

The relationship between spiritual health and life expectancy with neurosis high school students in the city of Jiroft

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ABSTRACT

Objective: The aim of the present study was investigation of relationship between spiritual health and life expectancy with neurosis high school students in the city of Jiroft. **Methodology:** Participants were 282 students from 13 high school students in the city of Jiroft were selected. To measure the variables, the questionnaire spiritual health and life expectancy Schneider and Neo neurosis were used. Correlation and regression to analyse the data was used. **Results:** Results showed that there is a significant negative relationship between religious health and neurosis ($r = -0.22$, $P < 0.001$) and so there is a significant negative relationship between life expectancy and trends neurosis ($r = -0.42$, $P < 0.001$). **Conclusion:** So it can be concluded that religious health and life expectancy can predict neurosis in students.

1. Introduction

Today, experts believe that one of the important reasons for the development of advanced countries, attention to the training of creative and effective forces. Human resources are the main builders of tomorrow's students, and academic achievement of the objectives of the training programs is essential. Due to the success of students in the school can reach a position where the maximum internal and external resources to achieve the goals of higher education and acquire the conditions necessary for successful social life. To achieve this goal, in addition to academic success, and mental and physical health is also very important person. There are neurotic tendencies in children may be the way of their success. Neuroticism is a personality trait that people who are often worried, anxious and depressed, and their mood swings, is likely to have trouble sleeping and many suffer from psychosomatic disorders. These people are very excited to environmental stimuli, show a strong reaction (Abdullah Zadeh, 2007). Neurotic people tend to experience anxiety, stress, inhibition, aggression, shyness, irrational thinking, depression and low self-esteem Mueller et al. (2001), the degree of their mental health at risk. Over the past decade, based on specific aspects such as physical health, psychological and social approach. Proposed the inclusion of spiritual health and the health of the Russell Osman, an important aspect of individual life and group placed in front of the experts involved in health (Osman & Russell, 1979). Spiritual health, human health is an important aspect. In general, mental health and a harmonious relationship between internal forces provides fabrics, and feature-life stability, peace and harmony, a sense of close relationship with self, God, society and the environment will be determined (Osman & Russell, 1979). Spiritual health, integrity and determine the integrity of the individual.

Spiritual health, force, one that physical, psychological and social harmony and for coping with the disease. When spiritual health is seriously compromised, a person may suffer from mental disorders such as loneliness, depression and loss of meaning in life. If you know the whys of life, can be caused by any what and how they may live. Grazing life, his existence is part of the purpose of life is business, and this section constitutes the spiritual

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dimension of life. Therefore, it is suggested that the strengthening of spirituality as an important factor in promoting health is effective and spiritual health risk to human health because of mental disorders such as loneliness and emptiness Tremblay Vader (2006), Strengthening spiritual health, adaptation increases. Spirituality attitude to improve the world around them, and to reduce negative emotions, stress and create a sense of independence and the powers that be. On the other hand, there is a positive relationship between faith and mood states (Mueller et al., 2001). Having hope plays an important role in people's lives and mental health is mental side. Faith and hope in mental health plays an important role, thereby giving meaning to life and to the problems, hardships of life, preventing the human nervous breakdown. In fact, the main source of hope, joy and human comfort. Of course, this is attributed to other things. For example, sometimes the person who gives the blessing to him, And hope to him, sometimes is a blessing to enjoy the attention and hopes, and sometimes used when and where the blessed hope closes. But the main source of the creation of this state in the human soul, the pleasure and the interest will be provided to man, the cause of your inner man (Snyder, 2000). Lopez et al. (2004), argue that the power of hope as a motivational force in modern times been controversial in the past century, medical experts and psychologists have studied. According to Snyder (2000), hoping for a positive motivational state that is based on the sense of personnel and qualification of individual interaction with the environment. In fact, hope is the capacity to imagine the ability to create routes to the desired objectives and perceived incentive to move in that direction. Leo Tolstoy believes that the hope for mankind is like a bird's wing (Lopez et al., 2004). Spiritual health and hope to people, especially people effective and constructive, requires dynamism, development and growth of the community. Prominent and unique role of students as managers and creators of the future of any society, the need for mental health care as well as the identification and elimination of negative factors affecting their mental health is essential. The aim of this study was to investigate the relationship between spiritual health and life expectancy with neurotic tendencies in Jiroft city's second high school students.

2. Materials and methods

This research is descriptive and correlation study. The population included all male's students of high school in the 94-93 year. their number, according to the education department of Jiroft 1052 people. The multi-stage random sampling of 13 high school students were selected . The sample size was determined using 282 Morgan.

2.1. Measuring Instruments

(A) neurosis questionnaire: the questionnaire to measure personality traits of NEO-PI-R that McCrae & Costa Jr (2004), with 60 questions, five subscales of neuroticism (12 questions), extraversion (12 questions), openness to experience (12 questions), agreeableness (12 questions) and responsibilities of (12 questions) was used. Questions are five options from strongly disagree (1) Disagree (2), no opinion (3), agree (4), and strongly agree (5). And question No. 3, 8, 9, 12, 14, 15, 16, 18, 23, 24, 27, 28, 29, 30, 31, 33, 38, 39, 42, 43, 44, 45, 46, 48, 54, 55, 57, 59 for investment grade ratings are. Questions 56, 51, 46, 41, 36, 31, 26, 21, 16, 11, 6, 1, are related to neuroticism scores range between the 60's. Inventory (NEO - FFI) in Iran (Gross, 1377) Validity using test - retest about 208 students within 3 months, respectively, 0.83, 0.75, 0.80, 0.79, and 0.89 for the factors N, E, O , A, C is obtained. The validity of the correlation between the NEO's report (S) and the assessment of the observer (R) was used to the maximum correlation to the degree of extroversion and at least 0.45 to 0.66 in a pleasant (McCrae & Costa Jr, 2004).

(B) spiritual health questionnaire: the questionnaire Ellison spiritual health, twenty questions that the ten questions that religious health and 10 other questions check the health of the individual. The spiritual health of the two subgroups is ranging between 0 and 120. The answers to these questions are Likert scale from strongly disagree to strongly agree 6 option were classified. To "strongly agree" scored 6 and the "strongly disagree" was given a score of 1. Negative questions was scored on the reverse. Spiritual health questionnaire translated into Persian by content validity was determined. The reliability of the questionnaire through alpha reliability coefficient of $r = 0.82$, respectively.

(C) Life expectancy Schneider questionnaire: the questionnaire by Snyder et al. (1991) was made to measure hope, is 12 and runs a self-assessment. These statements, statements of agency thinking 4, 4 statements of strategic thinking, 4 the diversion. So, the questionnaire covers the following scale: factor and strategy. Many studies of reliability and validity of the questionnaire as a measure of hope support. The internal consistency of the test 0.74 to 0.84, and test-retest reliability 0.80 and in the course of more than 8 to 10 weeks, these rates are higher (Snyder and Lopez, 2007). The internal consistency of the scale factor of 0.71 to 0.76 and the strategic scale 0.63 to 0.80. In addition, much data about hope and concurrent validity of the questionnaire items that you can predict there. For example, the questionnaire survey, optimism, self-esteem and solidarity will achieve 0.50 to 0.60 is. The survey of correlation with the Beck Hopelessness Scale 0.51 and the Beck Depression Inventory to 0.42, which indicates the validity of the questionnaire (Kermani, 2011).

2.2. The method of data analysis:

To analyze the data of this study using SPSS version 18 statistical tests and regression correlation matrix was used.

3. Results and Discussion

Table 1. Mean and standard deviation of variables neurosis, health existential and religious (spiritual health) and life expectancy

variable	Mean	Standard Deviation
neurosis	26.56	9.15
religious health	47.52	9.82
existential health	41.94	9.97
life expectancy	100.06	23.76

(N= 282)

Table 2. Results of correlation matrix between spiritual health and life expectancy with neurosis

variable	neurosis	religious health	existential health	life expectancy
neurosis	1			
religious health	-0.22**	1		
existential health	-0.19**	0.65**	1	
life expectancy	-0.42**	0.08	0.06	1

(N= 282) (P<0.001)

As can be seen in Table 2, that the religious health neurosis ($r = -0.22$) significant negative relationship at 99/0 percent confidence level there. Although the health dimension of neuroticism ($r = -0.19$) significant negative relationship at 0.99 percent confidence level there. The life expectancy of neuroses ($r = -0.42$) significant negative relationship at 0.99 percent confidence level there.

Table 3. Results of stepwise regression spiritual health and life expectancy with neurosis

	Variable Predictor	Variable criteria	F	df	P	R	R ²	B	t
The first step	life expectancy		61	1,	0.	0	0	-	-
		neurosis	.11	280	001	.42	.18	0.42**	7.81**
The second step	life expectancy and religious health		38	2,	0.	0	0	-	-
			.55	279	001	.46	.21	0.40**	7.61**
								-	-
								0.19**	3.64**

The results of stepwise regression to predict the life expectancy neurosis show that 18 percent of variance explained gives mental-affliction. Thus, life expectancy (Beta= -0.42, $P < 0.001$) and a significant negative correlation with neuroticism and neurosis is predicted. As well as religious health and life expectancy is explain 21% of the variance of scores of neurosis. Therefore, religious health (Beta= -0.19, $P < 0.001$) has a significant negative relationship with Neuroticism and negative predictors are neuroticism.

4. Conclusion

The findings show that between spiritual health and life expectancy, there is a significant relationship with neuroticism and religious life expectancy and health are negative predictor neurosis. The explain negative relationship between spiritual health and neurosis can be said that in recent years more attention to religion and spirituality psychologists for mental health and mental illness have received treatment. They believe in the extraordinary power of faith in God that gives man a spiritual power and the hardships of everyday life will help him and the anxiety and depression that characterizes neurotic character, and many people around us are prone to make. Faith without doubt the most effective treatment for anxiety. Lack of faith is a risk that the failure of man warns against the hardships of life. As the rolling ocean, waves can disturb the peace of the depth of it and disturb its security level changes and the temporary life of inner peace man who deeply believes in the same God does not occur.

The tendency of religious and spiritual life is not. They were due to mental illness caught the essence of religion and spiritual beliefs and were not, therefore, a return to the religious and spiritual views fully treated (Jomepoor, 2002). Ages are now experiencing a crisis that world, the West essentially returned to their spiritual poverty. Scholars West only way to treat the poverty and moral disintegration know the return to religion and spirituality. In reviewing the literature on this subject, we found that religion is a factor in all areas of protection against mental disturbances. This protective effect is not limited to a particular religion, which can be attributed to spirituality and spirituality. In explaining the negative correlation with neuroticism can be said that the life expectancy of people with high neuroticism, negative attitudes show themselves (Clark & Watson, 1991). They emphasized Events more negative life (Tversky & Griffin, 1991). People with low expectation willingness to persist in thinking they are inefficient, they are close to targets with negative emotional states, and instead concentrated on defeating success (Snyder, 1995). As a result, anxiety and negative emotions and the onset neurotic tend to experience more anxiety, stress, inhibition, aggression, shyness, irrational thinking, depression and low self-esteem. So hope with neurotic tendencies inversely. It seems that religious beliefs can reduce anxiety and neuroticism traits in people because these people hope for a divine power and follow the rules and your religion, your reality of anxiety in that component Main person is neurotic, to hold off.

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