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**RELATIONSHIP BETWEEN PSYCHOLOGICAL WELL-BEING, SPIRITUALITY
AND QUALITY OF LIFE**

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ABSTRACT

The relationship between spirituality and various dimensions of health and quality of life has been extensively examined during the past decade.

The present study has been conducted to explore the data and discuss the relationship between the variables, therefore, the research method is survey and correlational. **sample:** The sample consisted of 341 teachers working in primary, middle and high school that 182 female and 159 male teachers were selected.

Based on the findings of this study, there is a significant positive relationship between spiritual, psychological well-being and quality of life in teachers.

Keywords: Psychological Well-Being, Spirituality and Quality of Life

INTRODUCTION

Nearly 25 years ago a model of psychological well-being was put forth by Ryff[1] to address omissions in formulations of positive human functioning that prevailed in the 1980s. Implications of the formulation for psychotherapy and

psychosomatics were subsequently considered[2].

The above conceptualizations and operational definitions of spirituality and quality of life are integrated into the theoretical framework depicted in Figure 1. Within this theoretical framework quality of

life is conceptualized as a person's perception of his/her quality of life however it is defined by the individual. Operational definitions that approximate this conceptualization are the subjective instruments measuring life satisfaction, perceived quality of life and subjective well-being. A less direct approach to measuring quality of life includes operationalizations pertaining to different dimensions of life. Although each dimension in isolation may not consistently predict quality of life, it is hypothesized that these dimensions taken as a whole affect quality of life. The hypothesized relationship between spirituality and quality of life underlying this meta-analysis is thus operationalized by examining the correlations between diverse operational definitions of spirituality and measures of perceived quality of life or combined measures of multiple dimensions of life [3].

Spiritual Well-being have a significantly association with quality of life. Logistic regression test showed that with 10 points to Spiritual Well-being, the odds ratio (OR) Good quality of life was 1/781. Conclusion: High level of Spiritual Well-being in under research nurses was associated with good quality of life [4].

along with prayer to God, spirituality also encompassed meaning, purpose, and connections with others [5] spirituality as the process of meaning-making, and that it is distinct from religiosity [6]. The increase in the spiritual well being of thalassemia patients is associated with a better quality of life and mental health. It is recommended that the spiritual dimension along with physical, mental, and social dimensions [7].

The relationship between spirituality and various dimensions of health and quality of life has been extensively examined during the past decade. Though several literature reviews have been conducted in an attempt to synthesize research findings pertaining to the relationship between spirituality and health, a meta-analysis of studies examining spirituality in relation to quality of life has not been identified [8].

enhancing the psychosocial and spiritual well being of cancer patients can reduce their death anxiety and promote better quality of life. Palliative care and Cognitive Behaviour therapy can play a very important role in this regard. [9] Changings in the educational system and paying attention to mental health and spiritual health to meet the needs of students may be necessary. There is a need for further applied research for testing

interventions to promote mental health and spiritual health students.[10]

Spiritual well-being has been found to act as a buffer against hopelessness, suicidal ideation, and the desire for a hastened death [11]. It is related to quality of life among patients with cancer and blood-related disorders [12] and is associated with requiring less medical care for physical symptoms [13].

investigated the relationships between spiritual well-being, psychological adjustment styles, and quality of life, and reported positive correlations between spiritual well-being and quality of life and between quality of life and the psychological adjustment style of a fighting spirit. These researchers also found significant correlations between spiritual well-being and fighting spirit, negative correlations between quality of life and the use of a helpless/hopeless adjustment style, and a positive correlation between quality of life and fatalism. However, surprisingly, results demonstrated that spiritual well-being contributed very little to quality of life among breast-cancer patients after accounting for other variables such as psychological adjustment and demographic variables. [14]

RESEARCH METHOD

The present study has been conducted to explore the data and discuss the relationship between the variables, therefore, the research method is survey and correlational.

Population:

The total population is all teachers working in primary, middle and high schools in Mazandaran province during 1392-1393, including 3811 people, 2046 female and 1775 male teachers working in three counties in west of Mazandaran.

The sample:

The sample consisted of 341 teachers working in primary, middle and high school that 182 female and 159 male teachers were selected.

Sampling method:

The Samples due to the total population which is all teachers working in primary, middle and high schools in Mazandaran province, including 3811 male and female teachers in three counties (Noor, Noshahr, Chaloos) in west of Mazandaran were selected by random sampling. In this sampling method, units of the population under study, are categorized in classes of homogeneous variables. So their changes inside the groups would become less and then a number of samples would be selected from each class (Sarmad et al, 1380). Based on the geographical distribution of counties

in west of Mazandaran, first the three regions of East, Central and West were considered and then the three counties of Noor, Noshahr and Chaloos were selected. After that, in each county a number of schools (elementary, middle and high schools, male and female teachers) were randomly selected and eventually based on Morgan table, (182) female teachers and (159) male teachers were evaluated.

Research instruments:

Spiritual Well-Being scale by Paloutzian and Ellison

Spiritual Well-Being Scale by Paloutzian and Ellison was built in 1982 and consists of 20 questions and two subscales. Odd questions of the test are religious well-being subscale and measures the amount of experience of a satisfying relationship with God; even questions are related to existential well-being scales that measures a sense of purpose and satisfaction with life. Likert scale response to questions is 6 degrees of "completely agree" to "strongly disagree". Paloutzian and Ellison in a research reported Cronbach's alpha coefficient for religious and existential well-being scale, respectively, 0/91 and 0/93.

The reliability of this scale has been reported by Dehshiri and colleagues on female and male students through Cronbach's alpha for the total scale and religious and existential

well-being subscales, respectively, 0/90, 0/87 and 0/82.

SF12 Quality of Life Questionnaire:

This questionnaire is designed to measure quality of life that has 36 phrases including eight sub-scales: physical pain, general health, physical functioning, emotional functioning limitations, physical functioning limitations, social functioning, vitality and mental health. In this questionnaire, the quality of life is evaluated quantitatively on a scale of zero to one hundred. This questionnaire is currently consistent with the statistical on the Iranian population. Reliability of the questionnaire by the use of internal consistency analysis and validity test using method of comparing known groups of internal consistency analysis showed that, except for the vitality scale ($\alpha = 0/6$), other scales from the minimum of standard reliability coefficients range from 77 percent to 9 percent. Cronbach's alpha coefficient for the whole questionnaire was 0/95, Convergent validity range 0/42 – 0/83 and divergent validity 0/70 – 0/15. Furthermore, the range factor weight of questions is 0/80 – 0/11.

The Ryff scales of psychological well-being :

The test-retest reliability coefficient of the Ryff psychological well-being scale was 0/82

and subscales of self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life and personal growth, were respectively, 0/71, 0/877, 0/78, 0/77, 0/70 and 0/78, which was statistically significant.

The correlation of psychological well-being scale with life satisfaction of Oxford Happiness and Rosenberg self-esteem scale were respectively 0/47, 0/58, 0/46 (Bayani et al. 1387).

Kalantarkooshe and Navarbafi in 2012, standardized the Ryff psychological questionnaire in a population of 860 people and the total alpha were reported 0/92. It must be noted that the Ryff questionnaire was first returned to Persian language and

then was translated for the second time after reforms in English. Then the translated version was matched with the original version. According to Kalantarkooshe and Navarbafi (2012), the above mentioned questionnaire has appropriate reliability and validity.

RESULTS

Results in Table 4.1 shows that the highest mean of psychological well-being is for positive relations with others, with the M of (84/16) and SD of (88/7) and the lowest mean of psychological well-being is for self-acceptance with the M of (49/12) and SD of (96/7). The M of spirituality is 88/71 with the SD of 209/29 and the M of quality of life is 18/59 with the SD of 72/22.

Table 1: Statistical characteristics of variables of the relationship between psychological well-being, spirituality and quality of life

Variables	mean M	standard deviation SD
Spirituality	71/88	29/209
Self-acceptance	12/49	5/967
Positive relations with others	16/84	7/882
Autonomy	12/85	7/842
Environmental mastery	16/69	7/526
Purpose in life	12/81	5/518
Quality of life	59/18	22/727
Personal growth	12/93	5/603

Analytical results

Table 2: Shows the correlation matrix of the variables of psychological well-being, spirituality and quality of life

Variable	r	Anxiety p
Spirituality		0/0000/282**
Self-acceptance		0/0004/233**
Positive relations with others		0/0001/281**
Autonomy	0/226**	0/005
Environmental mastery		0/0001/275**
Purpose in life		0/0005/226**
Quality of life		0/0001/274**
Personal growth		0/0004/233**

Table 3: The summary of step by step regression analysis of self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life and personal growth variables

Predictive model Variables	R^2	ΔR^2	standard deviation	
First self-acceptance, positive relations with others, autonomy	0/281	0/079	0/072	6/598
Second environmental mastery, Purpose in life, Personal growth	0/375	0/141	0/129	6/393

Results of Table 2 show that all correlations in the level of 0.99% is significant and the components of psychological well-being, spirituality and quality of life are directly related.

To determine the best predictor of the spirituality, the predictor variables of regression model are used in the step by step method.

Results in Table 3 indicate that in variables of self-acceptance, positive relations with

others and autonomy ($= \Delta R^2 0/072$) and with the addition of variable of environmental mastery, purpose in life and personal growth to the variables of self-acceptance, positive relations with others and autonomy in the second model, of 6% of the anxiety variance is added ($=0/129$) and the variables of self-acceptance, positive relations with others and autonomy has justified about 12/9 percent of the anxiety variance.

Table 4: Variance analysis test (ANOVA) to assess the significance of regression

Statistical indicator of / changes source	sum of squares ss	degree of freedom df	mean square ms	test F	significance level
Regression of self-acceptance, positive relations with others and autonomy variables	550/420	1	550/420	12/643	0/001
Remaining	6443/074	148	43/534		
Total	6993/493	149	-		
The regression of variables of self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, personal growth	984/960	2	492/480	12/049	0/000
Remaining	6008/533	147	40/874		
Total	6993/493	149	-		

Given the results of table 4, because the calculated F of self-acceptance, positive relations with others and autonomy has the

significance level of 0/01, ($f (1/148) = 12/643, p < 0/01$), so with 99% confidence we conclude that there is a relationship between

the variables of self-acceptance, positive relations with others, autonomy, relationship and spirituality and the variables of self-acceptance, positive relations with others and autonomy can predict the spirituality variable.

In the second model, as it can be seen, the calculated F for self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life and personal growth has the significance level of 0/01. ($f(2/147) = 12/049, p < 0/01$), so with 99 percent confidence we conclude that there is a relationship between the variables of self-acceptance, positive relations with others, self-control over the environment, purpose in life, personal growth and spirituality and predictor variables of self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life and personal growth can predict the variable of spirituality.

CONCLUSION

The World Health Organization tried to embrace the complexity of the term "Quality of Life", defining it as "the perception that an individual has as about their place in their own existence, in the context of culture and their value system in which they live and on relation to their objectives, their expectations, their norms, their concerns, etc. This is a very

broad concept which is influenced by complex ways and complex issues than physical health of the individual factors, his psychological state, level of independence, their social relationships and their relationship with the environment"[15]

high positive and directly proportional correlation between time after thyroidectomy and the degree of Psychological Well-being and Quality of Life reported by patients. Results also showed a high correlation (significant at the 99% level) between the two instruments used.[16]. Relation between spiritual health and quality of life indicated the need to consider this factor in the care of patients with coronary artery disease. This key point can be considered with specific priority in a country, like Iran, with rich religious and cultural belief to design the treatment-care programs for these patients.[17].

The word "spirituality" refers to the human tendency to search for the meaning of life through self-transcendence, or through their need to communicate with something beyond itself. Religion refers to a form of spiritual quest that is associated with religious traditions, whereas spirituality is not dependent on such context. Hence, the term "spirituality refers more to the search for a sacred issue and the word religion refers to s

search, that its foundations is in the formal (institutional) forms of spirituality. At present, there are a fairly significant number of studies that have investigated the influence of religion and spirituality on the physical and mental health. Most of these studies suggest that the pious people and those who have more religious activities, are usually physically and mentally healthier. The results show that participation in religious activities, is significantly related with more well-being and less delinquency, alcohol consumption, drug abuse and other social problems. According to David Mayor "repeated studies among the people of North America and Europe indicate that religious people compared to non-religious ones feel more happiness and life satisfaction ". Contrary findings, does not deny the relationship between welfare and religion, but determines the situations in which the relationship is stronger. For example, the relationship between welfare and religion is usually stronger in women than men. Considering the race, usually the relationship between well-being and religiosity among African-Americans is more than in whites. The belief in the healing power of prayer among African-Americans is stronger than other ethnic groups.

Based on the findings of this study, there is a significant positive relationship between spiritual, psychological well-being and quality of life in teachers.

In every research in the field of humanities, paying attention to social conditions and necessities of time is needed. Today, one of the main discussion in this field is the topic of health and through which the strategies of human's success can be applied. This has led some international health organizations, to review existing definitions of human and his existential dimensions. The World Health Organization's in definition of human existence, mentions the physical, mental and spiritual points and raises also the fourth dimension, i.e. the spiritual dimension in human growth and development. There is no doubt that spirituality is one of the main issues and people are looking for meaning in their work, they are looking for ways to link their lives with spirituality and this link and spirituality allows them to relate to God in all aspects of their lives.

DISCUSSION

This study d a significant positive relationship between spiritual well-being and quality of life. Higher spiritual well-being scores were associated with higher quality-of-life scores. This study also highlighted significant relationships between the

psychological adjustment styles with both quality of life and spiritual well-being. The strongest relationship was a positive correlation between fighting spirit and quality of life. Both the self-acceptance, positive relations correlated with quality of life, suggesting that a diminished emphasis on psychological adjustment styles.

The correlational results generally support previous research findings with regard to the associations between spiritual well-being and quality of life ([13], [14], [18], [13]). Overall, the findings provide support, which reported a positive correlation between spiritual well-being and quality of life, a significant positive correlation between spiritual well-being and fighting spirit [14].

Spiritual well-being and quality of life, These results support previous research in that spiritual well-being was found to be associated with quality of life ([12], [19], [20]), ([21]).

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