Investigating the Relationship between Resiliency, Spiritual Intelligence and Mental Health of a group of undergraduate Students

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Abstract: Psychological assessment has tended to focus on the identification of attitudes that contribute to, and are symptomatic of, mental and physical disorders. This focus is most useful when clinicians and researchers seek to identify the degree to which individuals are impaired or at-risk. The purpose of this study is to investigate the relationship between resiliency, spiritual intelligence and mental health among male and female students of Hormozgan University. Statistical sample of the study consists of male and female students of Hormozgan University, among which 100 were selected by random sampling. In this research Resiliency Questionnaire of Connor & Davidson, General Health Questionnaire (GHQ-28) and Spiritual Intelligence Questionnaire of Abdollah-Zadeh were used. The results indicated that there was a positive meaningful relationship (p<0.01) between resiliency and mental health, and also between spiritual intelligence and resiliency (p<0.01). Based on the results of T-test, there is no meaningful resiliency difference between male and female students. On the other hand, results of multiple regressions analysis indicated that mental health and spiritual intelligence meaningfully explain resiliency. Mental health has more significant role in predicting and explaining resiliency. Mental health and spiritual Intelligence had a significant role in explaining resiliency. Due to the fact that people with higher resiliency represent higher degree of mental health, we can conclude that providing vital factors (religion, spirit) to enhance resiliency can strengthen people in the face of mental stresses, tension and depression.

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1. Introduction

Resiliency is described as individual's response to stressful events of life or continuous confrontation of stress (such as war and sexual abuse) [1]. Resilient people are higher compatible with environmental stressful factors [2,3,4]. Compatibility of people is due to the combination of context/ecological interaction and organic growth [1,5]. However, resiliency is multi-dimensional. A person may be resilient in one aspect, but less resilient in the others. Luther et al. [6] declared that some children showed adequacy in some aspects but have problems in the others. In a study on high-educational resilient students that had experienced misbehavior, Kaufman et al. [7] showed that 21% of them had social resiliency.

Perkins and Jones [1] defined three protective factors for physically and sexually abused, Family processes and beyond family factors. Benzies and Mychasiuk [8], explain family and governmental policy makings for enhancing health and preventing diseases, as two main source of providing protective factors against risky factors. Garmezy and Masten [3] had also explained three effective protective factors in individual resiliency: personal factors, family

factors and social factors. In a general review of Masten and Coatsworth [9] for a period of 25 years studies on resiliency, it is recognized that protective factors of resiliency have effects on adolescent's health.

Recent studies show that religious approaches and hope for the future are considered as potential protective factors of resiliency in individuals [10,11]. Various studies show that being religious creates objectivity in adolescents and despite their current problems, some of teenagers use their faith to create hope for improvement of condition in the future [1,12,13]. Family environment can be regarded as a key factor. Family can be effective in individual resiliency by creating protective and harmonious environment. The effect of family processes as a protective factor is emphasized in different studies. Ruther [14], for instance, recognized that having good relationship with at least one of the parents can strengthen adolescent in front of some risky behaviors. Perkins and Jones [1] explained two family factors: family protection, and positive interaction of parents and children.

Beyond family factors, such as positive relationship with people out of family environment

[15], positive atmosphere at school, extracurricular activities, suitable peer pattern [16], and an adult protector of adolescents are also defined as protective factors [17]. Benson [18] had also recognized that having outside-family adult protector for adolescents who had experienced unsuitable conditions inside the family can help to create optimistic feeling in them. Recently, Blum et al. [19] showed that adolescents who had good relationship in school have less abnormal behavior, pregnancy, and mental stress. Positive experience at school is of high importance, especially when the teenager experience problematic experiences at home such as misuse or parental ignorance.

Objectivity and religious approaches are two main protective factors in resiliency [1]. Spirituality is the need for going beyond self in daily life and uniting with others. Aram [20] believes that spiritual intelligence includes meaning, objective and sanctifies in life and optimism toward improvement of life. Those who have higher spiritual intelligent are more flexible, self-conscious, capable of intuition, holistic toward universe, seeks for answer of his basic questions about life and criticizing traditions and cultures. Spiritual intelligence can easily enable people to change and revolve [21].

Spirituality is considered as a basic knowledge that increases environmental adaptability of people, and has at least five efficiency which leads to adaptive behaviors: Capability to sublimate deeds in order to orient with integration of world, experiencing a high level of self-consciousness, investigating and purifying daily experiences about individual and spiritual and religious feeling, using spiritual sources to solve life problems and virtuous deeds such as forgiveness, self-sacrifice, etc. [13]

This research aims to find evidences about relationship between resiliency and mental health and spiritual intelligence among male and female students, what's the effect of these factors in describing resiliency and which one has the most part.

2. Material and Methods

Statistical society of this research constitutes students of Hormozgan University. 100 individuals were selected randomly. Correlation method is used to investigate the relationship between these variables. To measure the resiliency, questionnaire of Connor and Davidson [22] (CD-RISC) was used. The questionnaire includes 25 questions and has five

components: competence/self-resistance, trusting the instincts/ tolerating negative emotions, positive acceptance of changes/safe relations, control, and spirituality, and scales from 0 = incorrect, to 5= correct. Stability of the test is proved in internal researches. Mental health test used in this research is General Health Questionnaire GHQ-28 of Goldberg and Hillier [23] that has four scales:

A (physical characteristics): individual's feeling about their own health, tiredness and physical characteristics

 \boldsymbol{B} (stressful symptoms): including stress and sleeplessness

C (disorder in social functioning): ability of people in professional desires and daily issues of life, and their feelings about usual situations of life

 $\label{eq:D} D \quad \text{(depression):} \quad \text{severe} \quad \text{depression} \quad \text{and} \\ \text{tendency to suicide.}$

The average time specified for this test is 8 minutes. The test investigates positive healthy moods of subject during the last month (one month before test). To score the test, Likert's test scoring method (0-3) was used. In the study of Goldberg and Williams [24], sensitivity of GHQ-28 is 84% and its average trait is 82%. Spiritual intelligent test, first used in Sari University, Iran and was used to test spiritual intelligence in this survey. Cronbach's Alpha is 0.85 that indicates reliability of this test. Scoring is again based on Likert's scoring method.

3. Results

Table 1 represents mean and standard deviation of students in resiliency, spiritual intelligence and mental health. Table 2 represents results of T-test about resiliency, spiritual intelligence and mental health, and its subscales among male and female students

Results showed that there are no meaningful differences among male and female students based on resiliency, spiritual intelligence and mental health, and its subscales.

Table 3 represents correlation matrix of resiliency, spiritual intelligence and mental health variables.

Results of table 3 represent that there is a positive meaningful correlation between resiliency and spiritual intelligence in p<0.01. Resiliency and mental health has positive meaningful relation in p < 0.01.

Table 1. Mean and standard deviation of students in resiliency, spiritual intelligence and mental health

Variables	Mean			Standard Deviation			
	Female	Male	Total	Female	Male	Total	
Resiliency	57.44	58.74	58.09	7.18	7.67	7.42	
Spiritual Intelligence	44.16	42.16	43.16	7.32	6.94	7.13	
Mental Health	22.45	23.44	22.94	4.13	4.75	4.46	

Table 2. Results of T-test about resiliency, spiritual intelligence and mental health, and its subscales among male and female students

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Variables	Gender	N	M	Df	T	P		
Spiritual Intelligence	Female	50	44.16	98	0.92	0.35		
	Male	50	42.16			0.50		
Physical Characteristics	Female	50	6.10	98	0.34	0.73		
	Male	50	5.84			0.73		
Stress	Female	50	6.56	98	0.82	0.41		
	Male	50	5.88			0.41		
Social Functioning Disorder	Female	50	7.33	98	-0.19	0.84		
	Male	50	7.46			0.84		
Depression	Female	50	2.95	98	- 1.16	0.24		
	Male	50	3.98			0.∠4		
Mental Health	Female	50	22.45	00	0.40	0.60		
	Male	50	23.44	98	- 0.40	0.68		
Resiliency	Female	50	57.44					
	Male	50	58.74	98	- 0.39	0.69		

Table 3. Correlation matrix of resiliency, spiritual intelligence and mental health variables

Resiliency				1 *	3	U	,	0
reconnency	1			_				
Spiritual Intelligence	0.35 **	1						
Mental Health	0.47**	- 0.38**	1					
Physical Characteristics	- 0.31**	- 0.16**	- 0.79**	1				
Stress	- 0.36**	- 0.24*	- 0.83**	0.70**	1			
Social Functioning Disorder	- 0.31**	- 0.30**	- 0.67**	0.35**	0.44**	1		
Depression	- 0.46**	- 0.46**	- 0.77**	0.50**	0.51**	0.44**	1	
Gender	0.04	- 0.09	0.04	- 0.03	- 0.08	0.02	0.11	1
] [Mental Health Physical Characteristics Stress Social Functioning Disorder Depression	Mental Health 0.47** Physical Characteristics -0.31** Stress -0.36** Social Functioning Disorder -0.31** Depression -0.46** Gender 0.04	Mental Health 0.47** -0.38** Physical Characteristics -0.31** -0.16** Stress -0.36** -0.24* Social Functioning Disorder -0.31** -0.30** Depression -0.46** -0.46** Gender 0.04 -0.09	Mental Health 0.47** - 0.38** 1 Physical Characteristics - 0.31** - 0.16** - 0.79** Stress - 0.36** - 0.24* - 0.83** Social Functioning Disorder - 0.31** - 0.30** - 0.67** Depression - 0.46** - 0.46** - 0.77** Gender 0.04 - 0.09 0.04	Mental Health 0.47** - 0.38** 1 Physical Characteristics - 0.31** - 0.16** - 0.79** 1 Stress - 0.36** - 0.24* - 0.83** 0.70** Social Functioning Disorder - 0.31** - 0.30** - 0.67** 0.35** Depression - 0.46** - 0.46** - 0.77** 0.50** Gender 0.04 - 0.09 0.04 - 0.03	Mental Health 0.47** - 0.38** 1 Physical Characteristics - 0.31** - 0.16** - 0.79** 1 Stress - 0.36** - 0.24* - 0.83** 0.70** 1 Social Functioning Disorder - 0.31** - 0.30** - 0.67** 0.35** 0.44** Depression - 0.46** - 0.46** - 0.77** 0.50** 0.51** Gender 0.04 - 0.09 0.04 - 0.03 - 0.08	Mental Health 0.47** - 0.38** 1 Physical Characteristics - 0.31** - 0.16** - 0.79** 1 Stress - 0.36** - 0.24* - 0.83** 0.70** 1 Social Functioning Disorder - 0.31** - 0.30** - 0.67** 0.35** 0.44** 1 Depression - 0.46** - 0.46** - 0.77** 0.50** 0.51** 0.44** Gender 0.04 - 0.09 0.04 - 0.03 - 0.08 0.02	Mental Health 0.47** -0.38** 1 Physical Characteristics -0.31** -0.16** -0.79** 1 Stress -0.36** -0.24* -0.83** 0.70** 1 Social Functioning Disorder -0.31** -0.30** -0.67** 0.35** 0.44** 1 Depression -0.46** -0.46** -0.77** 0.50** 0.51** 0.44** 1 Gender 0.04 -0.09 0.04 -0.03 -0.08 0.02 0.11

Table 4. Predicting resiliency based on mental health and spiritual intelligence using Enter method

Variable	Criterion Variable: Resiliency						
Predictor Variables	В	В	R	R^2	Sig		
Mental Health	0.46	0.22	0.32	0.27	P < 0.01		
Spiritual Intelligence	0.37	0.18	0.13	0.18	P < 0.01		

As the results of table 3 indicate, mental health and spiritual intelligence have a positive and meaningful part in describing resiliency (p<0.01), and mental health describes 27% of resiliency variance (R^2 = 0.27). In general, mental health is most used in explaining resiliency. 18% of resiliency variance is also explained by spiritual intelligence (R^2 = 0.18).

There is also a negative meaningful relation between resiliency and depression, stress, social functioning disorder, and physical characteristics.

In order to predict resiliency based on mental health and spiritual intelligence, multi-variable regression method was use. The results are shown in table 4.

4. Discussion and Conclusion

The results of this study represent that gender is not a determining factor of resiliency, and assumed positive correlation between mental health and resiliency was also proved. The findings are similar to some other studies in this area. Resiliency is a kind of inter-personal source that can adjust stress and disability in crucial situations [12]. Perkins and Jones [1] found that there is a positive meaningful relationship between resiliency and mental health scores and a negative meaningful relationship between resiliency and psychological disability, depression, stress and general health problems. Various levels of resiliency are related to health criteria and psychological vulnerability by affecting self-esteem, competence, and self-strength, tolerating negative feelings, restrain and spirituality [10,11,13].

Garmezy and Masten (1991) also described that mental health has more effect on resiliency than spiritual intelligence. Because high resilient people represent higher levels of mental health, it can be concluded that preparing vital factors to increase resiliency may strengthen people in the face of mental stresses and depression. One of the protective factors is religion, ideology and spiritual intelligence [1]. Due to the lack of rich literature in the effect of spiritual intelligence on mental health and resiliency, there is a need for further researches. Therefore, it's suggested to investigate the effect of spiritual intelligence elements on resiliency in future studies.

The limits of the research include uncontrolled intermediary factors such as economic status, marital status, religious background, child bearing methods of parents, etc. It is suggested to consider these factors in future studies and study resiliency and spiritual intelligence parameters by the use of demographic criteria.

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