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# Relationship between Religious Beliefs and Hardiness and Mental Health among Students of Islamic Azad University of Iran

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# ABSTRACT

The aim of this study was to examine the role of religious beliefs and hardiness and mental health among students. In order to evaluate the research hypotheses, 365 students of Islamic Azad University of Islamshahr Branch through the cluster random sampling were selected. Means of data collection were questionnaires of Hardiness, mental health, temple and a researcher made questionnaire. For data analysis, methods of the Pearson correlation coefficient and stepwise multiple linear regression were used. The results showed there is a significant relation between religion beliefs and mental health of students. There is a relation between hardiness and mental health. Religious beliefs, hardiness and challenges (one of the components of hardiness) are considered as important factors in predicting students' mental health, respectively. Regression coefficient results showed that as a total these three variables predict 29% of changes in mental health. Peripheral outcomes of the study showed there is a significant difference among married and single students in terms of mental health, so that the mental health level of single students is higher than married students, there is no significant difference between employed and unemployed students regardless of their educational levels, but when in levels of education was considered as a variable, the difference was significant, so that there is no significant differences between the mental health of employed and non-employed students in Associate and Bachelor degrees, but in the master degree there is a significant difference between employed and unemployed students. That is, employed postgraduate students' mental health is low. There is a significant difference between mental health of male and female students so that the mental health level of boys is higher than girls.

KEYWORDS: Religious Beliefs, Hardiness, Mental Health, Students

# 1. INTRODUCTION

Today, Mental Health is one of the main criteria for evaluating the health of a society and undoubtedly plays a significant role in the progress and effectiveness of it. Mental health is one of the basic criterion for the evaluation of freshness, vitality and enjoyment of life. Mental health in fact like physical health simply no means the absence of problems or disease .Mental health involved both of emotional states and mental condition, that is, either the feelings and thoughts of the person and is said to broad discipline in the activities which directly or indirectly is related to proper functioning of mental components and included everything that in the definition of healthy, well -being condition, Physical, mental, social, and not the absence of disease [1,2].

Epidemiological studies show that physical and mental illnesses despite the human achievement of life and welfare facilities is increasing. The researches that were conducted to assess the situation of students' mental health show the prevalence of mental disorders among college students has a high frequency, unfortunately .In are search was conducted by Beshart et al. [3], mental health status of 218 students were surveyed. Findings showed that 27 percent of students suffered from mental disorder. Mesgarany et al. [4] in a study was conducted on 491 students, showed that prevalence of disorder among girls was 17.3% and in among boys 11.1 percent. In this regard, Jahani Hashemi et al. [5], in a study, evaluated the mental health of Qazvin Medical University students of first and last year, showed that 69.3 percent of students suffer from psychological disorders. On the other hand, are increasingly finding that have demonstrated role of psychological factors such as optimism, music, joy, spirituality and coping strategies in improving the quality of mental and physical health of people. More than hundreds studies have shown the relationship between religion and mental health. Heckney and Sanders [6], Hills and Francis in 2004 indicated that the faith, doing religious instruction and attend religious services can be effective in preventing the occurrence of mental health problems of the people and treatment. In this regard, the findings from Bahrami Ehsan [7] found that religious and having a life with spiritual values in different stages of growth has a significant contribution to the health, behavioral and social. Derutter et al. [8] examined the relationship between religious attitudes and religious practices in predicting adult mental health. Their results showed that religious orientation and cognitive -community attitudes to religious have a significant positive correlation with psychological well-being and a significant negative correlation with mental disorders.

SiddiquiArafi [9], in research entitled religious orientations, coping styles and happiness of the students indicated that there is a positive relationship between intrinsic religiosity orientations and happiness.

Kezdy et al. [10] conducted a longitudinal study showed that education of religious matters in child will tend to the religion in adolescence and young, has a positive effect on psychological and mental health. Golami and Bashildeh [11] in a study on divorced women of Lamerd city, showed that spiritual healing is a good way to improve the mental health of divorced women. Vaillanta et al. [12] in a longitudinal study, surveyed the relationship between religiosity and mental health of422 students at Harvard University. Their study found that religiosity and psychological, physical and social well-being of subjects has a significant positive association. Williams (2010) found that religious beliefs and worship leads to comfort, delight and motivation and raise mood and increases motivation and sense of purpose.

We can get what passed, scientific study of religion and the study of it with the psychological variables, in recent decades has been the focus of many researchers. Indeed, religion is a psychological force that can affect the outcome of life [14]. One of the most important factors that are affect by the spiritual and religious beliefs is hardiness. Masten [15], believes that hardiness is a positive psychological capacity in coping with stress and events and include the ability to return to equilibrium after experiencing unrest and tension, on the other hand, research that has been done about hardiness suggests that people who have the higher hardiness ,are more resistant in the face of the problems.

Kobasa [16] combined three nature of commitment, control and challenge which all derived from philosophy, characteristic of hardiness suggested as a shield against all kinds of diseases [17]. So it can be said that hardy people because of the higher mental strength in terms of mental health are also at a higher level. To address this, Meddi [17] showed that there is a significant correlation between hard work and religiosity. Well as the hard work and religiosity, predictor of anger and lower depression and social support and the ability to deal with more problems, and therefore mental health is higher. According to what passed, in this study the author is seeking to review the role of hardiness and religious beliefs in the mental health of students.

#### 2. MATERIAL AND METHODS

## Method

The population consisted of all students studying in Islamic Azad University in the academic year 2013-2014. Sampling was carried out using random cluster method. For the first sampling among the schools in the university, four faculties and from each faculty a field of study was randomly selected. Taking into consideration the total number of students (22341 rose) and referring to the Morgan table, a sample with size of 377 people randomly was selected and they responded to questionnaire of features of demographic, personal views, public health and the temple. Noteworthy those 12 cases of the questionnaires were excluded due to distortion and at the end365 questionnaires were employed for the research.

#### Tools

A) **Temple Test:** This test was made in 2000 by Golzari and has 25 articles which measures the practice of religious beliefs. Test articles are located in four areas of practice of desirables, religious activities, taking into account the religion in decisions and choices of the life. Each question has five options that are scored from zero to four. Manufacturer of the test has been earned its reliability through retest and divided into two, 0.76 and 0.91, respectively. Also, Cronbach's alpha coefficient for the test in this study is 0.94.

**B)** The questionnaire of the personal views survey (hardiness) PVS: Koubasa's hardiness scale (1988) is a 50-item questionnaire that includes sub-tests of the challenges involved (17 questions), commitment (16 questions) and control (17 questions), which is formed based on the Likert scale (four options) that is with the range from 0 (not at all) to 3 (very true) [16]. The test of hardiness [16] is translated by Ghorbani [19] and formal and content validity has been calculated. The performed studies show that components of hardiness namely control, commitment and challenges have the reliability coefficient 0.70, 0.52, 0.82, respectively. In this study the coefficient for the total hardiness characteristic 0.75 has been calculated.

## C) Measure tool of mental health (GHQ)

Mental health measurement tool (GHQ) is the 28 items general health questionnaire (GHQ). This questionnaire, first has developed by Goldberg (1972) and extensively to detect minor psychiatric disorders is used in different situations. This questionnaire is screening questionnaire based on the self-report method. The Cronbach's alpha of this questionnaire for the study (0.82) is reported.

#### 3. RESULTS

#### **Descriptive findings**

As seen in Table 1 from 365 students, 85 cases are male (13%) and 280 cases females (77%). As seen in Table 2, 103 subjects (28.2 %) are employed and 262 people (71.7 %) are unemployed. As shown in Table 3 it can be seen 220 subjects (60 %) are single and 145 of them (40 %) are married. As shown in Table 4 it can be seen 45 students (12.3%) are associate degrees, 240 (65.7 %) at the bachelor level and 80 of them (21.9%) are in

master level. Average and standard deviation of subjects' scores on variables of mental health, hardiness, commitment, control, challenge and religious beliefs are presented in Table 6. As shown in Table 5, average of mental health in subjects of this study is 24.80 that based on the description given in the introduction of the test, implies that subjects are at risk of mental health. Average of hardiness is 49.21, average of commitment is 49.22, average of control is 46.62, average of challenge is 42.44, and the average of religious beliefs is 47.19.

As shown in Table 6, there is a negative correlation 0.48 between mental health and hardiness (According to that, in the test GHQ a lower score indicates better mental health, and at the opposite in the religious beliefs and hardiness test, higher scores are more desirable, so why the correlation is negative). There is a negative correlation 0.52 between mental health and religious beliefs. There is a negative correlation 0.47 between mental health and component of commitment. There is a negative correlation 0.45 between mental health and component of challenge. There is a negative correlation 0.9 between mental health and component of control. Except component of control, the relationship between mental health and other variables is significant.

There is a relationship 0.78 between hardiness and religious beliefs. There is a correlation 0.97 between hardiness and component of commitment. There is a correlation 0.97 between mental health and component of challenge. There is a correlation 0.18 between mental health and component of control. Except component of control, the relationship between mental health and other variables is significant.

There is a relationship 0.78 between commitment and religious beliefs. There is a correlation 0.76between religious beliefs and challenge. There is a correlation 0.10 between religious beliefs and control. Except component of control, the relationship between religious beliefs and other variables is significant. There is a relationship 0.96 between challenge and control that is not significant statistically. To predict which of the variables can predict students' mental health, multiple regression analysis was used and variables in step by step entered into equation that summarizes the table below.

Table 1. Distribution of frequency of subjects according to gender					
Sex	Frequency	Percent			
Girl	280	77%			
Son	85	13%			
Collect	365	100%			

Table 2. Distribution of frequency of subjects according to occupational status						
Groups	Employed	Unemployed	Collect			
Number of subjects	103	262	365			
Percent	28.2 %	71.7 %	100%			

Table 3. Distribution of frequency of subjects according to marital status						
Marital Status Single Married Collect						
Number of subjects	220	145	365			
Percent	60%	40%	100%			

Table 4. Distribution of frequency of subjects according to education	Table 4.	. Distribution	of frequency	of subjects	according to	education
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	Associate	Bachelor	Masters	Collect
Number of subjects	45	240	80	365
Percent	12.3 %	65.7 %	21.9 %	100%

Table 5. The mean and standard deviation of variables							
Variables of the research	Average	Standard deviation	Number				
Mental Health	24.80	17.82	365				
Hardiness	4 9.21	17.88	365				
Commitment	4 9.22	25.59	365				
Control	4 6.62	13.90	365				
Challenge	42.44	28.47	365				
Religious beliefs	47.19	34.12	365				

Table 6. The correlation coefficients of the variables in order to examine the relationship between mental health

			scores			
	Mental Health	Hardiness	<b>Religious beliefs</b>	Commitment	Jalsh	Control
Mental Health	1					
Hardiness	-0.483**	1				
Religious beliefs	-0.516**	0.778 ***	1			
Commitment	-0.469**	0.969 ***	0.781***	1		
Challenge	-0.446**	0.966 ***	0.765***	0.964 ***	1	
Control	-0.086	0.187	0.103	0.141	0.120	1

\*\*\*P <.001; \*\*p <.01; \*p <.05.

<b>Table 7.</b> Result of multiple regression analysis to predict the level of mental health from hardiness and religious
heliefs scores

Row	The correlation coefficient	Square R	Adjusted square R	F	DF	Significant level
1	0.516	266	0.264	131.46	363	000
2	0.531	0.282	0.278	8350	362	004
3	0.539	0.290	0.285	4058	361	0 45

a. Predictors Religious beliefs; b. Predictors: Religious beliefs, Hardiness; c. Predictors: Challenges, hardiness, belief

As seen in Table 7, according to the adjusted coefficient can be said that a total of three variables of religious beliefs, challenge and hardiness can explain 29% of variance of the mental health. Other factors because alone have no explanatory power, were excluded. Based on the above table, religious belief is the most powerful predictor of mental health and then variables of hardiness and challenges are placed at the second and third order, respectively. Commitment and control variables because of the lack of prediction power were not applied in the equation. As the results in Table 8 shows, the mean scores of mental health of unemployed master students 29.89 which indicates that the students in terms of their mental health have worse status than other students.

According to Table 9, the relationship between variables of occupation and education degree alone and students' mental health is not meaningful. But the effect of these two variables totally on students' mental health is meaningful. In other words, scores of mental health of unemployed master students (29.89) than other students, i.e. employed students in three education degree and unemployed students in associate and bachelor degrees is different and this difference is significant, as this significance are shown in Table 9 Therefore we can say that unemployed MASTER students live in a more negative mood than other students.

As the results in Table 10 shows the mean scores of the mental health of girls and boys are 27.42 and 22.00, respectively. According to T Table (2.46), the result obtained is significant at the level 95%, and it can be concluded that the girls are in a worse situation in terms of mental health than boys. As the results in Table 11 shows the mean scores of the mental health of single and the married students were 28.91 and 19.75, respectively. According to T Table (3.93), the result is significant at the level 99% and can be concluded that married students in terms of mental health are in worse condition than unmarried students.

 Table 8. Mean and standard deviation of scores on the mental health according to job status and degree of education

Job Status	Education	Average	Standard deviation	Number
	Associate	23.80	5.11	10
Employed	Bachelor	23:21	8.75	51
Employed	Masters	22.92	8.22	42
-	Total	23:15	8.19	103
	Associate	21.77	12:38	35
Unomployed	Bachelor	23.84	10:41	189
Unemployed	Masters	29.89	6.52	38
-	Total	24.44	10:47	262
	Associate	22:22	11:16	45
Total	Bachelor	23.71	10:06	240
Total	Masters	26.23	8.20	80
-	Total	24.80	9.88	365

## Table 9. Result of Two-way analysis of variance

Resources	The sum of squares	Degrees of freedom	Mean-square	F	Significant level.
Modified Model	1576.220 <sup>a</sup>	5	315.244	3.327	0.006
Interference	103,920.39	1	103920.395	1.097 4 3	0.000
Jobs	152.301	1	152.301	1.607	0.206
Education	522.130	2	261.065	2.755	0.065
Education * Jobs	691.140	2	345.570	3.647	0.027
Error	34017.314	359	94.756		
Total	247,276.00	365			

Table 10. Significant differences between average of male and female students' mental health

Sex	Average	Standard deviation	Number of	t	Significant level.
Girl	27.42	11.06	280	2.46	0.015
Son	22.00	9.67	85		0.015

Table 11. Significant differences between average of mental health of the married and single students					
Marital Status	Average	Standard deviation	Number	t	Significant level.
Married	28.91	10.15	145	3.93	0.000
Single	19.75	9.15	220		

# 4. DISCUSSION AND CONCLUSION

The results of the study show that there are significant correlations between religion beliefs and mental health. These findings are consistent with results of studies of Williams [13]; Noorbala et al. [20]; Zahrakar [21]; Bahrami Chegini [22]; Hamid et al. [23]; Aghaei Chavoshi [24]; Maton [25]; Spilka [26]; Pargament [27] and Kealy et al. [28]. In explaining these findings, we can say:

Religious beliefs can with providing the foundation for a meaningful life affect living progress in different dimensions. Religion and spirituality, it also provides a reassuring sense that life is coherent, orderly and purposeful. Basically, faith has great impact on the human mind. Because it increases confidence and power of the human brings peace of mind inside of it. William James believes in faith in God there is the extraordinary power that gives a kind of spiritual power to man and help him to endure the hardships of life. Having meaning and purpose in life, including resources that religious people with enjoying them can be more successful in dealing with life situations. Religious beliefs enhance human resistance against the problems and difficult life events and enhance his resistance in the face of difficulties .Religious beliefs, not only are effective in giving dare, increase confidence and risk-taking of individuals but as the engine of growth in individuals, puts man in the path of progress and thus will provide fertile ground for prepare healthy and mental health.

There is a significant relationship between mental health and hardiness. These findings are consistent with results of studies of Azad Yekta [1], Abradoyek [29], Jomhori [17] and Engels [30]. In explaining these findings, we can say that hardiness people are more optimism, so this hardiness people's optimism, can make the overwhelming events seem controllable and not very important. Moreover, cause to a good moon and its impact on the immune system and help to maintain wellness. Optimism causes hardiness people become more resistance against an unexpected traumatic events. As came in the literature as progressive hardiness people are purposeful and achievement oriented and are consider difficult and life changes as a natural part of life. They choose attitude of problem solving toward life and use effectively of social systems. They generally do not rely only on self-blame, wishful thinking, or avoidance as a strategy to deal with problems .It is natural that people with this characteristic, have higher mental health.

There is a significant correlation between mental health and challenges. Healthy people see the life changes as the challenges and opportunities for growth and development and no a restriction or threatened. Hardiness individuals considered difficult and critical circumstances as the particular or interesting situation and not only don't despair but also consider getting involved with them as a way to gain more knowledge in dealing with stress events. Seeking for challenge or to understand changes being natural, contrary to sense danger or insecurity, those with a high challenge consider the change as fixed rule of life. Hardiness individual believe that the changes and positive and negative events are an opportunity for learning and growth. They welcome new experiences and without fear they are trying to deal with the unknowns. The challenge in terms of cognitive reduces the events pressure until gives them the ability of provocation, so that threaten especially the changes is considered as requires reorienting of individual. There is a significant correlation between mental health and commitment.

Committed individuals have a purpose to their live, this prepares them to deal with unexpected events and stressful events. But they as well predominate the risks of these events. In other words, these people progress with their strategies, and meanwhile are calculator. Another explanation is that the internal resources to do bold things, namely, trust, confidence, courage, optimism and creativity are the same features that is used as the coping skills to deal effectively with stress .Person committed after the decision of life and finding its reason, determines how to live .He wants to overcome difficulties easily, to live well and prosper, therefore has optimistic attitude about life and his own person, and expects the events of life progress in direction of the benefit. He expects success because trust in its strength. Naturally, the combination of these factors underlies commitment.

Adverse results also showed that:

• Rates of unmarried students' mental health are higher than married students. In explaining these findings can point out to problems such as homework assignments conflict with marital duties, lack of financial deference of couples ,Lack of sophistication and maturity of personality, emotional and away from logic marriage, and it is clear that such marriages due to the stresses threaten mental health of the people.

• The mental health of boys is high than girls.

There is no significant difference between employed and unemployed students regardless of their educational levels, but when the education degrees were considered as a variable. This difference was significance, so that there were significant differences between the scores of mental health of employed and unemployed students in the associate and bachelor grades but there were significant differences between employed and unemployed master students. To explain this finding can be for three reasons offered: the first, associate and un-graduated students are in younger age and their economic dependency on parents dose not threaten self-esteem. Second, entering into postgraduate education raises individual's exception of oneself and others and one of these expectations is having job. Good to know that today a part of an individual's social identity is linked to professional status and the person without jobs experiences a gap. Third, for many people, today, getting into university in associate and bachelor degree not only for seeking job but also is done due to promotion of education and culture and don't stay ahead of the convoy, while usually studies in graduate is done in order to achieve the job. And when the goal is not achieved, the individual's mental health is at risk.

# Limitations of the study:

One limitation of this study was geographical limitation of this research. Population of the research is students of Islamic Azad University of Islamshahr branch. Thus, its generalization to other places should be performed with caution. Self-report nature of the survey instruments and the lack of estimation of accuracy of information taken from the students, was another limitation of this study.

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