

# Investigating the Relationship between Mental and Spiritual Health of Nursing and Midwifery Students

Moradali Zareipour<sup>1</sup>, Sahar Karbasi Salmasi<sup>1</sup> and Monireh Rezayi Moradali<sup>2,\*</sup>

<sup>1</sup>Health System Research Unit, Urmia health center, Urmia University of Medical Sciences, Urmia, Iran and <sup>2</sup>Student Research Committee, School of Nursing and Midwifery, Shahid Beheshti University of Medical Sciences, Tehran, Iran.

**Abstract:** Spirituality and its components because of effects on psychological constructs and the ability to influence individuals' actions has been emphasized the researcher in recent years. The aim of this study was to determine the relationship between mental health and spiritual in nursing and midwifery students of Islamic Azad University of Urmia. This descriptive-analytical study was conducted on 300 students of nursing and midwifery in 2015. Mental health of students was measured using GHQ-28 questionnaire and spiritual health was measured using Palutzian and Ellison questionnaire. Data were analyzed using descriptive statistics and independent t-test, ANOVA and Pearson correlation coefficient in SPSS v.21 software. The results showed that 35 % of students were suspicious to mental disorders. Mean score of spiritual health was  $92/28 \pm 16/35$ . Analysis of variance showed that mental had a significant relationship with health variables such as gender, age, average of semester and also spiritual health had a significant relationship with gender, education and economic status. There are positive correlations between spiritual health and mental health ( $r = 0.58$ ). The results of this study support the importance of spiritual health in predicting the students' mental health. Therefore, it is useful to pay attention to promoting spiritual health in order to improve mental health of students.

**Keywords:** Mental health, Spiritual health and Student.

## INTRODUCTION

Students are the major part of the active population of a country. In all countries of the world, academic issues and plenty problems of students influence the psychological health of students (1). Entrance to university makes a major change in social, family and individual life and is very sensitive time of life span that in this period, students face with great changes in social and human relationships, and being in such a situation is often stressful, and affect the performance and efficiency of students (1, 2). Many students are not familiar with the campus on arrival, detached from family, lack of interest in the field of acceptance, incompatibility with other people in the living environment and lack of amenities are conditions that can cause mental problems and educational drop (3). Experts of world health organization believe that mental health is essential and vital need to improve the quality of human's life, and the ability to make a harmonious relationship with others, environment modification and resolve conflict (4).

Religion is one of the important social-cultural factors related to mental health that is taken into consideration in recent decades (5). Religion is a way of life that interprets the purposes and meaning of life and is a tool for the evolution of spiritual health, of course, when it is used well (6). Spiritual health is an important aspect human health and determines integrity and totality of person because it is a force that coordinate physical, psychological and social aspects (7). In fact the spiritual health is human spiritual experience in two different dimensions: religious health, how to understand the health of the people in the religious life, and existence dimension, that focuses on the social and psychological concerns of the people (8). Many of the researchers in their studies have found that spirituality has a huge impact on mental health (7).

Bahrami et al. and Cohen et al. in their studies showed that there are significant positive relationship between religious orientation and mental health (9-10), Krause et al. suggested that the relationship between traumatic events and symptoms of depression will reduce in elderly people who believe only God knows the time to respond the invocations (11). In addition, while religious identity increases, self-esteem will increase and depressive symptoms will decrease (12) Mazidi et al. in their study reported the effect of Islam and Christ religion on the mental health of Iranians young and noted the significant effect of both religion on the symptoms of mental disorders (13).

Pay attention to mental and spiritual health status in each community and providing the necessary background for achieving the dynamic and healthy life are the guaranty of health community for upcoming generations. To achieve such a valuable objective, prevention of emotional, depression, anxiety, and spiritual disorders are essential. In addition to the adverse effects of these disorders in students, various social problems may bear to communities, therefore in mental and physical health of them ensure the health of family and society. Given that such a study have not yet conducted in the Urmia University students (Islamic Azad, Governmental and Medical sciences), the present study was aimed to determine the relationship between mental health and spiritual health in students of nursing and midwifery in Islamic Azad University of Urmia.

The tool of data collecting was a questionnaire including demographic characteristics, spiritual health and mental health. Spiritual health was examined using 20 questions of Palutzian and Ellison questionnaire which 10 questions were about religious health and 10 questions about existential health. Odd terms measure religious health and even terms measure existential health. The spiritual health is the sum of these two sub-groups, in range of 20-120. Six-point Likert questions were classified as completely disagree to strongly agree. This questionnaire was approved in the study of Farahaninia and Mustafazadeh in Iran and its validity and reliability have been confirmed (14, 31).

\*Address correspondence to this author at the Student Research Committee, School of Nursing and Midwifery, Shahid Beheshti University of Medical Sciences, Tehran, Iran; Email: monir.rezaee@yahoo.co.uk

## MATERIALS AND METHODS

This descriptive-analytical study was conducted on 300 students of nursing and midwifery in 2018. At first, according to the two majors of the subjects were included randomly, so that 154 nursing students and 146 students midwifery were selected based on the population of each major. In the next stage, subjects were selected who had inclusion criteria (residence of dormitory, without any physical and mental disease and consent to participate in the study). Exclusion criteria were the lack of cooperation and having a physical illness and psychological disorders. Also the objectives of the study were explained to all participants and all of them accepted to participate and were assured of the confidentiality of their individual information as well as the voluntary nature of participating in the study.

Mental Health Questionnaire (GHQ-28) contains four subscales physical, anxiety and insomnia, social dysfunction and depression and 28 questions that assess the mental state of the person concerned in the last month. All questions have 4 options and score on Likert method (0-1-2-3). Cut-off point in the questionnaire is 23 (score higher than it was regarded as a mental health disorder) and the maximum score is 84. This questionnaire is one of the reliable screening test in the world that validity and reliability of it were approved in studies of Molavi et al. and Nazifi et al. (16, 17). The questionnaires filled after describing the objectives of this study and collected data were analyzed using software SPSS19 and using ANOVA, Pearson correlation, and linear regression. The level of significance was considered 0.05.

The tool of data collecting was a questionnaire including demographic characteristics, spiritual health and mental health. Spiritual health was examined using 20 questions of Palutzian and Ellison questionnaire which 10 questions were about religious health and 10 questions about existential health. Odd terms measure religious health and even terms measure existential health. The spiritual health is the sum of these two sub-groups, in range of 20-120. Six-point Likert questions were classified as completely disagree to strongly agree. This questionnaire was approved in the study of Farahaninia and Mustafazadeh in Iran and its validity and reliability have been confirmed (14, 31).

## RESULTS

The mean age of the students was  $21.47 \pm 2.12$  years. In terms of gender, 247 subjects (82.3%) were female and 53 subjects (17.7%) were male. The largest age group was in the 20 to 25 years group (62.3%). (Table 1). The results of table 1 showed that 35 % of students were suspicious to mental disorders and there was significant relationship between mental health with sex ( $p = 0.01$ ), age ( $p = 0.04$ ) and average scores of students ( $p = 0.002$ ), while the marital status ( $p = 0.13$ ), educational major ( $p = 0.21$ ) and economic status ( $p = 0.16$ ) were not significantly associated with mental health. As well as mean score of spiritual health was  $92.28 \pm 16.35$  that mean score of religious health was 48.54 and mean score of existential health was 43.74. The results showed that there were statistically significant relationship between spiritual health and gender ( $p = 0.012$ ), education ( $p = 0.002$ ) and economic status ( $p = 0.023$ ), while there were no significant relationship between spiritual health and marital status ( $p = 0.23$ ), age ( $p = 0.36$ ) and the average score ( $p = 0.52$ ).

Demographic Variables	Frequency	Percent	
Gender	Female	247	3.82
	Male	53	7.17
Marital status	Single	255	85
	MarriZed	45	15
Age	20>	99	33
	20-25	187	3.62
	25<	14	7.4
Average	14>	51	17
	16-14	110	7.36
	18-16	106	3.35
	20-18	33	11
Educational Major	Nurse	154	3.51
	Midwife	146	7.48
Economic status	Good	61	3.20
	Moderate	221	7.73
	Weak	16	3.5

**Table 1:** Demographic Variables in the students participated in this study.

The Correlation between spiritual and mental health components were showed in table 2. Accordingly, there were positive significant correlation between the spiritual and existential and religious health with mental health and all components of mental health.

## DISCUSSION

According to the results of this study, 35% of participants were suspicious to mental disorders that was consistent with the study of Sadeghian et al.(18) and Jahani Hashemi et al.(19) , but was inconsistent with study of Tavakolizadeh et al.(20) and Noorbala et al.(21). These different results can be affected by method and materials of study, range of age in study, sample size and the time of study. On the other hand there was a significant relationship between gender and mental health of the participants that was consistent with the study of Sadeghian et al.(18) and was inconsistent with the study of Karami et al.(19) and Adham et al. (23).

There was a significant relationship between age groups and mental health that was inconsistent with the study of Sadeghian et al. (18).the results showed that there was a significant relationship between mental health of students and educational development which was consistent with some conducted studies (24,25).in justifying the issue of and it can be said the lack of mental health and psychological problems cause that not only information is not recorded in the short term memory but also is not moved to long term memory.

The results showed that more spiritual health of students was higher than average, in the study of Asarodi et al.(26). that was done about the spiritual health of nurses, the spiritual health of nurses were not in the weak range that was consistent with the results of our study, as well as was consistent the study of Hsiao et al. (27) and Saffari Rad et al.(28) that determined the spiritual health of students.

The results showed that there was significant difference between the mean scores of spiritual health and gender that shows higher spiritual health of female students than male students, which was consistent with the study of Jafari et al.(29) showed that female nurses had higher spiritual health than male nurses, and its reason is maybe related to different roles and characteristics of females and more ability to compatibility with spiritual principles.

Structures	Mental Health	Depression	Social Performance	Anxiety	Physical Health	Spiritual Health	Existence Health	Religious Health
Religious Health	49.0	48.0	5.0	65.0	43.0	92.0	71.0	-
Existence Health	59.0	58.0	65.0	68.0	44.0	93.0	-	71.0
Spiritual Health	8.0	57.0	6.0	7.0	65.0	-	92.0	92.0
Physical Health	81.0	53.0	55.0	62.0	-	65.0	44.0	43.0
Anxiety	81.0	52.0	13.0	-	62.0	7.0	68.0	65.0
Social Performance	32.0	17.0	-	13.0	55.0	6.0	65.0	5.0
Depression	78.0	-	17.0	52.0	53.0	57.0	58.0	47.0
Mental Health	-	78.0	32.0	81.0	81.0	8.0	59.0	48.0

**Table 2:** Correlation between spiritual and mental health components measured in this study

As well as there was a significant difference between major of study and the mean score of students' spiritual health, that means the nursing and midwifery students had the same spiritual health, which was inconsistent with the study of Rahimi et al.(30). There was a significant relationship between economic status and spiritual health that was inconsistent with the study of Mostafazadeh et al. (15).

The results showed that there was a significant positive relationship between mental health and spiritual health of the students. In other words we can say that as the spiritual health of students is higher and more powerful, the psychological injury is lower. The results were consistent with the study of Unterrainer et al.(31), Masoudi Asl et al.(32), Omidvari et al.(6) and Sanagoo et al. (33) that expressed spirituality are related to health, and feeling of well-being and recovery. Spiritual health causes compatibility and integration of inner and spiritual life with the outer life and work environment, as well as causes psychological welfare and health growth of mankind and ultimately public health.

## CONCLUSION

According to the results of this study, the spiritual health of nursing and midwifery students of Urmia was in average level, on the other hand, the mental health of students in this city was not in desirable level. There are positive correlations between spiritual health and mental health. Since spiritual health in clinical environments accommodates students with stressful situations and environments, thus the enforcement of this part can improve communications between therapist and patient, and induce the feeling of anxiety, depression and loneliness. In conclusion, nursing and midwifery students need spiritual supports in order to improve the level of mental health.

## ACKNOWLEDGEMENT

This article has been derived from a research project No.52402, of Islamic Azad University, Urmia Branch. The authors greatly appreciate the cooperation of all professors and staff of Islamic Azad University, Urmia Branch for participating in this study.

## REFERENCES

- [1] Hosanei SH, Mosavy MH. The comparative study of health status of medical students and para-medical student's trainee. *J Gorgan Uni Med Sci.* 2004; 6 (1):101-107. <https://doi.org/10.22442/ijumhs.0431>
- [2] Jang SJ, Johnson BR. Explaining religious effects on distress among African Americans. *J Sci Stud Relig.* 2004; 43(2):239-60. <https://doi.org/10.1111/j.1468-5906.2004.00230.x>
- [3] Ahmadi Z, Sahbaie F, Mohammad Zadeh SH, Mahmoudi M. Review of mental health in nursing students and non-nursing students of Islamic Azad University. *Medical Science Journal of Islamic Azad University.* 2008; 17 (2): 107-111.
- [4] Ealati A, Abonajmi M. Dissertation. Urmia: Urmia University of Medical Sciences; 2006. Study of mental health of Urmia University of Medical Sciences' hospitals staff.
- [5] Esmaeil Riahi M Aliverdi -Nia A Bani Asadi M R. The impact of religiosity and religious orientation on the mental health of the students of University of Mazandaran. *Journal of Social Science.* 2009; 5(2) 51-90.
- [6] Omidvari S. Spiritual health; concepts and challenges. *Quranic Interdisciplinary Studies Journal of Iranian Students Quranic Organization.* 2008; 1(1) 6-17.
- [7] Hills J, Paice JA, Cameron JR, Shott S. Spirituality and distress in palliative care consultation. *J Palliat Med.* 2005; 8(4):782-8. <https://doi.org/10.1089/jpm.2005.8.782>
- [8] Zareipour M, Abdolkarimi M, Asadpour M, Dashti S, Askari F. The Relationship between Spiritual Health and Self-efficacy in Pregnant Women Referred to Rural Health Centers of Uremia in 2015. *Community Health Journal.* 2016; 10 (2):52-61. <https://doi.org/10.7454/mjhr.v19i3.5639>
- [9] Cohen D, Yoon DP, Johnstone B. Differentiating the impact of spiritual experiences, religious practices, and congregational support on the mental health of individuals with heterogeneous medical disorders. *Int J Psychol Relig.* 2009; 19(2):121-38. <https://doi.org/10.1080/10508610802711335>
- [10] Bahrami Ehsan H, Anahita T. [Dimensions of the relationship between religious orientation and mental health and assess of religious orientation scale]. *J Psychol Educ Sci.* 2004; 34(2): 41-63.
- [11] Krause N. Lifetime Trauma, Prayer, and Psychological Distress in Late Life. *Int J Psychol Relig.* 2009; 19(1):55-72. <https://doi.org/10.1080/10508610802471112>
- [12] Keyes CL, Reitzes DC. The role of religious identity in the mental health of older working and retired adults. *Aging Ment Health.* 2007; 11(4):434-43. <https://doi.org/10.1080/13607860601086371>

- [13] Mazidi M, Ostovar S. Effects of religion and type of religious internalization on the mental health of Iranian adolescents. *Percept Mot Skills*. 2006; 103(1):301-6. <https://doi.org/10.2466/pms.103.1.301-306>
- [14] Farahaninia M, Abbasi M, Givarry A, Haqqani H. Spiritual health of nursing students and their views on spirituality and spiritual care of patients. *I J N*. 2005; 18(44):7-14.
- [15] Mostafazadeh F, Asadzadeh F. Spiritual Health of Midwifery Students. *Journal of Health and Care* 3. 2012; 14 (1 and 2):55-60.
- [16] Molavi H. Validation factor structure and Reliability of the Farsi version of General Health Questionnaire 28 in Iranian students. *Pakistan Journal of Psychological Resarch* 2002; 17(3-4): 87-98.
- [17] Nazifi M, Mokarami H, Akbaritabar A, Faraji Kujerdi M, Tabrizi R, Rahi A. Reliability, Validity and Factor Structure of the Persian Translation of General Health Questionnaire (GHQ-28) in Hospitals of Kerman University of Medical Sciences. *JFUMS* 2014; 3(4): 336-42.
- [18] Sadeghian E, Heidarian Pour A. Stressors and Mental Health Status among Students of Hamadan University of Medical Sciences. *Hayat*. 2009; 15 (1):71-80.
- [19] Jahani Hashemi H, Noroozi K. Mental Health in Nursing Students in Qazvin University of Medical Sciences. *Scientific Journal of Hamadan Nursing & Midwifery Faculty*. 2006; 14 (2):45-55.
- [20] Tavakolizadeh J, Khodadadi Z. Assessment of mental health Among freshmen Entering the first semester in Gonabad university of medical science in 2009-2010. *Ofogh-e-Danesh. Journal*. 2010; 16(3). 20.
- [21] Noorbala AA, BagheriYazdi S, AsadiLari M, VaezMahdavi MR. Mental health status of Individuals fifteen years and older in Tehran. *Journal of psychiatry and clinical psychology*. 2009; 4:479-483.
- [22] Karami S, Piraste A. The survey of mental healthstatus in Zanjan University of Medical Science.2002; 35: 66-73.
- [23] Adham D, Salem-Safi P, Amiri M, Dadkhah B, Mohammadi M, Mozaffari N, Sattari Z, Dadashyan S. The survey of mental health status among students at Ardebil University of MedicalSciences. *J Ardebil MedSciH*. 2008; 8(3): 229-234.
- [24] Diseth Å. Approaches to learning, course experience and examination grade among undergraduate psychology students: Testing of mediator effects and construct validity. *Studies in Higher Education*. 2007 Jun 1;32(3):373-88. <https://doi.org/10.1080/03075070701346949>
- [25] Frojd SA, Nissinen ES, Pelkonen MUI, Marttuenb MJ, Koivisto AM, Kaltiala-Heino K. Depression and school performance in middle adolescent boys and girls. *Journal of Adolescence*. 2008; 31:485–498. <https://doi.org/10.1016/j.adolescence.2007.08.006>
- [26] Asarodi A, Golafshany A, Akabery A. Relationship of spiritual health and life quality of nurses. *Journal of North Khorasan University of Medical Sciences*. 2011; 3(4): 81-84. <https://doi.org/10.29252/jnkums.3.4.79>
- [27] Hsiao YC, Chiang HY, Chien LY, An exploration of the status of spiritual health among nursing students in Taiwan, *Nurse Education Today* 2010; 30(5): 386-392. <https://doi.org/10.1016/j.nedt.2009.05.001>
- [28] Safayi Rad I, Karimi L, Shomoossi N, Ahmadi Tahour M. The relationship between spiritual well-being and mental health of university students *Quarterly Journal of Sabzevar University of Medical Sciences* 2010; 17(4): 274-280.
- [29] Jafari E, Dehshiri GR, Eskandari H, Najafi M, Heshmati R, Hoseinifar J. Spiritual well-being and mental health in university students. *Procedia - Social and Behavioral Sciences*. 2010; 5: 1477-1481. <https://doi.org/10.1016/j.sbspro.2010.07.311>
- [30] Rahimi N, Nouhi E, Nakhaee N. Spiritual Health among Nursing and Midwifery Students at Kerman University of Medical Sciences. *Hayat*. 2014; 19 (4):74-81.
- [31] Unterrainer K H Ladenhauf M L MoazediS et al. Dimensions of religious/spiritual well- being and their relation to personality and psychological well-being. *Personality and Individual Difference*. 2010; 49(3) 192-197. <https://doi.org/10.1016/j.paid.2010.03.032>
- [32] Masoudi Asl I, rajabi Vasokolaee G, Goudarzi L, Raadabadi M, Eskandari A H. The evaluation of relationship between mental health and spiritual health of students at Tehran University of Medical Sciences. 2015; 23 (3 and 4):55-66.
- [33] Sanagoo A, Alighoodneh Z, Asadi H. The relationship between spiritual health and loneliness between the Persian and Turkmen youth. *Research Center of Gorgan University of Medical Sciences*. 2008; 24 (8):53-59.

Received on 10-06-2020

Accepted on 25-06-2020

Published on 14-07-2020

DOI: <https://doi.org/10.12974/2313-0946.2020.05.01.1>

© 2020 Monireh Rezayi Moradali et al.; Licensee Savvy Science Publisher. This is an open access article licensed under the terms of the Creative Commons Attribution Non-Commercial License (<http://creativecommons.org/licenses/by-nc/3.0/>) which permits unrestricted, non-commercial use, distribution and reproduction in any medium, provided the work is properly cited.