



**International Journal of Biology, Pharmacy
and Allied Sciences (IJBPAS)**

'A Bridge Between Laboratory and Reader'

www.ijbpas.com

**FORECAST QUALITY OF LIFE IN CONNECTION WITH SPIRITUAL
INTELLIGENCE AND PERCEIVED SOCIAL PROTECTION IN CANCER
PATIENTS**

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ABSTRACT

The main goal of this research was predicting life quality in relation with intelligence and perceptible social support by cancerous patients, that is between the cancerous patient who confer to doctor cancer's clinic in Shiraz in 2014, they choose 140 cancerous person (70 women and 70 men) in purposeful sampling way, and evaluate samples by S-F36 life quality questionnaire, King's moral intelligence, Zimet and Cooperator's in 1988 questionnaire provided data were evaluated by regression's (single variant), (several variant) and MANOVA method. Result display: critical existential think component's and creating personal means in variant moral intelligence can for cost partial of physical health component and mental health in cancerous and perceptible social support component by friends and perceptible social support of others can predict the partial of physical health in life quality of cancerous and so perceptible partial of mental health of cancerous quality. Also in this study specified that cancerous men and women hadn't meaningful life quality together.

Keywords: life Quality, Virtual Intelligence, Perceptible Social Support and Cancer

INTRODUCTION

Despite remarkable advances in medical science, cancer remains one of the most serious diseases of our century and the second cause of death after cardiovascular diseases pose. The disease with abnormal deformation of cells and loss of cell differentiation is determined. Now every year more than 7 million people die of cancer to lose and it is predicted that the number of new cases in 2020 annually from 10 million to 15 million, (Hassanpour and Azeri, 2006). In addition to a lot of stress on the individual and family cancer that does not affect the quality of life for all people. Quality of life is one of the most important issues facing the world today and the major issues in the development of social policy is that issues such as welfare, health-focused quality of life, basic needs, growing and satisfying life, altruism and self-sacrifice among the communities covers (Karimi, 2013). Given the importance of the quality of life for people, trying to promote the principles and priorities of the main social planners and policy makers, managers and government officials in each community and country. It is safe to say all programs, policies and operations executive in a community in order to improve the quality of life of the community (Karimi, 2013). The term quality of life for individuals and

communities is the general assessment. It is in a range of areas, including the areas of international development, health, and politics is used. Quality of life and standard of living should be based mainly on income, confused. Instead, the standard indicators of quality of life not only of wealth and employment, but also includes environmental, physical and mental health, education, recreation and leisure and social belong too. During the past two decades one of the most important quality of life issues as one aspect of an effective clinical research and patient care approved and check it to detect differences between patients, predict disease outcomes and assessment treatment is used (Gill, 1994). The World Health Organization quality of life to understand each person of life, values, goals, and interests has defined standards. Including disorders that severely affect the health and therefore quality of life of people with chronic diseases such as cancer. Cancer and incredibly unpleasant experience for each person, causes cancer of jobs, the economy, society, family life has been disrupted, leading to the destruction of life and certain aspects of quality of life, including mental status, psychological, social, economic, sexual function affects (Vedat et al., 2001). Social support is the perception of the interests of

others, from the perspective of individual psychology is valuable and if you are experiencing complications, and other influential people in his life as a friend, brother or partner will help him and its concept The range focuses on interpersonal interaction and the exchange rate is more interpersonal level of social support a person receives Will be increased, the opposite is also true regarding (Biabangard, 1994).The concept of spiritual intelligence in the academic literature in psychology for the first time in 1996 by Stevens and after Iymonz was introduced in 1999. Parallel to this process, Gardner (1999) concept of spiritual intelligence in different aspects of the review and acceptance of the concept of combining spirituality and intelligence challenged. Spiritual intelligence, interesting and new theory and experimental research and Nyzyafth very little about it recently, it is the opinion of many experts and scholars have been attracted to (Yadu'llah pour Kebria, 2014).Until a few years ago communicable diseases as the biggest health problem in many developing countries it was, to be spent so that the control and prevention of epidemics the patient was the result. now the increasing burden of non-communicable diseases, especially in developing countries is a serious threat And this reduces the quality of life of people,

especially patients, as well as governments must strive to increase social support and spirituality and spiritual intelligence in the field of people and patients with chronic, incurable disease of the consolation for be.The main research question is whether the quality of life of cancer patients on the basis of spiritual intelligence and perceived social support predicted?

Measuring tool

1. Quality of Life Questionnaire

Quality of life is the removal of any person from their health status and satisfaction of this condition (Hamidi Zadeh et al., 2008). The World Health Organization quality of life, one's perception of his position in life in the context of culture and value system in which he lives knows in relation to the goals, expectations, standards and concerns he (Shah et al., 2011) .

2. King Spiritual Quotient Inventory (SISRI)

Spiritual intelligence concepts in recent years research has led many, especially in Iran. In a simple definition of spiritual intelligence means having a sense of meaning in life and cause human integrity. In order to measure spiritual intelligence questionnaires and many tools have been made even in Iran. The King Spiritual Quotient Inventory (SISRI) as its English name is of more interest and a lot of research done using this tool.

3. Perceived Social Support Questionnaire
 Multidimensional Scale of Perceived Social Support Zimet and colleagues (1988)
 Multidimensional Scale of Perceived Social Support :(Zimet et al) a multidimensional scale of perceived social support is a subjective assessment of the adequacy of social protection to its operation, to by Zimet and colleagues (1988) was designed.
 Statistical methods and data analysis

Information and extracted data using two methods of descriptive and inferential statistics were used. That the descriptive statistics of mean and standard deviation And in the inferential statistics to analyze the data obtained in the main hypothesis of simultaneous multiple regression method in the form of software 18 - SPSS was used.

RESULTS

Table 1: Total value scores, mean, standard deviation, minimum and maximum variable component of quality of life, spiritual intelligence and perceived social support for all subjects

Maximum	At least	standard deviation	Average	Total	Variable name	Row
345	0	76/8	158/51	22192/5	physical health	1
353	0	75/69	166/4	23297/17	mental health	2
98	0	16/17	46/77	6548	Spiritual intelligence (total score)	3
28	0	6/62	16/26	2277	Critical thought	4
20	0	4/4	8/8	1232	Production of personal meaning	5
30	0	5/14	13/48	1888	Transcendental consciousness	6
20	0	4/21	8/22	1151	Expanded state of consciousness	7
20	4	4/17	14/24	1994	Perceived social support from family	8
20	4	4/31	13/33	1867	Perceived social support from friends	9
20	4	4/53	13/5	1891	Perceived social support from others	10

Table 2: Total amount and average scores, variable components of quality of life, spiritual intelligence and perceived social support on gender segregation

Women (71)		Men (69)		Variable name	Row
Average	Total	Average	Total		
159/75	11342/5	157/24	10850	physical health	1
168/87	11990/33	163/86	11306/83	mental health	2
44/81	3182	48/78	3366	Spiritual intelligence (total score)	3
16/25	1154	16/27	1123	Critical thought	4
8/12	577	9/49	655	Production of personal meaning	5
12/85	913	14/13	975	Transcendental consciousness	6
7/57	538	8/88	613	Expanded state of consciousness	7
13/81	981	14/68	1013	Perceived social support from family	8
12/43	883	14/26	984	Perceived social support from friends	9
12/95	920	14/07	971	Perceived social support from others	10

Table 3: results of the correlation coefficient between the variables

10	9	8	7	6	5	4	3	2	1	row And variable
									1	1-health
								1	0/595**	2. Mental health
							1	0/211*	0/215*	3. Spiritual Intelligence (total score)
						1	0/764**	-0/069	0/002	4. CET
					1	0/376**	0/773**	0/345**	0/283**	5. PMP
				1	0/590**	0/518**	0/864**	0/188*	0/250**	6. TA
			1	0/663**	0/610**	0/335**	0/775**	0/327**	0/221**	7. CSE
		1	0/192*	0/361**	0/268**	0/346**	0/380**	0/250**	0/200*	8. Family support
	1	0/731**	0/321**	0/371**	0/345**	0/294**	0/416**	0/356**	0/351**	9. Supporting Friends
1	0/756**	0/774**	0/280**	0/319**	0/239**	0/404**	0/405**	0/243**	0/127	10. support others

< 0/01P ** : ; < 0/05 P * : Hypothesis 1: spiritual intelligence, quality of life in cancer patients predicts

Table 4: Multivariate linear regression analysis to predict the physical health of the variable component of spiritual intelligence

dF	F	R ²	P (Sig)	t	B	Predictor variables	criterion variable
4	4/54	0/119	0/0001	6/02	116/66	Constant	Health
			0/041	-2/05	-2/27	Critical thought	
			0/037	2/1	3/96	Production of personal meaning	
			0/085	1/73	3/18	Transcendental consciousness	
			0/954	0/05	0/122	Expanded state of consciousness	

Table 5: Multivariate linear regression analysis to predict mental health by the variable component of spiritual intelligence

Df	F	R ²	P (Sig)	t	B	Predictor variables	criterion variable
4	8/31	0/198	0/0001	7/46	135/88	Constant	Mental Health
			0/006	-2/79	-2/89	Critical thought	
			0/003	2/97	5/27	Production of personal meaning	
			0/866	-0/17	-0/29	Transcendental consciousness	
			0/033	2/15	4/27	Expanded state of consciousness	

H2: Perceived social support, quality of life in cancer patients predicts.

Table 6: Multivariate linear regression analysis to predict physical health by perceived social support variables

dF	F	R ²	P (Sig)	t	B	Predictor variables	criterion variable
3	9/18	0/169	0/0001	4/02	88/38	Constant	physical health
			0/73	0/34	0/83	Perceived social support from family	
			0/0001	4/54	10/32	Perceived social support from friends	
			0/013	-2/52	-5/87	Perceived social support from others	

Table 7: Multivariate linear regression analysis to predict mental health by perceived social support variables

dF	F	R ²	P (Sig)	t	B	Predictor variables	criterion variable
3	6/67	0/128	0/0001	3/85	85/42	Constant	mental health
			0/94	0/07	0/18	Perceived social support from family	
			0/003	3/05	6/99	Perceived social support from friends	
			0/64	-0/46	-1/1	Perceived social support from others	

Hypothesis 3: There is a difference between the quality of life for cancer patients, male and female

Table 8: Effect of Pillay and Wilks Lambda effect on Hetelling and the largest root

Statistical power	Significance level	F	Value	
0/061	0/926	0/077	0/001	Pillay effect
0/061	0/926	0/077	0/999	Lambda Wilkes
0/061	0/926	0/077	0/001	Hetelling effect
0/061	0/926	0/077	0/001	The largest root

Table 9: multivariate analysis of variance to investigate the differences in the quality of life for cancer patients, male and female

Statistical power	Significance level	F	average of squares	sum of squares	Degrees of freedom	References	
1	0/0001	591/92	3516394/95	3516394/95	1	physical health	quality of life
1	0/0001	672/01	3874384/33	3874384/33	1	mental health	
0/054	0/848	0/037	219/95	219/95	1	physical health	References
0/067	0/697	0/152	878/59	878/59	1	mental health	
			5940/6	819803/74	138	physical health	Intergroup (error)
			5764/4	795625/64	138	mental health	
				4337931/25	140	physical health	Total
				4673346/91	140	mental health	

CONCLUSIONS:

As the first hypothesis is that spiritual intelligence, quality of life in cancer patients predicts.

To evaluate the ability to predict the health of the variable component of quality of life by

The variable component of spiritual intelligence, multivariate linear regression analysis was used to input method that is determined according to the results. The components of critical thought with significance level ($P=0.041$) and with a significant level of personal meaning ($P=0.037$) can be part of the variable component of quality of life, physical health in cancer patients to predict. The results show that a significant component of critical thought ($P=0.006$) and produces personal meaning and significance level ($P=0.003$) able to predict the health component mental quality of life of cancer patients are variable. Given the significant level of regression ($P=0.002$) It was found that model, generalize to society. The value of R^2 in the above analysis shows that 11.9% of changes in physical health, mental health changes by 19.8% of the variable component of spiritual intelligence is explained.

Intelligence, problem solving behavior is adaptive in order to facilitate the practical objectives and growth orientation is

adaptive. Adaptive behavior similar to multiple goals that are internal conflicts reduces. The notion of intelligence, based on the proposition that the process towards the goals, performance and problem-solving strategies to overcome the obstacles necessary. . Spiritual intelligence makes subjective and time-consuming fall, the changes do not concern them, but in any change to look for a new opportunity to succeed. Spiritual intelligence makes people not previously involved and not worry about the future, but to be able to live in the moment, the unexpected events that occur, use and enjoy. The same intelligence that helps people in critical conditions and the best way to find and deal with problems and diseases. The second hypothesis of social support, quality of life in cancer patients predicts.

To evaluate the ability to predict the quality of life of cancer patients by variable components of perceived social support, test multivariate linear regression were used for each component of quality of life. According to data obtained, we can conclude that the components of perceived social support from friends and social support from others with a significance level ($P=0.0001$) and ($P=0.013$), can be part of the physical health of the quality of life of cancer patients to predict. And components of perceived social support

from friends with significance level ($P=0/003$) able to predict the quality of life of cancer patients is part of mental health. The results showed that due to the significant level of regression ($P =0.0001$) can be introduced that model, generalize to society.

Hypothesis 3: There is a difference between the quality of life for cancer patients, male and female.

In order to evaluate the difference in the quality of life of cancer patients, men and women multivariate analysis of variance (MANOVA) was used.

In general, studies of cancer in both men and women are equal but different cancer types. For example, women are more likely to breast and cervical cancer and men with prostate cancer or blood cancer and how to treat each individual to cope with the disease is different. Although a successful development for the treatment of many cancers, there are treatment options the name of the disease still threatens a person's mental and social health and on the quality of life he's having an impact. Of course, every individual should be given the power resiliency to deal with negative thoughts and dysfunctional mind deals and on ways of treatment and adapting to cope with the new situation, he can return to society. The deal has the support of the people most affected by Vicki studies

(2013) quotes Mahdavi, 2013) has shown no significant difference between men and women.

ACKNOWLEDGMENT

This article is extracted from my thesis under the title of "Forecast quality of life in connection with Spiritual Intelligence And Perceived social protection In cancer patients". Hereby, I extend my sincere appreciation to Islamic Azad university of Arsanjan for the efforts and supports they provided to me.

REFERENCES:

1. -Ameram Y, Dryer C.(2009);The Development and preliminary Validation of the Integrated Spiritual intelligence Scale (ISIS), Palo Alto, CA: Institute of Transpersonal Psychology Working Paper, Available at: <http://www.Geocities.Com>
2. -L., & Feist, J. (1997). Health Psychology: an Introduction to Behavior and Health. Mexico. City Brooks/Cole.
3. -Nasel DD; (2004). Spiritual Orientation in Relation to Spiritual Intelligence: A consideration of traditional Christianity and New Age/individualistic spirituality; [dissertation]. [South Australia]: Division of Education, Arts and

- social sciences school of psychology.
4. -McNeely ML, Campbell KL, Rowe BH, Klassen TP, Mackey JR, (2014) Courneya KS. Effects of exercise on breast cancer patients and survivors: asystematic review and meta-analysis. *CMAJ : Canadian Medical Association journal*. 2014;175(1):34-41.
 5. -Pinto BM, Eakin E(2009).Health behavior changes after a cancer diagnosis: what do we know and where do we go from here? *Annals of Behavioral Medicine*. 2009; 22:38-52.
 6. -Smets EM, Garssen B.(2012). Fatigue in cancer patients. *British Journal of Cancer*; 68:220-4.
 7. Cherian, P. (2004). Now it's SQ. Retrieved from internet: www.lifeandworkmeaningandpurpose.com.
 8. Emmons, R. A. (1999). *The psychology of ultimate concern: Motivation and spirituality in personality*. New York: The Guilford Press.
 9. Emmons, R. A. (2000). Is spirituality intelligence? Motivation, cognition, and the psychology of ultimate concern. *The International Journal for the Psychology of Religion*, 10(1), 3-26.
 10. Gardner, H. (1999). *Intelligence reframed: Multiple intelligences for the new millennium*. New York: Basic Books.
 11. -Sheppard C, Higgins B, Wise M, Yiangou C, Dubois D, et al(2011): Breast cancer follow up: a randomized controlled trial comparing point of need access versus routine 6- monthly clinical review. *Eur J Oncol Nurs*; 13:2-8.