecurity, poverty also creates feelings of despair and meaninglessness. These feelings cause stress which then leads to common mental disorder.

Not everyone who experiences poverty has the same risk of experiencing mental health problems. Based on the theory of diathesis-stress, it showed that human characteristics can increase or decrease the risk of mental disorders. This theory explains how a person's personality characteristics can be a barrier to the development of psychopathology (Islam & Choudhry, 2017).

In this study, the characteristics that have been investigated by researchers are contentment. Researchers found that there was a significant relationship between contentment and mental health. A correlation coefficient of 0.196 was obtained with p = 0.034 (p<0.05). This shows that contentment is a positive trait that can prevent the emergence of mental health problems in the poor people in the village of Pena'ah.

Furthermore, the researcher also found that contentment had a significant negative relationship with psychological distress, which obtained a correlation coefficient of -0.194 with p = 0.041 (p <0.05). This shows that contentment is also one of the positive traits that can prevent the emergence of psychological distress in poor communities in Pena'ah Village.

Why is contentment able to prevent the emergence of mental health problems? Researchers used the theoretical foundation of Islamic psychology in compiling the contentment constructs under study. In Islamic psychology, contentment is referred to as gana'ah which is one of the best traits of the human personality taught to Muslims. In the perspective of Islam, qana'ah is a trait characterized by always being satisfied with something they have, always feeling that their needs have been fulfilled properly, good acceptance of what God has given (not complaining if what is received is not in line with expectations), a simple lifestyle, not exaggerating and accepting life as it is. In addition, people who are qana'ah believe that there is a power that exceeds our power, are always patient when they get calamity and are always grateful when given a pleasure (Al-Faruq, 2012; Ali, 2014; Rusdi, 2016; Hamka, 2017).

The characteristics of qana'ah are similar to the characteristics of hardy personality, type B personality and people who have a sense of personal control that is believed to be a human characteristic that is immune to stress (Sarafino & Smith, 2011). Hardy personality has 3 characteristics, namely control, commitment, and challenge. Those who have hardy personality believe that they can influence events in their lives (control), feel it is important to involve themselves in efforts to achieve goals (commitment) and tend to assume a difficulty as an opportunity to grow or give positive meaning to each event (challenge) (Kobasa, Maddi, & Khan, 1982). One characteristic of qana'ah is to stay patient when given calamity and accept it as a destiny given by God. It has similarities with hardy personality, namely the aspects of control, commitment and challenge where they are able to control unpleasant events and give positive meaning to the event. So, it is increasingly clear that qana'ah is a positive trait that can prevent the emergence of mental health problems such as psychological distress.

Qana'ah also has similarities to type B personality where people who have a type B personality are described as always showing a more relaxed and calm, able to accept the situation rather than fight it by competing. People like this stay calm even though there is a time pressure. This causes them to be less likely to experience stress (Maulana, 2014). While the characteristics of people who are qana'ah are not making the world as the purpose of life, always accept whatever God gives them, and feel calm because they feel that all their needs have been fulfilled. It also makes it clear that qanaah is a trait similar to type B personality so it can be said that qona'ah can prevent the emergence of mental health problems as well as type B personality.

The last part is the sense of personal control where people with this trait tend to see that they have influence over their lives and do not see themselves as people who are powerless when they problems. People who have have these characteristics assume that their qualities influence the achievement that will be obtained in the future (Ross & Sastry, 1999). This assumption is similar to the characteristics of qana'ah where people like this believe in a power that will determine their future destiny, where if they try and God bless their efforts, then they are sure they will get it. So, qana'ah is also a trait characterized by the ability to control their self, but their self-control is dependent on God's destiny.

From the above explanation, it is concluded that the traits that prevent people from the stress are

already present in the characteristics of qana'ah. Although the above characteristics have similarities with gana'ah, there is a difference between gana'ah and the characteristics described earlier. One of the differences is that qana'ah is characterized by a sense of trust in a greater power that affects human destiny, namely God. This was explained in the anchor theory by Riyono (2012) which states that humans must have something that can be relied upon in the face of an uncertain future so that they can avoid risk and give people hope, this is called an anchor. This anchor can be categorized as material, self, others and believe in virtue. For those who believe in God, virtue itself is anchored to God so God is the highest anchor. However, this view only applies to people who believe in God. God is the perfect anchor that humans can rely on upon without hesitation. Relying on God's ability can make a person's psychological state feel peaceful and provide the power of motivation without knowing fear

Riyono (2012) explained that it was also in line with the humanistic-existential theory put forward by Rollo May who said that psychologically healthy people were able to assume freedom while facing their destiny, where individuals would feel free if they understood their destiny (Feist & Feist, 2008). So, people who are gana'ah are people who feel that they are free because they understand their destiny. They also only depend on God so God becomes the strongest anchor in their lives. Their trust in God causes qana'ah people just surrender themselves to God, willing to give whatever God gives and are satisfied with their sustenance even a little. This is what causes people of Qana'ah to be resistant to the stresses of life that they experience like stress due to poverty.

Besides not having psychological distress, mentally healthy people are also described as people who have psychological well-being. In this study, it was found that there was a significant positive relationship between qana'ah and psychological well-being with a correlation coefficient of 0.199 with p = 0.036 (p<0.05). This shows that qana'ah can encourage people to achieve well-being.

The characteristics of people who have psychological well-being are always having positive feelings in everyday life, having a feeling of being loved and having life satisfaction. People who have qana'ah have achieved satisfaction in their lives, where they always feel satisfied with what God has given. This has been investigated previously by Saputro (2017), the results show that there is a significant positive relationship between qana'ah and life satisfaction with a significance value of 0.006 (p<0.05) with an effective contribution of 7.1%. This means that the nature of qana'ah was predicted to cause life satisfaction.

People who have achieved satisfaction in life will always feel happy. Happy is one of the positive feelings a person has. Seligman (2005) stated that one element of happiness is life satisfaction that can be achieved if expectations and needs have been met. People who are qana'ah always feel the needs in their lives have been fulfilled so they become happy people. On the other hand, Seligman (2005) said that people who are happy lost their fear and worry about something that is not desirable, they are also able to evaluate the experience. Because people who are gana'ah are happy people, so, people who have gana'ah trait will never think about how the results will be obtained in the future, they always surrender to God's provisions but still try according to their abilities.

Besides being able to feel happiness, people who are qana'ah also have high self-esteem. This can be explained based on research conducted by Ani (2016) which shows that increasing understanding of qana'ah values through group discussion has a significant effect on increasing self-esteem in foster children in NurulHaq orphanage. These results indicate that qana'ah can improve one's self-esteem. Therefore, even though poverty can naturally cause self-esteem to be low, however, in people who are poor, poverty is not expected to cause low selfesteem. This is one reason why fishermen in Pena'ah village who live in poverty remain mentally healthy.

Other properties of qana'ah are not making themselves in a difficult condition, they are trying to achieve goals according to their current abilities or circumstances. In Rogers's theory of personality, it is said that people who have a real self that is in line with the ideal self (what they want to achieve and see) are people who have a healthy personality. The greater distance between the real self and ideal self will cause one's woes to grow bigger (Fesit& Feist, 2008).

Grateful is also one of the characteristics of qana'ah, where, in one of the studies conducted by Wicaksono and Susilawati (2016) showed there was a significant positive relationship between gratitude and psychological well-being with a significance value of 0,000 (p<0.05). This means that the more often someone is grateful, the higher psychological well-being of a person, which is one aspect of mental health. The coefficient of determination obtained is equal to 0.513 which shows 51.3%

psychological well-being can be explained by the presence of gratitude.

From the explanation above, it can be seen that the qana'ah is a noble characteristic that can suppress the appearance of psychological distress and can accelerate the growth of psychological well-being in a person.

5 CONCLUSSION

Based on the results of the analysis and discussion that have been described previously it can be concluded that there is a significant positive relationship between qana'ah and mental health in fishermen in Pena'ah village with (r) of 0.196 and pvalue = 0.034 (p<0.05). Furthermore, there is a significant negative relationship between qana'ah and psychological distress on fishermen in Pena'ah village with (r) of -0.194 with p = 0.041 (p <0.05). Qana'ah also has a significant positive relationship with psychological well-being with a value (r) of 0.199 and p-value = 0.036 (p <0.05). This means that qana'ah can suppress the appearance of psychological distress in a person and can accelerate the growth of psychological well-being in a person.

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DECLARATION OF INTEREST

The authors report no conflicts of interest in this work.

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