

The Relationship between Religious Orientation, Self-Actualization, Anxiety and Sleep, Couples Ilam

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ABSTRACT

we aimed to determine the relationship between religious orientation, self-actualization, anxiety and sleeping couples. Methods of multivariate correlation, that 100 people (50 couples), using a random sample of all couples living in Ilam were selected in 2014. The instrument subscales religious orientation, marital satisfaction questionnaire, self-actualization subscale of Emotional Intelligence Test - which, anxiety and sleep subscales of the General Health Questionnaire GHQ-28, Goldberg and Hiller Was. Data, test, t-independent, multiple regression, and correlation analysis, and the calculated data were analyzed using software 16spss, findings, between religious orientation, self-actualization, anxiety and sleep, there was a significant correlation. The difference between men and women (couples), self-actualization, anxiety and sleep variables were significant, but the religious orientation, no significant differences were found. . Given the correlation between religious orientation, and self-actualization, anxiety, and sleep, are likely to grow and strengthen the foundations of faith, religion can be, self-actualization and mental health in society, affect.

KEYWORDS: religious orientation, self-actualization, anxiety, sleep, Couples

1. INTRODUCTION

Psychological characteristics of human, natural and instinctive desire, the knowledge of truth and reality. This innate curiosity or God save, first, that human beings are all matters for consideration, since we are a society: religious issues, and Drs understanding of religion (1) religious Islamic society and our government, the Islamic state religious and rate of religiousness, and its relation to various aspects of life, is important. sociologists like Durkheim, religion is a social need that, despite the changes that may occur in the community, always There will be (2), according to Jung, the Latin root of the word religion, it becomes clear, it means the following: think of the conscience, or the perfection of attention about what Rudolf Otto, a sacred object and light is known. (3) According to Freud, the origin of religion, man's inability to cope with the forces of nature, outside, and the inside is instinctive. For him, religion is the basic stages of human evolution, arose when, still not enough human wisdom, and be able to use their wisdom, did not deal with the internal and external forces (4), but Young, a phenomenological interpretation, which offers a definition, many philosophers and theologians, with the stories that are the essence of religious experience, submission and obedience to the forces that, to the best of our There are (3) Pargament, and numerous important psychological role of religion, which is to help people understand and cope with life events apply, described religion can be, in a sense of hope, feeling close to others, emotional tranquility, opportunity for self-actualization, a sense of comfort, control impulses, closeness with God and help solve problems effectively. (5). their glory, the desire to get better and better, than a person who is What, and it being an odd thing, in theory, "it is the capacity, expressed needs, Maslow, essentially equal, that aims to study and creativity, by educators and psychologists supported. (6) Self-actualization Although the ability to make and actions, which requires force, causing the man to be the destination. Self-actualization, in other respects as well, if not accompanied with plenty of momentum, it may not actualized. Religion can be a high power output. Divine Love, enjoyment of power is the driving force, can be a productive force for self-actualization. If you love God, is blowing in person, despite his obvious ability, since they are part of one's abilities, only to be released in the shadow of love. (7) self-actualization needs other tools, such as self-knowledge, patience and persistence in a course of action that each good is produced in the shadow of

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religion. (8) Research conducted in the past few decades, the distinction between faith, healthy living makes available to mankind and other religions, the role and status of the it, in the field of mental health, as well as its efficacy in the prevention and treatment of many psychiatric patients have shown. Studies show a positive correlation between religiosity and mental health have been, for example, Bergyn, Mesters, Richards, 1988; Brown, Nedobios, Gerry 1990; Williams Larsen, and Boker 1991; Paulson, Epler, Strwait, Vonsh and Bass, 1998; Sohrabi and Samani, 2001 (9,10,11,12 and 13). In recent years, several research works, about the influence of religion on mental health, which has taken place in most of Allport's Religious Orientation Scale is used. Results indicate that intrinsic religious orientation, is positively correlated with the following: secure attachment, (14) coping style circuit (15) hardiness and happiness, (16) positive religious coping style, (17) hardiness (18) improvement of mental health (19) mental health (20). contrast, extrinsic religious orientation, is positively correlated with the following: stress, (21) Anxiety and the anxiety of death (22) Death Obsession (23) depression, (24), emotional instability, (25) oriented coping styles (26) seems to intrinsic religious orientation, religion and especially for people who play the role of a shield, a wide range of positive effects on the psychological causes. (27). Also in this study, Arian et al (2008), the research showed that, between God and the feeling of mental peace, there is a significant positive relationship (28). In an additional study, desserts and S. & Miller, random sample of 615 young women showed that those who have a stronger religious beliefs than coping with stress, personal, academic, etc, the more force have, and are less prone to disease, and in fact, have better mental health (29), Research in Iran, a positive and significant relationship between religiosity and mental health has proven. (30) The significant negative relationship between religious orientation, and depression and anxiety among students, has been proved. (31, 32) The results of Bayani and associates (2008), indicate that, between religious orientation, students with anxiety and depression, there is an inverse relationship. (33). No doubt, religion, man against an influx of anxiety, doubt and despair, strong and prepare. The value of every religion, the growth of knowledge, insight, and knowledge depends on, and until a fundamental understanding of religion has been formed, it can not play a decisive role in the lives of individuals is growing, and the wisdom and reasoning and intuition that values determine how religious emotions, and grew to its meaning, and makes deep. Consequently, the practice of religion as a value system, human motion direction, purpose, and the promotion of mental health and human development leads. According to Allport, religion as a value system, human life is cause to unite. In his opinion, the highest value system that allows the integration of human unity, religious value system. This value system, on all aspects of life, highlighted, and include everything that, ultimately, the necessary background for a character, and (Healthy Living serves (34)., One of the goals of Islamic studies in psychology can be achieved in the psychology of Islamic patterns, according to them, could be the cause for the persistence and prevention of mental disorders, clarified, and the usefulness of guidelines and standards, in order to prevent and treat mental, and social well-being of individuals, respectively (35).

MATERIALS AND METHODS

Research Objectives

The main aims:

- The main objective of this research was to investigate the relationship between religious orientation, self-actualization, anxiety and sleep, couples are Ilam province in 2014.

Secondary objectives:

- Determine the relationship between religious orientation, anxiety and sleep among couples Elam in 2014
- Determine the relationship between self-actualization, anxiety and sleep, couples Elam, in the year 2014
- Determine the relationship between religious orientation, self-actualization, the couple Elam, in the year 2014
- Determination of religious orientation among Couples (woman and get all of) Elam, in the year 2014
- Determine your level of prosperity, among couples (woman and get all of) Elam, in the year 2014
- Determine the level of anxiety and sleep among couples (woman and get all of) Elam, in the year 2014

The research hypotheses

- between religious orientation, self-actualization, anxiety and sleep, couples Elam, a significant relationship exists.
- between religious orientation and anxiety and sleep, couples Elam, a significant relationship exists.
- the self-actualization, anxiety and sleep, couples Elam, a significant relationship exists.
- between religious orientation, and self-actualization couple of Elam, a significant relationship exists.
- degree of religious orientation among couples (husband and wife) Elam is different.
- The amount of self-actualization, the couple (men and women get all of) Elam is different.
- Anxiety and Sleep, among Couples (woman and get all of) Elam is different.

Methods

In this study, the purpose of descriptive and correlative population in this study, couples Ilam province is 100 persons, ie 50 couples (50 men and 50 women), for example, randomly selected were to analyze the data of this study, descriptive statistics (mean, standard deviation, frequency), and for testing hypotheses, methods of inferential statistical t-test and multiple regression, correlation, and also to calculate the data 16 spss software is used.

Research Tools

Health Questionnaire GHQ-28: One of our tools, the questionnaire is the GHQ-28, Goldberg and Hiller. The questionnaire was designed to identify mental disorders, non-psychotic, was developed, extensively from it, to detect minor psychiatric disorders, and screening of non-psychotic psychiatric disorders, medical centers, and other communities are used in different situations. Subjects responded to each question, a range is characterized by four degrees. Form 28-point, using factor analysis, the long form was prepared. 4 is a scale, each scale contains 7 questions. Measures include somatic symptoms, anxiety and insomnia, social dysfunction, severe depression. In this case, the sub-8 scale, anxiety, and sleep disorders are considered.

Subscales of self-actualization, the emotional intelligence quotient Bar - This test has 90 questions, and 15 scale is a scale self-actualization (the ability to understand the potential of their activities tailored to their capabilities, trying to do the activity and enjoy it) is. 6 questions out of 90 questions to test who devoted at least six score and maximum 30 score, intended, and the median is 18, the case by the Times - on 3831 patients from 6 countries (Argentina, Germany, India, Nigeria and South Africa), the 48/8 percent male, and 51/2% of whom were women, were executed, and systematic in North America, was standardization. Normalization of the results showed that the test is reliable and valid. Responses to the test on a 5-point Likert scale (strongly agree, agree, somewhat disagree, and completely disagree), is set.

According to literature results, the coefficient of reliability for the tests, the research aimed to 0/7 or more, and for clinical trials aimed at 0/9, to approve and appropriate diagnosis. In the test, alpha, 0/93 was calculated. Thus, for different purposes, applicable, and is approved. On the other hand, reliability is the extent appropriate, other methods of measuring reliability, 0/80, reported in this study, the reliability of the method, the couple - a 88/0 was announced.

Measure of marital satisfaction in this study to measure religious orientation, and marital satisfaction measure was used, the questionnaire has 47 questions. Validity of this questionnaire, using Cronbach's alpha coefficient, 0/92 Reported. (36) as well as internal consistency of the research questions using Cronbach's alpha 0/89 = A, for women, and 0/84 = A is obtained for men. (37)

RESULTS

Table 1. descriptive indicators such religious orientation, self-actualization and anxiety, and sleep according to gender

Group Statistics Table 1: frequency, mean, standard deviation					
Std. Error Mean	Std. Deviation	Mean	N	Sex	
.55634	3.93394	20.4400	50	Man	Religious Orientation
.47463	3.35614	20.0400	50	Woman	
.47112	3.33130	24.6200	50	Man	Self-actualization
.46484	3.28689	22.1800	50	Woman	
.47035	3.32584	4.6000	50	Man	Anxiety and Sleep
.65012	4.59707	6.6400	50	Woman	

Explanatory variable indices of religious orientation, self-actualization, anxiety and sleep, according to the gender variable, as shown in Table 1.

Correlations Table 2. Correlation of variables				
Self-actualization	Religious Orientation	Anxiety and Sleep		
-.590**	-.576**	1	Pearson Correlation	Anxiety and Sleep
.000	.000		Sig. (2-tailed)	
100	100	100	N	
.589**	1	-.576**	Pearson Correlation	Religious Orientation
.000		.000	Sig. (2-tailed)	
100	100	100	N	
1	.589**	-.590**	Pearson Correlation	Self-actualization
	.000	.000	Sig. (2-tailed)	
100	100	100	N	
	** Correlation is significant at the 0.01 level (2-tailed).			

The results of Table 2) show that:

1) Between religious orientation and anxiety, sleep -0/57 correlation coefficient obtained in the 0/01 is meaningful. Increasing religious orientation, anxiety and sleep decreases. So reject the null hypothesis, the researchers hypothesized that the relationship between emotional intelligence and conflict resolution at 0/01, may be approved. 2) as well as between self-anxiety and sleep, correlation coefficient -0/59 Was achieved in 0/01 is meaningful, ie the increase in individual self-actualization, anxiety and sleep score decreases. so, null hypothesis is rejected and the researcher, based on the relationship between self-actualization and anxiety, sleep, and 0/01 are confirmed.

3) as well as between religious orientation, self-actualization, a correlation coefficient of 0/58 Was achieved in 0/01 is meaningful, ie increasing religious orientation, self actualization increases. so, reject the null hypothesis, the researchers hypothesized that the relationship between emotional intelligence and religious orientation, the level of 0/01 is confirmed.

Table 3. Independent Samples Test different variables, by gender										
t-test for Equality of Means							Levene's Test for Equality of Variances			
95% Confidence Interval of the Difference	Std. Error Difference	Mean Difference	Sig. (2-tailed)	df	t	Sig.	F			
Upper	Lower									
1.85123	-1.05123	.73129	.40000	.586	98	.547	.052	3.864	Equal variances assumed	Religious Orientation
1.85168	-1.05168	.73129	.40000	.586	95.627	.547			Equal variances not assumed	
3.75339	1.12661	.66183	2.44000	.000	98	3.687	.626	.239	Equal variances assumed	Self-actualization
3.75339	1.12661	.66183	2.44000	.000	97.982	3.687			Equal variances not assumed	
-.44761	-3.63239	.80242	-2.04000	.013	98	-2.542	.034	4.636	Equal variances assumed	Anxiety and Sleep
-.44566	-3.63434	.80242	-2.04000	.013	89.264	-2.542			Equal variances not assumed	

The results of Table 3) show that:

1) To study the orientation and gender differences, independent t-test method was used. In this hypothesis, the value of t (0/54), degrees of freedom (98), and a significant level of sig (0/58), between religious orientation and gender, no significant differences in the level of 0/05 was not observed, and the null hypothesis and accept the research hypothesis is rejected.

2) Also, in order to compare the self-actualization and gender, according to Table 3 it can be seen that, in this hypothesis with respect to the t (3/68), degrees of freedom (98) and the significant level of sig (0/00) , null hypothesis is rejected and the researcher's self-actualization differences according to gender, level 0/05 be approved. And comes to the conclusion that the self variable, the bisexual (male and female), there are significant differences.

3) and the assumption that differences in anxiety, sleep, and sex-t method, were examined, the results showed that, according to the t (-2/54), degrees of freedom (98), and the significant sig (0/01), reject the null hypothesis, the researcher assumes that there is a difference between the two sexes (male and female), the 0/05 was approved.

Table 4. Model Summary				
Std. Error of the Estimate	Adjusted R Square	R Square	R	Model
3.14799	.417	.428	.654 ^a	1
a. Predictors: (Constant), self-actualization, religious orientation				

Table 4) with respect to the coefficient of determination, R Square (.353) 42/0 of the variance associated with anxiety, and sleep by religious orientation and self-actualization, is explained.

Table 5. ANOVAb					
Sig.	F	Mean Square	df	Sum of Squares	Model
.000 ^a	36.343	360.152	2	720.303	Regression
		9.910	97	961.257	Residual
			99	1681.560	Total
a. Predictors: (Constant), self-actualization, religious orientation					
b. Dependent Variable: Anxiety and Sleep					

According to Table 5), the level of significance obtained in Table sig (0/00), less than 0/05, therefore, the null hypothesis that, the linear relationship between religious orientation, and self-actualization with anxiety and sleep there, be rejected. Researcher assumed, based on the relationship between religious orientation, and self-actualization with anxiety, and sleep at 0/95 may be approved

Coefficients ^a Table 6					
Sig.	t	Standardized Coefficients	Unstandardized Coefficients		Model
		Beta	Std. Error	B	
.000	10.868		2.224	24.174	(Constant)
.000	-3.689	-.350	.107	-.396	Religious Orientation
.000	-4.038	-.384	.111	-.450	Self-actualization
a. Dependent Variable: Anxiety and Sleep					

Table 6), due to the significant level of sig (0/00), obtained less than 0/05, the null hypothesis (zero regression coefficients is rejected), and the coefficients of columns Beta, 35% of the variable in anxiety and sleep, by religious orientation, and 38% of the variable, anxiety, sleep, self-actualization is explained., and Similarly, the effect of each variable can be judged.

RESULTS AND DISCUSSION

In the first hypothesis, the results showed that, between religious orientation and self-actualization, anxiety and sleep, there was a significant relationship between the couple, the first hypothesis was confirmed. These results, the findings Bergyn, Masters, Richards, 1988, Mansoornejad and colleagues (2011), Newman and Pargament (1990), is consistent. The second hypothesis, based on the results of the multivariate relationship between religious orientation, anxiety and sleep -0/57 correlation coefficient obtained at 0/01 is significant. Therefore, the second hypothesis is confirmed. And 35% of the variance in anxiety and sleep, with varying religious orientations explained that the results of the investigation, Brown, Nedobiows and Gerry, 1990; Bayani et al, 2008; Bahrami and Tashk, 2004; corresponding. The results of expression and associates (2008), indicate that, between religious orientation, students with anxiety and depression, there is an inverse relationship. In the third hypothesis, based on the results of the multivariate correlation between self-actualization and anxiety and sleep well -0/59 correlation coefficient obtained in the 0/01 is meaningful. Therefore third hypothesis is confirmed., And 38% of the variance in anxiety and sleep variables self, can be explained. these results, the research Asgari et al, 2007, showed that between self-actualization and mental health, a significant correlation between the level of 0/01 there is a corresponding (38). The fourth hypothesis, based on the results of the multivariate correlation between religious orientation and self-actualization, a correlation coefficient of 58/0, which results in a 0/01 is significant. Thus, the fourth hypothesis is confirmed. These results, the research Pargament and Newman (1990), is consistent. Fifth hypothesis, in order to examine differences in religious orientation, between men and women, the results of table t, according to the t (0/54), degrees of freedom (98), and a significant level of sig (0/58), religious orientation, and gender, no significant differences in the level of 0/05 was not observed, and accept the null hypothesis and a research hypothesis is rejected the results of Arefi and Mohsenzadeh (2009), is consistent. The sixth hypothesis, in order to self-actualization and gender differences, the results of table t, according to the t (3/68), degrees of freedom (98) and the significant level of sig (0/00), the null hypothesis is rejected and researcher's hypothesis, based on the difference between self-actualization, according to gender, level 0/05 be approved., and comes to the conclusion that the self variable, the bisexual (male and female), there are significant differences. The seventh hypothesis, to investigate differences in anxiety, sleep and sex, the results of table t, according to the t (-2/54), degrees of freedom (98) and the significant level of sig (0/01), assuming Zero rejection, and

researchers assume that there is a difference between the two sexes (male and female), the 0/05 was approved. whose research McGee and Williams, 1990; (40) were aligned.

Results

Finally to summarize, according to the study, between religious orientation and self-actualization, anxiety and sleep married, there was a significant relationship, as well as in investigating self-actualization, anxiety and sleep bisexual (male and female) There is a significant difference, but the study, the difference between men and women religious orientation, no significant differences were observed. Based on the results of this study and to determine the relationship between religious orientation, self-actualization, anxiety and sleep with authorities planning and providing appropriate training, to strengthen the foundations of belief and religion, and its positive impact on the mental health and prevent mental illness is recommended. Moreover, this study can be a basis for doing Studied the efficacy of the intervention, thereby enhancing their mental health and prosperity are to be assessed.

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