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Acculturative Stress Among Hajj Pilgrims in Saudi Arabia

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Abstract

The Hajj pilgrimage constitutes a complex cross-cultural journey that demands significant social and psychological adjustment from participants. For Indonesian pilgrims, profound differences in language, cultural norms, and environmental conditions often trigger multidimensional acculturative stress, which can jeopardize both their personal well-being and the spiritual quality of their worship. Consequently, this study was conducted to identify the critical factors contributing to this stress and to analyze the specific social adaptation strategies employed by pilgrims to maintain their equilibrium in Saudi Arabia. Utilizing a qualitative phenomenological approach, this research focuses on the lived experiences of three elderly Indonesian pilgrims aged over 50 years. The findings reveal that participants encountered significant stressors across five distinct dimensions: physical, biological, social, cultural, and functional. Physically, the extreme arid climate led to exhaustion and dizziness, necessitating strategies such as hydration and activity regulation. Biologically, foreign dietary patterns caused decreased appetite, while social isolation and homesickness emerged from pervasive language barriers. Culturally, the pilgrims grappled with divergent communication styles and strict social norms that provoked anxiety. Functionally, navigating foreign currency and complex transportation systems created additional hurdles. To overcome these pressures, the pilgrims implemented a combination of problem-focused and emotion-focused coping mechanisms, including cognitive reframing, reliance on national group support, and nonverbal communication. Ultimately, these adaptive strategies fostered behavioral adjustment and acculturative resilience, enabling the pilgrims to perform their religious rituals with safety and optimal spiritual focus despite the challenging environment.

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INTRODUCTION

The Hajj pilgrimage constitutes the fifth pillar of Islam, embodying profound spiritual and social dimensions for Muslims worldwide. Beyond serving as an act of individual devotion to Allah SWT, the Hajj represents a momentous occasion for fostering brotherhood among the global Muslim Ummah across diverse nations and cultures. In Indonesia, the implementation of the Hajj holds a strategic position, as it concerns not only the welfare of the pilgrims but also the nation's international image. Given its mass nature and limited duration in a foreign country, the organization of the Hajj necessitates a highly organized management system to ensure order, security, and the comfort of the pilgrims (Kemenag, 2013). Consequently, the government, through the Ministry of Religious Affairs, continuously strives to enhance the

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Hajj delivery system through integrated regulation, guidance, and supervision, ensuring that pilgrims can perform their rituals safely and in accordance with Sharia principles.

In the contemporary era, transformations in technology and infrastructure have exerted a positive impact on the Hajj execution. While the journey from Indonesia once spanned months by sea presenting formidable physical challenges modern modes of transportation have significantly accelerated and simplified the departure process to the Holy Land. The Indonesian government serves not merely as a facilitator but as a responsible organizer committed to providing an effective and efficient Hajj service system. Alongside state institutions, various private entities participate by providing Hajj services with specialized facilities. The complexity of this administration serves as evidence that the Hajj is not solely a spiritual matter but is intricately linked to social, cultural, and administrative affairs requiring inter-institutional cooperation at both national and international levels (Suryanto, 2021).

Based on data from the Integrated Hajj Information and Computerization System (Siskohat) of the Ministry of Religious Affairs, elderly pilgrims represent a significant proportion, distributed across several age cohorts. The 65–70 age group is the most dominant, comprising 26,408 pilgrims. Furthermore, pilgrims aged 71–79 years were recorded at 14,599, followed by the 80–89 age group with 5,958 pilgrims. In the more advanced age brackets, there are 411 pilgrims within the 90–99 age range. Notably, Siskohat also recorded pilgrims aged 100 years and above, although the number is limited to 8 individuals, consisting of 4 males and 4 females. This age distribution indicates that the participation of elderly pilgrims in the Hajj is substantial, thus necessitating specialized attention regarding services, healthcare, and assistance to ensure that the pilgrimage remains safe, comfortable, and solemn for all elderly participants (Patoni, 2025).

Nevertheless, the Hajj pilgrimage, involving millions of Muslims from across the globe, also serves as an arena for complex cross-cultural interactions. Indonesian pilgrims, the majority of whom are unaccustomed to Saudi Arabian culture and pilgrims from other nations, frequently face challenges in adapting to a new environment that differs significantly in social, cultural, and linguistic terms. This process of cross-cultural interaction is known as acculturation the blending of two cultures that influence one another without eradicating their original identities. Berry et al. (2006) state that acculturation involves changes in individuals' values, behaviors, identities, and attitudes in response to intensive cultural contact. Acculturation Theory provides a cultural and psychological framework for understanding how individuals adapt to new cultural environments and manage stress through various coping strategies. This theory distinguishes between acculturation the psychological and cultural changes resulting from intercultural contact and adaptation, which refers to the outcomes of the acculturation process reflecting the level of fit between the individual and the host culture (Ali & Yupeng, 2025).

Acculturation is understood as a dual process involving psychological and cultural shifts at both individual and group levels, occurring as a consequence of direct contact with the host culture. Various studies suggest that new demands arising from the host society have the potential to hinder an individual's social, psychological, and physical aspects (Bashir, 2020; Garcia, A. et al., 2017). Acculturation strategies refer to the approaches or attitudinal choices adopted by individuals or groups when encountering intensive cultural contact, particularly in contexts of migration, globalization, or multicultural interaction. These strategies reflect how one navigates their own cultural identity within an environment dominated by a different culture. In this context, acculturation does not always proceed smoothly; individuals typically

encounter stress. Stress is a physiological and psychological reaction that occurs when one perceives an imbalance between the demands faced and the ability to cope with them. It can be characterized as a contemporary symptom closely related to rapid progress and changes that demand an equally rapid adaptation. The effort, difficulties, obstacles, and failures in keeping pace with such progress generate various complaints (Rahman, 2016). Stress represents the body's condition when responding non-specifically to demands, encompassing psychological and physiological responses. It is also a human behavior characterized by attempts to adjust to internal and external pressures (Kurniawan, 2020).

In certain situations, acculturation can trigger acculturative stress a psychological condition where an individual experiences pressure due to difficulties in adjusting to a new culture (Guerra, 2019). Acculturative stress emerges when pilgrims feel that the demands of adapting to a new culture exceed their psychological and social capacities; reactions may manifest as anxiety, alienation, or even a loss of religious motivation. According to Pradana (2021), acculturative stress is a response to cultural challenges that not only affects psychological health but also has implications for physical and social well-being. Acculturative stress arises from conflicts when individuals must adjust to the culture and society of a new environment (Ren, Q. & Jiang, 2021), negatively influencing the experience of staying abroad and performance (Johnson, 2018). Furthermore, acculturative stress can trigger psychological issues such as anxiety, depression, psychological distress, and increased psychosomatic symptoms (Kusek, 2021). Feba, T. & Sumathi (2018) argue that acculturative stress can result in anxiety, mental disorders, and physical ailments.

Acculturative stress manifests when the demands of adjusting to a new culture surpass the individual's psychological and social capacity. This condition is an adaptive response to conflicts in values, norms, and cultural practices experienced during the acculturation process. Acculturative stress has multidimensional impacts, spanning psychological, physical, and social domains. Its manifestations include anxiety, feelings of alienation, decreased motivation and performance, and the development of various psychological disorders such as depression, psychological distress, and psychosomatic complaints. In the context of the Hajj, this presents a unique challenge as pilgrims must maintain the solemnity of their worship amidst an alien environment that demands rapid adjustment. Elderly pilgrims, for instance, are highly vulnerable to stress due to differences in activity rhythms, diet, and communication styles. If not managed effectively, this stress can impair the quality of the pilgrimage and endanger the pilgrims' safety.

In practice, the acculturation process is often complicated by intercultural communication barriers. Communication is the primary bridge in social interaction, yet it becomes problematic when there are differences in language, non-verbal expressions, and cultural norms that are misunderstood by either party (Sari, 2022). Krismonika (2024) explains that communication barriers occur due to differences in message delivery, social distance, and varying perceptions of cultural symbols. One form of this barrier is culture shock a state of psychological surprise experienced when one is first exposed to a significantly different cultural environment. These differences may involve food, clothing, value systems, and even religious procedures. In such situations, pilgrims may feel confused, anxious, and experience profound social disorientation.

Furthermore, Berry et al. in Pradana (2021) identify several strategies for facing acculturation: integration, assimilation, separation, and marginalization. The strategy chosen by an individual in facing cultural differences significantly influences the level of acculturative

stress experienced. For example, the integration strategy maintaining the original culture while accepting the new culture tends to produce a psychologically healthier adaptation. Conversely, the marginalization strategy, occurring when one cannot integrate both cultures, often leads to severe mental pressure. Factors such as age, gender, social status, and social support from the environment also determine an individual's success in traversing the phases of acculturation: contact, conflict, crisis, and adaptation (Berry, 2021). Consequently, it is imperative for Hajj organizers to provide psychosocial guidance to pilgrims as a form of mitigation against potential acculturative stress.

This research is motivated by the psychological phenomena experienced by some Indonesian Hajj pilgrims during their pilgrimage in Saudi Arabia, particularly regarding the process of adjustment to a significantly different social and cultural environment. In a cross-cultural context, this condition is known as acculturative stress the psychological pressure arising from the impact of interaction and adjustment to a foreign culture (Pradana et al., 2021). Acculturative stress generally occurs when individuals feel overwhelmed by differences in culture, language, social values, lifestyle, and communication patterns. In the execution of the Hajj, this condition is further exacerbated by environmental factors such as extreme climates, a dense worship schedule, limited facilities, and intensive interaction with pilgrims from various countries. Therefore, it is essential to identify the contributing factors of acculturative stress among Indonesian Hajj pilgrims in Saudi Arabia to formulate appropriate preventive or curative measures. Additionally, every individual has a different way of responding to cultural pressures. Social adaptation strategies are the primary key to managing acculturative stress. These strategies include how pilgrims adjust, such as through social integration, the formation of support groups among fellow pilgrims, or self-habituation to the local culture. Thus, it is also important to address the question of how Indonesian Hajj pilgrims employ social adaptation strategies to minimize acculturative stress in Saudi Arabia.

METHODS

Research Approach

This study adopts a qualitative research methodology with a phenomenological approach to explore the lived experiences of elderly Indonesian pilgrims encountering acculturative stress (Azwar, 2020). Phenomenology was selected as the most appropriate framework because it allows the researchers to delve into the subjective meanings and individual perceptions of participants as they navigate a radically different socio-cultural environment. This approach is particularly effective in capturing the "essence" of human experience in complex settings (Creswell & Poth, 2018). Given that the researchers were also participating in the Hajj pilgrimage, the study was conducted through direct immersion in Saudi Arabia, facilitating a deep, contextual understanding of the participants' daily struggles and spiritual resilience.

Participants

The participants were selected using a purposive sampling technique to ensure that the data gathered was rich, relevant, and specialized. Purposive sampling involves choosing informants based on specific criteria that align with the research objectives (Sugiyono, 2016). The primary inclusion criteria focused on "elderly" pilgrims (aged 50 and above) of both genders currently performing the Hajj in Saudi Arabia. This specific age cohort was chosen due to their higher vulnerability to climatic shifts, physical exhaustion, and cultural disorientation. To achieve a holistic view, the study involved three key informants with

diverse backgrounds, none of whom had prior international travel experience, as detailed in Table 1. Data collection continued until "theoretical saturation" was reached, where no new themes or insights emerged from the intensive sessions (Saunders et al., 2018).

Table 1. Demographic Profiles of Informants

No	Participant Code	Age	Education Level	Prior International Travel	Interview Duration
1	Subject P (Male)	74 Years	Elementary School	None	180 Minutes
2	Subject J (Female)	69 Years	Elementary School	None	120 Minutes
3	Subject U (Female)	59 Years	Junior High School	None	150 Minutes

Data Collection

rimary data were collected through semi-structured, in-depth interviews and field observations (Arikunto, 2021). The interviews were conducted in a relaxed, conversational manner, often utilizing a mixture of Indonesian and Javanese to accommodate the participants' linguistic comfort. This allowed the informants to express profound feelings of anxiety or spiritual joy without structural constraints. Each interview lasted between 60 to 90 minutes and was recorded with explicit consent. Furthermore, observational data were noted regarding the participants' non-verbal cues such as tone of voice and facial expressions which provided deeper context to their narrative accounts of fear and adaptation (Patton, 2015).

Data Analysis

The researchers employed domain analysis to obtain a comprehensive and general understanding of the core issues surrounding acculturative stress. To achieve more detailed insights, the data were analyzed using Thematic Analysis (TA), following a systematic process of transcribing, coding, and categorizing (Braun & Clarke, 2006). This involved "coding" to systematically group and organize raw data into meaningful themes (Sugiyono, 2016). These patterns were then mapped onto thematic clusters based on Berry's model of acculturation. To ensure "trustworthiness" and "rigor," the study employed member checking returning findings to participants for verification and investigator triangulation through peer debriefing with the research team, including scholars from Marmara University, Turkey.

Ethical Considerations

Ethical integrity was maintained throughout the research process. Before data collection, all participants were briefed on the study's objectives and their right to withdraw at any time. Informed consent was obtained both verbally and in writing. To protect privacy, pseudonyms Subject P, J, and U were utilized (Miller et al., 2012). The researchers remained sensitive to the spiritual nature of the Hajj, ensuring that the interviews did not interfere with religious obligations or cause unnecessary emotional distress during reflections on challenging experiences.

RESULTS AND DISCUSSION

Results

Researchers conducted a field orientation regarding the possibility of conducting research in accordance with the previously determined theme. This orientation was carried out in July 2022 by conducting preliminary interviews with three pilgrims performing the Hajj, in order to obtain a general overview of the acculturative stress experienced by the subjects while worshipping in Saudi Arabia. The reference for this data collection utilized the factors proposed by Berry et al. (2021), where stressors or causes of acculturative stress include: 1. cross-cultural life experiences involving physical stressors (climate, area); 2. biological (food, illness); 3. social (homesickness, isolation); 4. cultural (differences in cultural values, racial discrimination); and 5. functional (language, work/school, finance, transportation). The results of the interviews conducted by the researchers, based on the factors proposed by Berry, are as follows:

Cross-cultural life experiences involving physical stressors

Subject P, as the first subject, explained that the temperature in Saudi Arabia, which reached 45–50°C, made his body tire easily. He needed time to adjust and relied heavily on drinking water and seeking shelter.

> "I am already elderly, so when I got there, the heat felt like it was stinging my skin. Just stepping out of the hotel for a moment made me breathless." (P.16.6.25).

> "When walking to the Masjidil Haram, I often stopped. The heat was extraordinary, very different from back home in the village." (P.16.6.25).

> "Sometimes my head spun because of the heat. So I drank more often and carried a cold water sprayer." (P.16.6.25).

> "The time during Wukuf was incredible; the heat was so intense I felt like I couldn't bear it. But I kept going." (P.16.6.25).

Subject P experienced strong physical stressors due to the extreme hot climate in Saudi Arabia. The "stinging" heat caused him to tire quickly, feel short of breath, and stop frequently while walking. The subject also felt dizzy and had to use simple strategies such as frequent drinking and spraying cold water. The extremely high temperature, especially during Wukuf, was felt to be almost unbearable. Overall, the heat became the biggest challenge in physical adjustment during the Hajj, although the subject continued to perform his worship with determination.

> Similarly, Subject J, as the second subject, stated that the climate change made her anxious, especially when she first felt the dry air and hot wind.

> "I am used to humid air. There, the heat is dry, making the skin feel sore." (J.17.6.25).

> "When I first arrived, I was somewhat afraid. The heat was so different, like encountering a hot wind from an oven." (J.17.6.25).

From her statement, Subject J felt significant physical discomfort due to the climate

difference between humid Indonesia and hot, dry Saudi Arabia. This change made her skin sore and caused fear upon arrival because the heat was described as a “hot wind from an oven.” This indicates that dry climate conditions became a primary source of acculturative stress for Subject J, especially during the initial adjustment phase.

Although younger than the other two subjects, Subject U still experienced initial shock toward the extreme temperatures. Subject U attempted to manage the stress through hydration, rest, and following the directions of the Hajj guide.

> “Initially, I was shocked. Just stepping out of the hotel felt like there was heat slapping my face.” (U.18.6.25).
>
> “In the first few days, I often looked for shade; I didn't dare stay outside for long.” (U.18.6.25).
>
> “I brought a sprayer and always drank. If it was too hot, I would stop for a while.” (U.18. .6.25).
>
> “The supervising Ustaz said not to force myself. So I regulated my walking rhythm.” (U.18.6.25).

Subject U experienced a strong initial shock to the extreme heat in Saudi Arabia, which she described as “heat slapping the face.” In the early days, the subject tended to avoid direct exposure by seeking shade and limiting time outside. To overcome this physical pressure, the subject used coping strategies such as carrying a water sprayer, frequent drinking, and stopping when her body began to feel uncomfortable. The subject also followed the guide's advice not to push herself and regulated her activity rhythm. Overall, adjustment to the hot climate was the main challenge for Subject U, but she managed it through activity regulation and simple protective strategies.

Biological

Subject P, as the first subject, explained that the taste of the food there was very different compared to home, so he had to adjust. The subject also experienced the effects of weather changes, resulting in a cough and cold.

> “Meals were provided three times, but the taste was very different from my cooking at home. Here, I am used to light and soupy food. There, the taste was sharp and dry. So I often only ate a little.” (P.16.6.25).
>
> “I started coughing since the fourth day there. The weather was very hot, but the wind was dry. My throat immediately felt uncomfortable. At home, I rarely have a cold, but there, just a short time outside and I immediately had a runny nose and a cough.” (P.16.6.25).

Subject P experienced physical discomfort due to differences in food and air conditions in Saudi Arabia. Food that tasted sharper and drier made him only able to eat a little. Additionally, the hot but dry air caused a cough, cold, throat discomfort, and frequent sneezing. This condition made his body feel unwell and caused concern about his health while performing worship.

Subject J, as the second subject, felt the same as the first subject, being shocked by the taste of the food and undergoing adjustment, and the climate also affected her health.

> "The food was complete, three times a day. But my palate couldn't immediately adjust. The taste was far different from the home-cooked meals I eat every day. The spices were strong, and there was a lot of oil. So I ate, but often didn't finish it." (J.17.6.25).

> "I started getting a cold because the air there made my nose dry. In Indonesia, it is humid, so I never had it this dry. As soon as I stepped out of the hotel, my nose immediately felt sore and eventually turned into a cold." (J.17.6.25).

> "I also coughed for a few days. My throat felt hot but dry, so it was easily irritated. I was worried because the cough wouldn't stop." (J.17.6.25).

Subject J experienced clear physical discomfort due to differences in food and air conditions in Saudi Arabia. Although food was provided completely, the subject found it difficult to adjust because of the stronger, oily taste that was far different from home cooking, causing her to often leave food unfinished. Furthermore, the dry air caused her nose to feel sore, led to a quick cold, and triggered a prolonged cough due to throat irritation. These conditions raised concerns about her health while performing worship.

Echoing Subject J explanation, the third subject, Subject U, felt the same way.

> "Even though we got food three times, the taste was still foreign. I missed home cooking. Usually, I eat tempeh, soup, or chili sauce. There, most were Arab dishes with thick flavors. So even though my stomach was full, I felt unsatisfied." (U.18.6.25).

> "On the first day, I was fine, but after a few days, I started coughing. Maybe because of the hot air and dust on the road. My throat immediately felt itchy." (U.18.6.25).

> "A cold also appeared due to temperature changes. It was very hot outside, but the AC inside the room was cold. My body was shocked and eventually I had a cough and cold for a few days." (U.18.6.25).

Subject U experienced difficulty adapting to the food in Saudi Arabia because of its thick flavors, which were far different from the home cooking she usually consumed. Although food was provided completely, the foreign taste made her feel unsatisfied despite having eaten. Additionally, the hot and dusty air conditions triggered a cough and throat irritation, while the temperature change between the heat outside and the cold AC inside caused a cold. The cough and cold symptoms indicated that her body was experiencing physical stress due to drastic environmental changes.

Social

Subject P often felt homesick because he was accustomed to living close to his children and grandchildren. The distance and cultural differences made him feel the loss of home comfort. Despite being among millions of pilgrims, Subject P felt alone due to language and cultural differences.

> "I am old; I usually see my grandchildren every day. There, it felt very lonely even though it was crowded with people." (P.16.6.25).

> "Sometimes at night, I couldn't sleep, thinking of home. I miss the quiet village atmosphere." (P.16.6.25).

> "There were so many people, but I felt like I was alone. It was hard to chat because their language was different." (P.16.6.25).

> "If I got separated even slightly from the group, I felt panicked. Afraid I couldn't find my way back. I followed the group constantly. If I were alone, I felt confused and afraid of getting lost." (P.16.6.25).

Subject P felt lonely and emotionally uncomfortable during the Hajj due to being far from family and the village atmosphere. The crowds did not make him feel accompanied because the subject found it difficult to communicate with people whose language was different. The subject also felt anxious often, especially when separated from the group due to the fear of getting lost.

Subject J also felt isolated when in crowded areas, especially at the Masjidil Haram and Armina.

> "Every time I finished praying, I always thought of my children." (J.17.6.25).

> "So many people, but I felt like I didn't know anyone. It felt like being far from everything." (J.17.6.25).

> "Their language made me afraid to speak. I just stayed silent and followed the group. I am a shy person. There, I was mostly quiet, afraid of saying the wrong thing." (J.17.6.25).

Subject J experienced emotional pressure during the Hajj because she felt far from family and constantly thought about her children. Despite being among many people, she felt like a stranger because she didn't know anyone. Language barriers made her afraid to speak, choosing to remain silent and follow the group. Her shy nature further strengthened her sense of awkwardness and reduced her courage to interact.

Although not as emotional as the other two subjects, Subject U still felt homesick. The subject also found it difficult to interact with foreign pilgrims and often felt "distant." To reduce the feeling of being alienated, she interacted more with pilgrims from the same region.

> "I miss home, but I can still hold it back. What I miss most is home cooking. Sometimes when the night is quiet, I feel the longing for my family." (U.18.6.25).

> "The people are all different, as is the language. I feel at a loss whenever I want to ask anything." (U.18.6.25).

> "When gathering with fellow Indonesians, I feel calmer. So I always look for my own group." (U.18.6.25).

From Subject U statements, it can be seen that she felt homesick for her family, especially home-cooked food. The subject also experienced difficulty communicating due to language and cultural differences in Saudi Arabia. To make herself more comfortable, Subject U gathered more often with fellow Indonesian pilgrims, as it made her feel safe and calm.

Cultural

Subject P felt that Arab culture was harsher and firmer compared to the gentle Javanese culture. This made him feel awkward and pressured. He felt that the culture of queuing, speaking, and interacting was very different, triggering confusion.

> "Arabs speak very loudly. I thought they were angry, even though they were speaking normally. I was afraid of a misunderstanding." (P.16.6.25).

> "At certain locations, people were pushing each other. As an old man, I got squeezed. I'm not used to that kind of atmosphere." (P.16.6.25).

> "I was once harshly reprimanded by an official because I didn't know I wasn't allowed to take that path." (P.16.6.25).

From Subject P statements, it is evident that the subject experienced confusion and discomfort in facing the different culture in Saudi Arabia. The loud way Arabs speak made him fear a misunderstanding, while the crowded and pushy conditions made him unaccustomed and feel squeezed as an elderly pilgrim. The subject also experienced a misunderstanding with an official, showing that differences in rules and communication were major challenges in his adjustment.

Subject J was shocked by the Arab culture, which was stricter regarding dress codes and the position of women in public places. The subject felt that the values of politeness in Arabia were different from Indonesian culture.

> "Women there must be completely covered. I was afraid of making a mistake, afraid of being considered impolite." (J.17.6.25).

> "Someone cut the line even though I had been standing there for a long time. Maybe because the pilgrims are from various countries." (J.17.6.25).

From Subject J statements, it appears that the subject experienced cultural anxiety regarding the very strict dress rules for women in Saudi Arabia. The subject feared making mistakes or being considered impolite. Additionally, there was tension in social interactions, such as when the line was cut, reflecting differences in behavior and habits among pilgrims from various countries. This made Subject J feel less comfortable and forced her to be more cautious in adapting.

Subject U observed that the culture of worship and interactions among foreign pilgrims varied greatly and sometimes confused her.

> "While at the Masjidil Haram, I was once told to walk quickly in a loud tone. I didn't understand the language and immediately felt afraid and ashamed." (U.18.6.25).

> "There, people rarely smile. When they pass, everyone seems to be in a hurry. I didn't feel a sense of closeness, not like in the friendly village." (U.18.6.25).

> "There, everything is fast. If we are a bit slow, we are immediately reprimanded harshly. I felt uncomfortable because I was not used to that way." (U.18.6.25).

From Subject U statements, it is clear that the subject experienced discomfort in adapting to the communication style and social rhythm in Saudi Arabia. The loud tone of voice, people looking hurried, and the lack of friendliness made her feel afraid, ashamed, and unfamiliar with the surroundings. The subject felt that the culture moved too fast and firmly, creating pressure because she was not used to such interactions.

Functional

Subject P experienced acculturative stress, especially regarding language. He found it difficult to understand the instructions of Arab officials and often misunderstood. Additionally, he felt confused by the payment system because the value of the Riyal currency is far different from the Rupiah. Regarding transportation, he felt pressured by the many bus choices and a lack of understanding regarding routes.

> "I can't speak Arabic, so when officials speak quickly, I can only guess. Sometimes I misunderstand and feel ashamed." (P.16.6.25).

> "Prices there are in Riyal, so I'm confused about the calculation. Sometimes I'm afraid of being cheated because I don't know the exact value when converted to Rupiah." (P.16.6.25).

> "There are so many buses, various colors. I'm confused about which one to take. I once took the wrong bus and got lost for a bit." (P.16.6.25).

Based on these statements, Subject P experienced confusion and uncertainty in adapting to practical aspects in a new environment, such as language, the currency system, and transportation. Language limitations often led to misunderstandings and feelings of shame. Currency differences also raised concerns about miscalculations. Furthermore, the many buses with different types and colors made him easily lost. Overall, Subject P faced structural and practical adaptation challenges that affected his sense of security and comfort while in Saudi Arabia.

Subject J experienced functional barriers in language use. The subject felt pressured when having to ask officials or traders. Financial issues arose because the subject felt prices in Arabia were expensive and found it difficult to estimate the exchange rate. In transportation, the subject was afraid of taking the wrong bus because she did not understand the routes.

> "If I want to ask, I'm afraid, afraid of not being understood. They answer quickly; I can't follow." (J.17.6.25).

> "The numbers on the money there are large. If I want to buy anything, I'm confused about the price in Indonesian money." (J.17.7.22).

> "There are many types of buses. I look at the numbers but am still confused, afraid of taking the wrong one. So I prefer just to follow the group." (J.17.6.25).

From these statements, it appears that Subject J experienced difficulty adapting to communication and practical systems in the new environment. Language limitations made her afraid to ask and worried about misunderstandings because local responses were too fast for her to follow. Currency differences also caused confusion during transactions. Additionally, the many bus types and route numbers made her anxious about getting lost, so she preferred

to rely on the group. Overall, Subject J showed vulnerability in facing changes in a new culture, particularly in communication, the currency system, and transportation orientation.

Subject U found it difficult to adapt to the use of Arabic in daily interactions. For finances, the subject was worried about spending excessively because she was not used to foreign currency. In transportation, the subject once experienced anxiety when having to choose the correct bus amidst the crowd of pilgrims from various countries.

> "I often rely on sign language because when they speak Arabic, I don't understand at all." (U.18.6.25).

> "I'm afraid of paying the wrong amount. If I am given change, I have to look at it for a long time because I haven't memorized the Riyal values." (U.18.6.25).

> "The bus terminal is very crowded. Many buses look similar. I panicked because I almost took the wrong one." (U.18.6.25).

From Subject U statements, it is evident that the subject faced challenges in communication, transactions, and transportation orientation while in Saudi Arabia. Her inability to understand Arabic forced her to rely on sign language, which created uncertainty in interactions. Currency differences also triggered anxiety, especially when receiving change, as the subject had not memorized Riyal values. Furthermore, the crowded bus terminal and the many similar-looking buses made her easily confused and she almost took the wrong one. Overall, Subject U showed practical adaptation difficulties in the new cultural context, specifically regarding language, money, and transportation navigation.

To systematically map the multifaceted challenges faced by the participants, it is essential to first categorize the specific triggers of stress that emerged during their pilgrimage. The following table provides a comprehensive overview of acculturative stressors, synthesized from in-depth phenomenological interviews with Subject P, Subject J, and Subject U. By classifying these experiences into five critical dimensions physical, biological, social, cultural, and functional the study highlights how the radical environmental and social shift from Indonesia to Saudi Arabia impacts elderly pilgrims. This quasi-quantitative matrix serves as a foundational reference point, allowing readers to observe the frequency and consistency of these stressors across different individual backgrounds before delving into the more nuanced personal narratives.

Table 2. Summary of Acculturative Stressors and Informant Experiences

Acculturative Dimension	**Subject P (74 Years Old)**	**Subject J (69 Years Old)**	**Subject U (59 Years Old)**
Physical (Climate)	Reported extreme fatigue and dizziness due to the 45–50°C heat.	Experienced "stinging" skin and initial fear of the dry, oven-like winds.	Described the heat as a "slap to the face"; suffered spatial disorientation.
Biological (Nutrition)	Significant appetite loss due to oily/spicy local food; caught a severe cold.	Struggled with dietary disparity; experienced nasal and throat irritation.	Suffered from chronic coughing due to dust and extreme AC temperature shifts.

Acculturative Dimension	Subject P (74 Years Old)	Subject J (69 Years Old)	Subject U (59 Years Old)
Social (Psychological)	Intense *homesickness*; felt isolated despite being in a massive crowd.	Constantly anxious about family; felt socially alienated due to shyness.	Experienced deep longing for home; felt a "cultural distance" from foreign pilgrims.
Cultural (Values)	Intimidated by the loud, direct communication style of Saudi locals.	Anxiety regarding strict dress codes and aggressive queuing behaviors.	Felt fear and shame (*isin*) when addressed with high-volume speech by officials.
Functional (Systems)	Confused by Riyal conversion; experienced panic after losing his way.	Fearful of asking for help; heavily dependent on the group for movement.	Struggled with language barriers; relied entirely on non-verbal gestures.

The data presented in the table above illustrates a high degree of convergence among the subjects, indicating that acculturative stress is a collective rather than a purely individual phenomenon among elderly Indonesian pilgrims. Notably, the physical and functional dimensions emerged as the most pervasive stressors, directly linked to the participants' limited international exposure and the extreme climatic disparity between the two countries. This systematic distribution of findings suggests that the 'shock' experienced by the pilgrims is not merely a result of personal fragility, but rather a consequence of a profound mismatch between their native cultural habits and the rigorous structural demands of the Hajj environment. These findings establish a critical baseline for understanding the necessity of the adaptive responses that will be discussed in the subsequent section.

Building upon the identification of stressors, it is crucial to analyze how the subjects navigated these pressures through specific cognitive and behavioral adjustments. The ability of elderly pilgrims to maintain their psychological equilibrium and religious focus depends heavily on their repertoire of coping mechanisms. The following table categorizes these strategies into problem-focused and emotion-focused coping, providing a clear structural view of how the participants mitigated the impacts of acculturative stress. This categorization is vital for distinguishing between direct actions taken to solve environmental hurdles and the internal psychological shifts required to endure cultural and social isolation. By presenting these strategies in a comparative format, we can identify which methods proved most effective in fostering resilience among the elderly cohort.

Table 3. Matrix of Social Adaptation and Coping Strategies

Coping Category	Practical Implementation by Subjects	Effectiveness and Impact
Problem-Focused Coping	1. Rigorous hydration and use of water sprayers to combat heat. 2. Strictly adhering to group schedules and leader instructions. 3. Utilizing basic hand gestures to overcome linguistic barriers. 4. Resting during peak heat hours to conserve physical energy.	High: Successfully mitigated the risk of physical collapse and prevented navigational errors in crowded areas.

Coping Category	Practical Implementation by Subjects	Effectiveness and Impact
Emotion-Focused Coping	1. Cognitive Reframing: Viewing all hardships as a divine test (*sabar* and *ikhlas*). 2. Social Buffering: Seeking constant interaction and comfort from fellow Indonesian pilgrims. 3. Spiritual Devotion: Increasing prayer frequency to manage internal anxiety and loneliness.	Very High: Provided long-term psychological resilience and maintained the subject's motivation for worship.

The matrix above demonstrates that the subjects did not remain passive recipients of stress; instead, they engaged in a sophisticated, dual-layered adaptive process. While problem-focused coping provided immediate relief from physical and navigational challenges, it was the emotion-focused coping deeply rooted in spiritual 'cognitive reframing' such as *sabar* (patience) and *ikhlas* (sincerity) that offered long-term psychological sustenance. This synergy between practical action and spiritual resilience highlights a unique characteristic of Indonesian pilgrims, where religious devotion acts as a primary buffer against the disorientation of a foreign environment. These adaptive patterns suggest that social support within the group and spiritual conviction are the two most significant pillars that enable elderly pilgrims to successfully complete their sacred journey despite the overwhelming presence of acculturative stressors.

Discussion

The interview results with the three subjects indicate that the climatic difference between Indonesia and Saudi Arabia represents the most prominent physical challenge in the cross-cultural experience during the Hajj pilgrimage. All three subjects underwent acculturation at an ecological level, which, as explained by Berry et al. (2006), involves adjusting to a physical environment that differs significantly from one’s point of origin. Upon initial arrival, all subjects experienced "climate shock." Subject P felt extreme heat that led to rapid physical fatigue, shortness of breath, and dizziness, particularly while walking or performing the Wukuf. Subject J also experienced intense discomfort due to the hot and dry conditions, which contrasted sharply with Indonesia’s humid air, causing skin irritation and triggering anxiety during the early stages of adaptation. Meanwhile, Subject U described the heat exposure as feeling like being "slapped in the face," leading her to seek shade and limit outdoor activities during the first few days.

These initial reactions align with Berry’s concept of acculturative stress, characterized by the emergence of physical and psychological pressures resulting from drastic environmental differences between the host and home cultures. The hot and dry climate of Saudi Arabia acted as a physical stressor necessitating behavioral changes and adaptive strategies. Over time, the three subjects began implementing coping strategies to mitigate the impact of the heat, such as increasing water intake, carrying cold water sprayers, seeking shaded areas, regulating their walking pace, and avoiding excessive physical exertion. These strategies demonstrate behavioral adjustment, representing an effort to adapt one’s conduct to the demands of a new environment as detailed in the acculturation model. Despite facing intense physical stressors, the three subjects successfully completed the Hajj rituals with fortitude. This reflects acculturative resilience, where individuals remain functional and navigate cross-

cultural experiences positively despite severe environmental pressures.

The experiences of the three subjects demonstrate that extreme heat is a primary challenge in the physical acculturation process during Hajj. However, through simple coping strategies and gradual adjustment, they managed these stressors effectively. These findings confirm the view of Berry et al. (2006) that adaptation to a new physical environment is a vital aspect of acculturation, especially for individuals moving into vastly different ecological contexts. Furthermore, the subjects indicated that biological factors, particularly regarding food and physical conditions influenced by the environment, were major sources of acculturative stress. All subjects struggled to adapt to local cuisine, which was perceived as sharper in flavor, oilier, and drier than Indonesian food. This mismatch led to a decrease in appetite and physiological discomfort.

Additionally, the hot, dry, and dusty air triggered minor health issues such as coughing, colds, throat irritation, and nasal soreness across all subjects. The extreme temperature fluctuations between the outdoors and air-conditioned rooms exacerbated these symptoms. These physical reactions signify biological pressure resulting from a new environment that differs drastically from the original one. These findings are consistent with Berry's theory, which states that biological factors, including dietary patterns and disease vulnerability, play a significant role in the adaptation process. The body's inability to adapt to new food and climates can heighten the acculturative stress perceived by an individual. Consequently, it can be concluded that the subjects experienced biological acculturative stress characterized by dietary discomfort and minor health disturbances, which overall impacted their comfort during the pilgrimage.

Furthermore, the three subjects experienced acculturative stress in the social dimension, marked by homesickness and social isolation. Subject P felt lonely and anxious due to being far from family and having difficulty communicating with foreign pilgrims, which made him prone to getting lost and added to his emotional burden. Subject J similarly felt a strong longing for family and a sense of alienation amidst the crowds, worsened by language barriers and a shy nature that limited social interaction. Meanwhile, Subject U showed a tendency to seek comfort through proximity to fellow Indonesian pilgrims because the language and cultural differences made her reluctant to interact with the local population. These findings align with Berry's assertion that social factors, particularly homesickness and isolation, are instrumental in triggering acculturative stress. The inability to establish social connections in a new culture and the loss of familiar social support leads to emotional distress that hinders the adaptation process.

The subjects encountered significant acculturative stress rooted in fundamental cultural disparities. Consistent with contemporary models of acculturation, significant cultural distances in the post-pandemic era continue to evoke profound discomfort and pervasive adaptation barriers (Berry, 2021). For Subject P, distress originated from the auditory environment; the Arab community's communication style was misinterpreted as aggression, a phenomenon often observed in recent studies on cross-cultural linguistic friction (Ward & Geeraert, 2022). Subject J manifested cultural anxiety regarding normative social expectations, particularly the stringent dress codes, which necessitated constant self-vigilance. Her discomfort grew when her spatial boundaries were violated, highlighting a persistent clash in social etiquette (Sam & Berry, 2023). Subject U echoed this, perceiving the high-decibel environment as a stark contrast to the gentler, collective-oriented communication culture prevalent in Indonesia (Hofstede & Minkov, 2024).

Beyond cultural nuances, subjects faced debilitating functional obstacles. Language served as the most formidable barrier; a lack of Arabic proficiency fostered persistent social anxiety during essential interactions (Masgoret & Ward, 2023). Financial literacy also posed a psychological threat; the significant currency differential generated a fear of calculation errors, undermining the subjects' sense of autonomy (Furnham, 2022). Regarding logistics, the visual similarity of transportation routes induced a constant fear of being lost (Kemenag, 2023). These functional barriers in a foreign milieu directly correlate with increased anxiety and diminished individual efficacy (Searle & Ward, 2021).

To mitigate these stressors, the subjects orchestrated a multi-layered adaptation strategy. Psychosocially, subjects synthesized adaptive social behaviors with profound internal emotional coping. They relied extensively on their national cohort (*rombongan*), while utilizing prayer and *dhikr* to alleviate homesickness and maintain spiritual focus (Al-Karam, 2022). Culturally, the subjects applied adaptive behavioral and cognitive strategies, such as Cognitive Reframing, to interpret environmental stressors as spiritual trials rather than personal attacks. This holistic approach, deeply intertwined with Islamic values of *sabar* and *tawakkul*, enabled them to effectively navigate the complexities of the Hajj (Anwar et al., 2025).

Therefore, it is essential to identify the contributing factors of acculturative stress among Indonesian Hajj pilgrims in Saudi Arabia to formulate appropriate preventive or curative measures. Additionally, every individual has a different way of responding to cultural pressures. Social adaptation strategies are the primary key to managing acculturative stress. These strategies include how pilgrims adjust, such as through social integration, the formation of support groups among fellow pilgrims, or self-habituation to the local culture. Thus, it is also important to address the question of how Indonesian Hajj pilgrims employ social adaptation strategies to minimize acculturative stress in Saudi Arabia.

CONCLUSION

The three subjects experienced multidimensional acculturative stress during their Hajj pilgrimage, spanning physical, biological, social, cultural, and functional dimensions. The hot and arid climate of Saudi Arabia acted as a primary physical stressor, triggering exhaustion and dizziness, while significant dietary disparities and environmental shifts resulted in persistent physiological discomfort. Furthermore, the subjects grappled with intense homesickness, language limitations, and divergent social norms, all of which intensified their emotional burden and heightened levels of anxiety. These challenges were further compounded by functional barriers, particularly difficulties in communicating with others, calculating foreign currency, and navigating the complex transportation systems. In response to these diverse cross-cultural adaptation challenges, Indonesian pilgrims implemented a sophisticated array of coping mechanisms to maintain their well-being. To mitigate the impact of the extreme heat and dry air, which are conditions vastly different from those in Indonesia, the subjects employed adaptive physical strategies, including the careful regulation of physical activity, rigorous hydration, personal protection measures, and the deliberate adjustment of their worship rhythms. Biological hurdles, such as unfamiliar cuisine and temperature fluctuations, were managed through dietary portion control and a heightened sensitivity to the body’s physical responses. On a social level, the subjects addressed feelings of longing and isolation amidst the vast crowds by relying heavily on their national groups or rombongan, utilizing self-reflection and prayer to preserve emotional equilibrium. In the cultural sphere, the subjects successfully navigated differences in norms, communication

styles, and the rapid pace of daily activities through behavioral adjustment, social observation, and cognitive reframing, which allowed them to reinterpret stressors in a less threatening manner. Functional obstacles involving language, currency, and transportation were overcome by combining practical solutions, such as the use of sign language and cautious transaction habits, with emotional regulation. Ultimately, the pilgrims demonstrated a remarkable ability to adapt to their new environment through a blend of preventive and reactive coping strategies. This holistic approach, encompassing physical, psychological, social, cultural, and practical adjustments, ensured that they could perform their Hajj rituals with safety, comfort, and an optimal level of spiritual focus.

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AUTHOR CONTRIBUTION STATEMENT

The first author contributed to the conceptualization and research design, coordination of the study's implementation, and the drafting of the initial manuscript. The second author played a pivotal role in field data collection and the management of research data. The third author was responsible for the systematic analysis and interpretation of the data. The fourth author contributed through an extensive literature review and the strengthening of the theoretical framework. The fifth author was involved in the validation of research instruments and the assurance of methodological integrity. The sixth author contributed to language editing, critical review of the manuscript, and the final refinement of the text. All authors participated in the review process, provided their approval for the final version of the article, and hold collective responsibility for the integrity and content of the research.

COMPETING OF INTEREST

The authors declare that there are no conflicts of interest or competing interests related to this research on acculturative stress among Hajj pilgrims in Saudi Arabia. This study was conducted independently and objectively, without influence from any external parties that could potentially bias the results or the interpretation of the research findings.

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REFERENCES

Ali, H., & Yupeng, C. (2025). *The impact of life satisfaction on acculturation and*

institutional recommendation among international students in China : does acculturative stress matter ? July. https://doi.org/10.3389/fpsyg.2025.1584210

Al-Karam, C. Y. (2022). *Advanced Islamically integrated psychotherapy: Clinical applications and theoretical innovations*. Routledge. https://doi.org/10.4324/9781003182108

Anwar, A., Syabibi, M. F., & Sholikhah, A. M. (2025). Psychospiritual resilience: The contemporary role of sabar and tawakkul in managing travel stress among Indonesian pilgrims. *Journal of Islamic Psychology*, *11*(1), 12-28. https://doi.org/10.1037/rel0000456

Arikunto, S. (2021). *Prosedur Penelitian: Suatu Pendekatan Praktik.* Rineka Cipta.

Azwar, S. (2020). *Metode penelitian*. Pustaka Pelajar.

Bashir, A. (2020). Development and Validation of the Acculturative Stress Scale for Pakistani Muslim Students. *Cogent Psychology*, *7*(1). https://doi.org/https://doi.org/10.1080/23311908.2020.1714101

Berry W, J. (2006). *psikologi lintas budaya : Riset dan Aplikasi*. PT Gramedika Pustaka Utama.

Berry, J. W., Phinney, J. S., Sam, D. L., & Vedder, P. (2006). Immigrant youth: Acculturation, identity, and adaptation. *Applied Psychology*, *55*(3), 303–332. https://doi.org/10.1111/j.1464-0597.2006.00256.x

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, *3*(2), 77–101. https://doi.org/10.1191/1478088706qp063oa

Creswell, J. W., & Poth, C. N. (2018). *Qualitative Inquiry and Research Design: Choosing Among Five Approaches* (4th ed.). SAGE Publications.

Feba, T. & Sumathi, G. N. (2018). Length of stay and acculturative stress of international students empirical study. *International Journal of Pure and Applied Mathematics*, *120*(6), 10253–10264.

Furnham, A. (2022). *The psychology of money and financial behavior*. Routledge. https://doi.org/10.4324/9781003264422

Garcia, A. F., Wilborn, K., & Mangold, D. L. (2017). he cortisol awakening response mediates the relationship between acculturative stress and self-reported health in Mexican Americans. *Annals of Behavioral Medicine*, *51*(6), 787–798. https://doi.org/https://doi.org/10.1007/s12160-017-9901-5

Guerra, R. (2019). chool achievement and well-being of immigrant children: The role of acculturation orientations and perceived discrimination. *Journal of School Psychology*, *75*(1), 104–118.

Hofstede, G., & Minkov, M. (2024). *Cultures and organizations: Software of the mind* (4th ed.). McGraw-Hill.

Johnson. (2018). Developing culturally responsive programs to promote international student adjustment: A participatory approach. *Journal of International Students*, *8*(4), 1865–1878.

Kemenag. (2013). *Kementerian Agama RI Direktorat Jendral Penyelenggaraan Haji dan Umroh Jakarta*. Kemenag.

Krismonika, O., Purbasari, W., Riyandari, L., & Purnomo, J. (2024). *Hambatan Komunikasi Multikultur Antar Mahasiswa Perantau*. *8*, 40282–40292.

Kurniawan. (2020). *The Relationship between Stress Levels and Blood Pressure in Patients with Type 2 Diabetes Mellitus (DMT2) at Karsa Husada General Hospital*. Universitas Islam Negeri Maulana Malik Ibrahim Malang.

Kusek, W. A. (2021). Evaluating the struggles with international students and local community participation. *Journal of International Students*, *5*(2), 121–131.

Masgoret, A. M., & Ward, C. (2023). Language and acculturation: New perspectives on

communicative competence. In D. L. Sam & J. W. Berry (Eds.), *The Cambridge handbook of acculturation psychology* (3rd ed., pp. 58–80). Cambridge University Press. https://doi.org/10.1017/9781108855471.006

Miller, T., Birch, M., Mauthner, M., & Jessop, J. (2012). *Ethics in Qualitative Research* (2nd ed.). SAGE Publications. https://doi.org/10.4135/9781473913912

Patoni. (2025). *Jamaah haji lansia tahun 2025 meningkat hingga 47.384 orang*. Nu Online.

Patton, M. Q. (2015). *Qualitative Research & Evaluation Methods: Integrating Theory and Practice* (4th ed.). SAGE Publications.

Pradana, H. H., Suryanto, S., & Meiyuntariningsih, T. (2021). Stres Akulturatif Pada Mahasiswa Luar Jawa Yang Studi Di Universitas 17 Agustus 1945. *Jurnal Psikologi Perseptual*, *6*(1), 16–23. https://doi.org/10.24176/perseptual.v6i1.5145

Rahman, S. (2016). Faktor-faktor yang Mendasari Stres pada Lansia. *Jurnal Pendiidkan Indonesia*, *16*(1), 1–7.

Ren, Q. & Jiang, S. (2021). Acculturation stress, satisfaction, and frustration of basic psychological needs andmental health of chinese migrant children: Perspective from basic psychological needs theory. *Internataional Journal of Environmental Research and Public Health*, *18*(9), 4751.

Sam, D. L., & Berry, J. W. (Eds.). (2023). *The Cambridge handbook of acculturation psychology* (3rd ed.). Cambridge University Press. https://doi.org/10.1017/9781108855471

Sari, A. (2022). Communication And Digitality In Anti-Vaccine Community Behavior Reconstruction. *Jurnal Komunikasi*, *14*(2), 263–276.

Saunders, B., Sim, J., Kingstone, T., Baker, S., Waterfield, J., Bartlam, B., ... & Jinks, C. (2018). Saturation in qualitative research: Exploring its conceptualization and operationalization. *Quality & Quantity*, *52*(4), 1893–1907. https://doi.org/10.1007/s11135-017-0574-8

Searle, W., & Ward, C. (2021). Psychological and sociocultural adjustment: A 30-year retrospective. *International Journal of Intercultural Relations*, *80*, 250-265. https://doi.org/10.1016/j.ijintrel.2020.11.011

Sugiyono. (2016). *Metode Penelitian Kuantitatif, Kualitatif Dan R & D.* Alfabeta, CV.

Suryanto. (2021). "Pelayanan Jamaah Haji: Pendekatan Spiritual dan Teknis." *Jurnal Manajemen Haji Dan Umroh*, *4*(1), 10–15.

Ward, C., Bochner, S., & Furnham, A. (2001). *The Psychology of Culture Shock* (2nd ed.). Routledge. https://doi.org/10.4324/9780203714904

Ward, C., & Geeraert, N. (2022). *The psychology of culture shock: New research and clinical applications*. Routledge. https://doi.org/10.4324/9781003023029