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## ANALYSIS ON EFFECT OF RELIGIOUS EXPERIENCE ON MENTAL HEALTH OF TEACHERS IN BABOLSAR CITY

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**Abstract. Subject:** The mental health is a status of perfect rehabilitation by which individual are able to perceive their own capabilities and adapted to stressors of normal life and shared with production in their community. The religious experience is also a type of immediate awareness of divinity position. **Objective:** The methodology of this study is of librarian and field type and research statistical population is composed of teachers in schools of Babolsar city and they were chosen and analyzed as 256 participants based on Morgan's table of sample size. Then, research hypotheses were tested by data collection using a questionnaire with reliability coefficient (88.4%). **Findings:** The results of regression test indicated that variable of religious experience (religiosity) has significantly affected physical function, lack of anxiety, lack of depression, and social practice in teachers of Babolsar city. **Conclusion:** Paying attention to spiritual dimension empowers the human and contributes to him/ her in toleration of life difficulties and prevent human from anxiety, worry, and thus their consequences e.g. suicide etc. the real spirituality is life knowledge in fact and it trains human how to preserve his/ her spiritual and mental health and guarantee natural growth of soul by enjoying active and useful social life. Surely, these trainings will be led to personal and family health and eventually health of community.

**Keywords:** Religious experience (religiosity), Mental health, Teachers.

**Introduction.** The human experience has shown in all cultures that critical human has always asked for help from a holy and divine source. Most of humans believe in God but the basic problem of the today human is to lack of spiritual plan in the life. For example, according to the conducted investigations, among every 110 American people, 7 assume their own as religious persons and they have faith in religious beliefs and related spirituality but only a half of them possesses certain plan for attendance in church and religious ceremonies while the other half has only attend in church only once or less. Probably, if religious beliefs are proper, logical, and affected by facts, they can put efficient cognitive and emotional coping techniques relating to stress and stressful emotions at disposal of individual and as a result they will prepare suitable ground for providing of mental health to the individual (Pourafkari, 1996). Mental health and life satisfaction are considered as one of the characteristics of a healthy person. Thus, world effort for preparation of appropriate platform to disease-free life is not only focused in prevention and treatment of diseases e.g. cardiac and infectious diseases etc., but in addition to physical health, it has been especially concentrated on preparation of clam environment for internal tranquility and mental health in individuals. Mental health is a science for rehabilitation, social welfare, and logical adaptation to life consequences which cover all aspects of life from home environment to school, university, workplace and the like. (Ganji, 2011) Today despite the noticeable scientific advancement existing in psychological and psychiatric fields, it is observed that some of prominent scholars have also highly emphasized in role, importance, and necessity of religion in mental health and psychotherapy and they believe that religious beliefs and trust in God causes faster treatment and curing of mental pains and complications. The religious persons accept that any event and accident occurs in their life is reflected from divine determination and such divine determination is hidden of their vision ad it is tangible in prayers. If it necessitates for toleration of adverse consequences it is acquired by the influence of prayer.

Reassurance is one of the techniques used by some of psychiatrists for treatment of mental diseases and human can learn it by practice. Performing of prayers five times round-the- clock may be the best reassurance program per se. prayer and humiliation to God reduces sense of anxiety because God-believer knows that Almighty God has mentioned in Holy Quran that '*And your Lord says: Call upon Me, I will answer you*'. Holy Quran (Ghafer 40: 60) (Butorabi, 2003). Ghazali says: All fears are removed by remembrance and glorification of God and all uneasiness is resolved. As a person reminds of God, his/ her heart is filled by consent, a heart that had been already full of fear and despair. God's grace and attention makes heart of glorifier under this aegis and human achieves determination and certainty that facilitates and makes even the internal pains and destroys obsessions and removes the idle imaginations. (Ghoreishi Rad, 2003). With respect to above-said issues, this paper aims to examine effect of religious experience (religiosity) on mental health in teachers. Initially it has been discussed about theoretical topics about religious experience and mental health in this paper and then literature which is followed by describing of methodology and research pattern by expression of findings and conclusion.

#### **Theoretical bases, hypothesis and literature**

**Theoretical bases.** The religious experience and mental health are discussed in theoretical bases.

**Religious experience (religiosity).** Herd (one of religious philosophers argue that the basic meaning of religious experience is a type of immediate awareness of divinity position. The individual is exposed to a series of material conditions in such an experience that has prepared the ground for individual's exposure to the God. (Faali, 2005).

Religious experience is something rather than conventional experiences and the content of this experience is a metaphysical organism. If God or His manifestations are the subject of experience and they are typically related to the God or God is evident as an ultimate reality in them, it will be religious experience. (Naraghi & Soltani, 2000)

Richard Swinburne proposes five religious experiences and classifies them based on way of their realization:

1- Experience of God or ultimate reality by means of tangible object that is within the domain of public experience. For instance, someone may observe God as the image of a holy personality, sunset or ocean. Image of a person or sunset is not God but the given person can feel the God within these objects.

2- Experience of God or ultimate reality by means of an inconvenient and joint tangible object: For example, Moses (PBUH) saw a bush inflamed but it did not burn upon shepherding ad it was an angle sent by God and called: O' Moses!

3- Experience of God or ultimate reality intermediated by a personal phenomenon can be described within conventional emotional language e.g. someone may experiences God in dream or by revelation.

4- Experience of God may not be described by emotional language and intermediation of personal phenomenon. Here, a person may feel or see something but it is experienced by that person similar to an indescribable object. For example, Saint Teresa (1512-158) narrates this experience as follows: "I was praying in splendid feast of Saint Peter and observed Jesus Christ beside oneself and perceived of his presence but saw him neither by head eye nor by eye of heart, but I felt he was totally near to me and I thought he was personally talking; however, this was not an illusionary visit and I could not observe him by any means."

5- Experience of God without intermediation of any object??? Under this condition, person is perceived of God by intuition and without intermediation (Faali, 2005).

William James implies that if religion is exclusively composed of a series of internal and intrinsic pure feelings, unseen-invisible- world is the subject of attachment for these feelings and emotions. This point is comprehensible psychologically how unseen object could be the origin for generation of high and transcendent emotions and feeling over the history to this level. The mystic modes create remarkable solidarity and energy in

human's spirit. If human communicated specifically with God and illumination along with revelation was revealed in him/her; and s/he found thoroughly meaningful life with consciousness of God's presence thus s/he is religious and religion- believer. William James narrates tens of reports of such modes to indicate that firstly the religious experience is the basis for religion and secondly to what extent feelings and religious experiences could affect positively in human's soul and spirit. One of the reports about religious experience that was narrated from William James is as follows: "God is totally truth for me. I often talk to Him. God guides me when I encounter a problem. Last year, something caused my anxiety for several weeks. I was primarily wondered as I encountered this conflict for the first time, but I could soon (two or three hours) hear well a part of Bible that implied: 'My mercy is enough for you.' This part of Bible was echoed in my ear as I thought about that difficulty." (Ghaemi, 1993)

**Mental health.** Mental health is a status of perfect rehabilitation thereby the individuals are able to perceive their capabilities and to be adapted to stressors of ordinary life and to share with reproduction in their society. This definition has been proposed by World Health Organization (WHO) in 2001. The mental health is a one-dimensional concept and furthermore psychological, political, economic, social and cultural factors also play important role in creation of this concept. However what it deemed as pivotal are psychological factors of mental health. Therefore, inquisition of the role of psychological variables such as creativity, self-efficacy, and technique of coping with stresses become again as relevant and efficient factors in mental health (Pirkhaefi, 2014). Goldstein assumes mental health as the balance between members and environment in achieving of self-actualization. Chahen also describes mental health as a status of psychological maturity including the maximum effectiveness and satisfaction derived from personal and social diversity which comprises of positive emotions and feedbacks toward self and others.

The Canadian Association of Mental Health has defined mental health in three parts.

- 1- The feedbacks relating to self, including a) Dominance over one's emotions; b) Awareness of one's weaknesses; and c) Satisfaction with one's happiness;
- 2- The feedback relating to the others, including a) Interest in long-time and intimate friendships; b) Sense of belonging to a group; and c) Sense of responsibility to human and physical environment;
- 3- Feedbacks relating to life, including a) Assuming of tasks; b) Eager for development, facilities, and interests of oneself; c) Enthusiasm for good performance; and d) Ability to make personal decisions

Some groups have defined mental health as relatively well-adaptation, being away from mental conflicts and diseases, balance among individual and environment to achieve self-actualization, potential for harmonic and matched relationship with others, change and modification in personal and social environments and resolving of conflicts and interests logically. Also some other researchers have defined mental health in possessing spirit and potential for cooperation with others, intimacy and expression of feelings in interpersonal relations, self-awareness and of surrounding world, and adaptation to life problems, wittiness, and sense of emotional security and realistic impression of one's talents (Salarifar et al., 2010).

Holy Quran take holistic look at concept of mental health and it has addressed all existent dimensions of human including physical, spiritual psychological and social dimensions etc. Therefore, according to Quranic perspective, the mental health denotes:

Individual's benefitting from favorable physical, psychological, social and spiritual status so that the individuals are led to satisfactory and prosperous life.

From Quranic point of view, objectives of mental health include:

- 1- Prevention from occurrence of mental impairments and spiritual and mental disorders;
- 2- Treatment of mental impairments caused by ideological and moral complications in person;
- 3- Care and self-control is the most excellent goal of mental health based on Quranic view and transcendental growth and proximity to God (Kaviani, 2014).

With respect to aforementioned issues, this study mainly aims to analyze effect of religious experience on mental health among teachers of Babolsar city and research hypotheses are expressed as follows:

- ◆ Religious experience affects physical performance in teachers of Babolsar city.
- ◆ Religious experience affects lack of anxiety in teachers of Babolsar city.
- ◆ Religious experience affects lack of depression in teachers of Babolsar city.
- ◆ Religious experience affects social performance in teachers of Babolsar city.

**Literature.** Etesaminia et al. (2015) carried out a study in order to identify relationship among religious orientation and moral change and mental health. To this end, a sample was selected including 384 participants by means of multistage random sampling technique among high school students in Qom city during academic year 2012-13. Data were collected and analyzed by questionnaire and using T-tests, correlation, and regression. The results showed that mental health had positive and significant relationship with religious orientation and moral change. Likewise, religious orientation, gender, and education grade might predict mental health. Findings indicate that mental health may be further provided for members of community by improvement in religious orientation and encouragement for education.

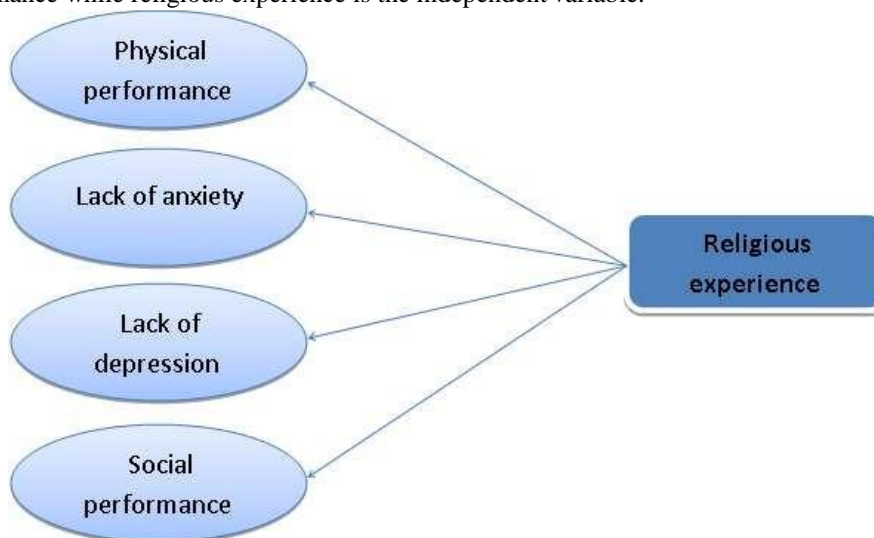
In a survey for determination of relationship between religious beliefs and mental health among high school students in Region 4 of educational organization in Isfahan, Benisi and Erfan (2014) showed that as individuals possessed more religious beliefs, the physical and depression symptoms were less observed in them. However no significant relationship was seen among anxiety and social functions and religious beliefs. In other words, as individual possess more religious beliefs, lesser physical and depression symptoms are observed in them and these symptoms may be increased as they lack religious beliefs. In their investigation, Riahi et al. (2008) tended to describe and interpret

relationship among religion and mental health. For this purpose, they have examined the relationship among level of religiosity, type of religious orientation, rate of perceived social support, and level of optimism with level of mental health by employing social-psychological theories. The regressive analysis of data suggested that variables of rate of social support, level of optimism, and internal orientation (directly and significantly) and external religious orientation and level of religiosity (indirectly by effect on social support and optimism) have affected mental health in students, respectively. The findings suggest that external religious orientation is considered as more effective factor for improvement and increase in mental health.

**Methodology. Research method.** The present descriptive research is of surveying type and it is classified in applied studies in terms of objective. Likewise, with respect to subject of study and by considering type of methodology, questionnaire was the foremost tool for data collection and testing of questionnaire and the needed data and information was extracted to analyze questions through collection of field data from testees by employing of questionnaire tool. The standardized questionnaire was used for variable of religious experience for which validity was confirmed by the expert and Goldberg standard questionnaire was utilized for variable of mental health.

**Population and sample.** The statistical population of present research is composed of all teachers of high schools (Grades 1&2) in Babolsar city including 670 teachers out of who 256 participants were chosen randomly based on Morgan's table of sample size.

**Research model.** The study of Ajdarifard et al. (2010) has been utilized in current research. Mental health is a dependent variable in this study that covers dimensions of physical performance, lack of anxiety, lack of depression, and social performance while religious experience is the independent variable.



**Diagram 1:** The conceptual model (Source: Ajdarifard et al. (2010))

**Validity and reliability.** Face validity (the procedure of extraction of elements of measured variables of the thematic literature) and construct validity (localization of it by benefitting from comments of experts and also preliminary sample) have been utilized to validate tools of questionnaire. Accordingly, two features of content validity have been assessed for measurement scale by qualitative judgment. Namely, questionnaire of current research has content validity because elements of measured variables have been extracted from research thematic literature and also constructs of questionnaire have been perceived by members of statistical sample. There are several and various techniques to determine reliability of measurement tool one of which is measurement of their internal consistency. The internal consistency is a measurement tool that may be measured by Cronbach alpha coefficient. This is a method that is used in most of studies. Given that Cronbach alpha coefficient was derived 0.884 (higher than 70%) for all variables therefore it can be concluded that reliability of questionnaire is at reasonable level in the present research.

**Data analysis method.** Inferential technique has been adapted for data analysis. To this end, SPSS (v.16) software was used in this paper and the tests which have been employed for this purpose included Cronbach alpha coefficient to determine reliability, Kolmogorov- Smirnov test to specify normality of data, and regressive test to examine relationship among dependent and independent variables. In fact, the regressive analysis is a statistical technique for review and modeling of relationship between variables. The regressive analysis is used when we intend to predict values of a variable by means of quantities of other variables. In this case, the variable we use it for prediction of quantity of other variable is called independent variable. The variable we also predict it is called dependent variable.

## Findings and analysis

### Kolmogorov-Smirnov test

**Table 4-1-** Kolmogorov-Smirnov test

One sample Kolmogorov-Smirnov test				
	Physical performance	Lack of anxiety	Lack of depression	Social performance
Quantity	256	256	256	256
Normal parameters	4.0592	3.8030	3.6345	3.9269
	0.44963	0.47239	0.56148	0.42416
Maximum limit of difference	0.112	0.143	0.139	0.098
	0.092	0.143	0.111	0.075
Kolmogorov-Smirnov Z	-0.112	-0.133	-0.139	-0.98
Significance level sig	1.788	2.288	2.222	1.569
	0.197	0.472	0.107	0.229

Whereas the value of significance is ( $\text{sig} > 0.05$ ), thus variables are distributed normally and regressive test can be used for determination of effect and relationship among variables.

### The regressive test for analysis of hypotheses

In order to determine relationship among variable of religious experience and dependent variables of mental health (physical performance, lack of anxiety, lack of depression, and social performance) 4 groups of hypotheses were presented and tested.

**Table 4-2-** Regressive test among variable of religious experience and dependent variables of mental health (physical performance, lack of anxiety, lack of depression, and social performance)

Dependent variables	Independent variable = Religious experience								
	B	Beta	t-statistic	Sig	F-statistic	Correlation	Determination coefficient	Sig	Durbin-Watson
Physical performance	3.124	-	20.031	0.000					1.595
	0.261	0.356	6.081	0.000	36.981	0.356	0.127	0.000	
Lack of anxiety	2.603	-	16.486	0.000					1.549
	0.335	0.436	7.714	0.000	59.512	0.436	0.190	0.000	
Lack of depression	2.637	-	13.279	0.000					1.536
	0.279	0.305	5.099	0.000	26.000	0.305	0.093	0.000	
Social performance	3.672	-	23.444	0.000					1.783
	0.071	0.103	1.648	0.001	2.716	0.103	0.011	0.001	

With respect to above-said table, the value of significance (sig) has been obtained in ANOVA table that is smaller than 0.05. This number shows that the given model is a good predictor for independent and dependent variables. Similarly, significance value has been also derived smaller than 0.05 for all of independent variables in regressive coefficients table and this indicates that variable of religious experience is statistically valid and also religious experience has significant effect on physical performance, lack of anxiety, lack of depression, and social performance in teachers of Babolsar city. Similarly, the given Durbin-Watson number is an appropriate value for the variables (1.5- 2.5).

**Conclusion and suggestions.** The results of study indicated that religious experience has affected physical performance, lack of anxiety, lack of depression, and social performance. Performance of prayers, glorification and remembrance of God, and dealing with spiritual activities are manifested by emotional concept and color in relation to centers of thalamus and hypothalamus glands through brain cortical centers and their mutual relationship. On the hand, these centers are related to hypophysis gland where this gland regulates activity in other glands. Likewise, dealing with religious activities positively affects defensive mechanism of body e.g. antibodies and increases body resistance against physical chronic disease such as cancer and mental chronic diseases e.g. schizophrenia. With respect to effect of religious experience on elements of mental health in the conducted tests, this point should be mentioned in analysis of significance of relationship among religious experience and mental health that paying attention to God and asking for help of everlasting divine power is assumed as the best means to tranquility of soul and removal of concern and depression for God-believers. Whereas the science fails to treat anxiety, presentiment, and depression, Faith to God can cure it and it makes depressed and anxious soul of patient as confident and calm. All psychological scientists confess that faith to God plays important role in treatment of spiritual diseases and they have found that prayers and having solid faith to religion alleviates concern, worry, excitation and fear as the causes for most of our uneasiness and it is natural that paying attention to the God as eternal power and His power which is superior than all and He is with us as

omnipresent and ubiquitous all the time and never separates from us so that by such justification human's heart is

reassured and does not feel sense of destitution and finds God as supporter. The sense of mental tranquility and reassurance and comfort is created by religious issues because the person loves it consciously and purely. It has been also narrated about the religious figures that they achieved tranquility by performing of prayers, recital of Quran, and execution of other religious rites; for example, it was narrated the surgeon could extract arrow of leg of Imam Ali (PBUH) when performing of prayer. Also Holy Prophet (PBUH) told Balal (his Muezzin): "O' Balal call the prayer and reach us to tranquility." Paying attention to spiritual dimension gives power to human and helps him/her to bear life difficulties and inhibits from anxiety and concern and as a result the related consequences e.g. suicide etc. In fact real spirituality is the science of living and trains human how to preserve his/her spiritual and mental health and guarantee natural growth of soul by active and useful social life. Doubtlessly, these trainings will cause individual and family health and finally health of community. With respect to research findings, it is suggested to teachers and other persons to improve their own physical capabilities by resorting to Imams, reading of pilgrim's breviary, and performance of prayer thereby they could resist against stress and diseases. Similarly, they can reduce their emotional stresses and tensions by attendance in religious and worshipping ceremonies.

**For future studies.** In addition giving answers to the questions, any study prepares the ground for expression of newer questions. In this section, it is referred to some cases that may be assumed as bases for other researches:

- It is suggested to examine effect of religious experience on other variables such as religious training and academic achievement etc.
- It is suggested to researchers in this field to analyze and identify other effective factors on mental health that may be less addressed by various techniques to recognize different dimensions of the factors further for national scientific and executive community and also to make policy in this field more accurately.
- The schools in Babolsar city were explored in this study therefore it is suggested to study organizations with more diversification.

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