

Relationship of Islamic Lifestyle with Depression and Anxiety among the Students of Qom University of Medical Sciences in 2018

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Abstract

Background and Objectives: Lifestyle modifications pertain to all aspects of life, including physical, mental, and psychological domains. Therefore, the achievement of any kind of health, especially mental health, has come into special focus. The current study aimed to investigate the Islamic lifestyle and its relationship with depression and anxiety among the students of Qom University of Medical Sciences.

Methods: This descriptive cross-sectional study was conducted on 500 students of Qom University of Medical Sciences. They were selected by cluster random sampling among all students of Qom University of Medical Sciences. To assess the relationship of Islamic lifestyle with depression and anxiety among students, the following instruments were utilized: Kaviani Islamic Lifestyle Survey Test- short form (ILST), Beck Anxiety Inventory, and Goldberg Depression Questionnaire. The data were analyzed in SPSS software using the Pearson correlation coefficient and linear regression test.

Results: Based on the results of the present study demonstrated that the Pearson correlation coefficient between lifestyle and depression was obtained at $R=-0.15$; moreover, this value was calculated at $R=-0.12$ for lifestyle and anxiety. Moreover, people with a better lifestyle experience less anxiety and depression and vice versa. Furthermore, anxiety, and depression were not significantly correlated with such demographic variables as age, grade point average, gender, place of residence, and marital status, as compared to the Islamic lifestyle.

Conclusion: As evidenced by the obtained results, anxiety and depression can predict people's lifestyle. Therefore, it is recommended that standard educational programs focus on the Islamic lifestyle in order to promote better health in the students.

Keywords: Anxiety, Depression, Islamic Lifestyle, Students.

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Introduction

Lifestyle reflects peoples' specific or distinct way of life as they come under the influence of values, institutions, and laws (1). In other words, lifestyle encompasses all the routine activities of daily life that a person is used to doing. Self-relationship (observance of the principles of nutrition and mental states), as well as the relationship with God (devotion) and society (positive interactions with others and the environment),

are properly defined in a healthy lifestyle (2).

Today, one of the priorities of every society is the devotion of special attention to physical, mental, social, and cultural health, as well as the provision of appropriate context for the realization of a dynamic and healthy life that guarantees people's health. In this regard, the prevention of emotional disorders, anxiety, and depression is indispensable for attaining this worthwhile goal. Apart from personal negative

impacts on individuals, especially young people, these disorders present numerous social issues to communities. Therefore, the recognition, diagnosis, treatment, and prevention of these disorders assume critical importance.

Among people from different walks of life, university students as the spiritual and human capital of every society shape the destiny of that community (3). When people adopt an Islamic lifestyle, they willingly accept religion and perform appropriate religious behaviors. Since religious behaviors are defined on the basis of one's health, they improve physical and mental health. Islamic lifestyle which is a comprehensive way of life recommended in religious teachings cannot be unrelated to emotions and cognitions (4).

The author of the book "Islamic lifestyle and its testing instrument" defines lifestyle as: "a relatively fixed way in which a person pursues his/her goals" (5). Islamic lifestyle theory has a direct relationship with the following concepts: perfect human being, healthy human being, normal and abnormal criteria, as well as prevention and treatment (6). Various studies have been conducted on lifestyle and mental health, and they were significantly correlated in the majority of these studies.

For instance, Ehyakonandeh et al. in Shiraz (7) pointed to a significant relationship between lifestyle and depression among students. Therefore, concentration on physical, mental, social, and cultural health, as well as the provision of appropriate context for the realization of a dynamic and healthy life, guarantees peoples' health in the coming years. In this regard, emotional disorders, such as anxiety and depression, need to be prevented to achieve this valuable objective.

In addition to personal negative impacts on young people and students, these disorders pose numerous social problems for communities; therefore, it is of utmost importance to diagnose, treat, and prevent these mental illnesses. The lifestyle and attitude of medical students as future healthcare providers are of great significance for the future of themselves and society.

In light of the aforementioned issues, the present study was designed to investigate

different aspects of lifestyle among the students of Qom University of Medical Sciences and their relationship with depression and anxiety. It is recommended that future studies assess the relationship between Islamic lifestyle and other characteristics, such as spiritual health, life expectancy, happiness, adaptability, welfare, social and personal growth, and life satisfaction. This would lead to the detection of existing challenges and the implementation of effective measures to modify and enhance people's lifestyle.

Methods

The present study was extracted from a research project approved by the Ethics Committee of Qom University of Medical Sciences (1397.016. IR.MUQ.REC) with the research code 96905. The statistical population of this descriptive cross-sectional study consisted of all male and female students of Qom University of Medical Sciences, among whom 500 cases were selected by cluster random sampling in 2018.

To investigate the relationship of Islamic lifestyle with depression and anxiety among students, the following instruments were used: Kaviani Islamic Lifestyle Survey Test- short form (ILST), Beck Anxiety Inventory, and Goldberg Depression Questionnaire. Data were analyzed in SPSS software using the Pearson correlation coefficient and linear regression test. Students were assured of the confidentiality of their responses.

Islamic Lifestyle Survey

This questionnaire which was developed by Kaviani consists of 75 items rated on a 4-point Likert scale ranging from "very low" to "very high". This scale contains 10 dimensions: social (12 items), prayer (6 items), beliefs (6 items), ethics (11 items), financial (12 items), family (8 items), health (7 items), thinking and knowledge (5 items), security-defense (4 items), and Chronology (5 items).

The reliability of the total questionnaire was obtained at 71%. The results of factor analysis have pointed to the appropriate validity and factor structure of this questionnaire. Furthermore, the concurrent validity correlation



coefficient of this scale with religious orientation was reported as 0.64% (13), and its overall reliability was calculated at 78% (13). In the present study, the Cronbach's alpha coefficient of this test was obtained at 66%.

Beck Anxiety Inventory

This 21-item questionnaire which was designed by Beck measures the severity of anxiety. The items are scored on a 4-point Likert scale ranging from 0 (not at all) to 3 (severely). The score range is 0–63 with higher total scores indicating more severe anxiety symptoms. This scale has achieved high internal consistency with an inter-item correlation of 30-70%.

Determining the reliability of the instrument: the validity and reliability of the Beck Anxiety Questionnaire were examined in a study conducted by Kaviani and Mousavi (2008). The results indicated that this scale is in good condition in terms of validity ($r=72\%$), reliability ($r=83\%$), and internal consistency ($\alpha=0.92\%$) (8).

Goldberg Depression Questionnaire

This 18-item questionnaire is used to measure the risk of developing psychiatric disorders. The items are rated on a 6-point Likert scale ranging from 0 (not at all) to 5 (very much). In a study performed by Magnavita (2007), Cronbach's alpha coefficient for the Goldberg Depression Scale was 0.78 pointing to the good reliability of the instrument. Moreover, the concurrent validity of this questionnaire was also confirmed when compared to the Goldberg Anxiety Scale.

There are other well-known instruments for the assessment of depression; nonetheless, the Goldberg Depression Inventory (GDS) is very

effective in rapid screening for this disorder (9). Participation was voluntary, and the subjects were assured of the confidentiality of their responses.

Result

The majority of students (68%) were female within the age range of 20-26 (59%). In addition, most of them (76%) were non-native and resided in dormitories (Table 1). Most students reportedly had mild anxiety (45.4%) and mild to moderate depression (33.4%) (Table 2). The highest score among the different domains of the Islamic lifestyle was related to the financial domain with an average of 33.97 and a standard deviation of 3.63 (Table 3). The Pearson correlation coefficient between lifestyle and depression was obtained at $R=-0.15$; moreover, this value was calculated at $R = -0.12$ for lifestyle and anxiety (Table 4).

The results of the present study also demonstrated that the variables of anxiety and depression could predict lifestyle. Given that the coefficient of the forecast variable is negative, the average lifestyle score decreases by 0.12 and 0.14, respectively, with each unit increase in anxiety and depression scores. Due to the fact that none of the demographic variables, such as age, grade point average, gender, place of residence, and marital status showed a statistically significant relationship

Table 1. Description of students' demographic information

Variable	Frequency	Frequency%
Age	> 20	115
	20-26	295
	>26	90
Gender	Female	340
	Male	160
Nativity	Native	120
	Non-native	380

Table 2. Distribution of depression and anxiety variables among students

Variable	Frequency	Frequency%
Anxiety	Minimum level of anxiety (0-7)	117
	Mild (8-15)	227
	Moderate (16-25)	123
	Severe (26-63)	34
	Healthy (0-9)	102
Depression	The likelihood of developing depression (10-17)	85
	Borderline Depression (8- 21)	54
	Mild to moderate depression (22-35)	167
	Moderate to severe depression (36-53)	78
	Severe depression (≥ 54)	14

Table 3. Mean and standard deviation of Islamic lifestyle scores among students by different areas

Islamic lifestyle	Indicators	Mean	Standard deviation
	Social	27.48	2.36
	Beliefs	29.42	3.54
	Prayer	26.98	2.45
	Ethics	19.32	2.87
	Financial	33.97	3.63
	Family	22.65	2.89
	Health	18.13	1.98
	Thinking and knowledge	29.28	3.76
	Security-Defense	16.84	3.92
	Chronology	10.32	1.14
	Total	234.39	28.54

Table 4. Pearson correlation

Variable	Lifestyle	Depression	Anxiety
Lifestyle	1	-	-
Depression	-0.15	1	-
Anxiety	-0.12	0.14	1

with the dependent variable, they were excluded from the model (Table 5).

Table 5. Relationship of lifestyle with depression and anxiety using regression

Variables	B	β	t-statistics	P-value
Constant value	103.35	-	16.443	0.000
Anxiety	-0.12	-0.163	-2.49	0.057
Depression	-0.14	-0.052	-1.69	0.1

A p-value less than 0.05 was considered statistically significant.

Discussion

The present study aimed to investigate the effect of the Islamic lifestyle on depression and anxiety among the students of Qom University of Medical Sciences. This study was conducted in Qom, which is a holy city with many religious places, including the holy shrine of Hazrat Masoumeh. Residing in such a spiritual atmosphere and adopting an Islamic lifestyle bring peace of mind into everyday life and, consequently, reduce many psychological problems, such as anxiety and depression.

The results of the current study suggested that people with a better lifestyle experience less anxiety and depression and vice versa. In this regard, anxiety and depression can be reduced by religious beliefs and practices, such as prayers, pilgrimage, and Islamic ethics, including positive social and family interactions, paying attention to physical and mental health, cherishing thinking and knowledge, and trusting God with their finances.

Consistent with the present study, lifestyle

had a significant relationship with depression among students in a study conducted by Ehyakonandeh et al. in Shiraz (7). In a similar vein, consistent with the results of the present study, in their study which was performed in Birjand, Salmabadi et al. (10) found a significant relationship between lifestyle and mental health among students.

Furthermore, students' psychological well-being was significantly correlated with resilience, spirituality, and well-being in a study carried out by Momeni et al. in Kermanshah (11). The results of the mentioned study confirmed the findings of the present study regarding the financial domain of lifestyle and its relationship with some components of mental health, such as the reduction of depression and anxiety. In an Islamic lifestyle, people believe that God is the superior power in this world and the hereafter; therefore, they pursue their goals with reliance on God and ask him for well-being devoid of any fear and anxiety.

In another study performed by Asadi et al. in Babol (12), happiness was negatively correlated with worldliness, anti-intellectualism, sinfulness, altruism, hedonism, and lack of effort. Moreover, in agreement with the present study, there was a positive and significant correlation between happiness and such variables as intrinsic, devotional, and social characteristics. In a study performed by Motlaq et al., the highest score of students' lifestyle was related to mental development. More than half of the students believed that connection with a superior power brings positive changes, purpose, and meaning to their lives (13).

In the present study, the sharp reduction occurred in psychological problems was owing

to the spiritual effects of an Islamic lifestyle. Along the same lines, in a study conducted by Mahboubi, spirituality was reported to exert a significant effect on the physical and mental health of people. Therefore, it can be of great help for the reduction of mental health problems (14). The present study also confirms this important finding.

One of the notable limitations of the present study is the noncooperation of some students and lack of access to final year students. They stated such reasons as time constraints and impatience for their non-cooperation. Therefore, it is suggested that future studies focus on students' impatience and assess its relationship with spirituality in an Islamic lifestyle. In general, the findings of the current study highlighted the critical need for intervention programs which devote adequate attention to the lifestyle of young people, especially students due to their great contribution to the present and future of society.

In this regard, students can get acquainted with various aspects of the Islamic lifestyle and mental health by implementing support and cultural systems, educational programs, and counseling. Consequently, they can tackle such mental health problems as depression and anxiety with the help of Islamic lifestyle merits, such as awareness-raising and bringing meaning and purpose to life.

Conclusion

The results of the present study indicated that regardless of such criteria as age, gender, marital status, and place of residence, peoples' lifestyle can predict such mental states as anxiety and depression. In light of the aforementioned issues, it can be concluded that Islam, especially the Shiite school, which is in harmony with human nature, helps people to live a healthy life devoid of any tension and psychological concerns. In general, a life that is based on Islamic teachings ensures inner peace and happiness away from anxiety and depression. The issues noted prove the need for lifestyle modifications and adaptation of an Islamic lifestyle.

Conflict of interest

The authors declare that they have no conflict of interest regarding the publication of the present article.

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References

1. Hassan Doust Farrokhani H, Rezaei O, Hassan Doust Farrokhani D. A study of the ideal pattern of lifestyle from the perspective of the school of Islam. *Marifat* 2013; 23(186):23-35. (In Persian) [Link](#)
2. Sharifi A, Lotfi M. Relationship between Islamic lifestyle and good life in the Holy Quran. *Quranic Knowl* 2014; 4(14):81-100. (In Persian) [Link](#)
3. Goudarzi L, Nazari A, Rajabi Vasokolaee G, Salimi M, Raadabadi M. The lifestyle of allied medical students studying at Tehran University of Medical Sciences in 2012. *J Payavard Salamat* 2014;8(4):294-304. (In Persian) [Link](#)
4. Sam Aram A, Pourzitani S, Ebrahim Najafabadi A. Fundamentals of methodology in spiritual health. *Soc Welfare Res* 2012;1(2):9-38. (In Persian) [Link](#)
5. Kaviani M. Islamic lifestyle and its testing instrument. Qom: Research Institute of Hawzeh and University; 2012. (In Persian) [Link](#)
6. Abolghasemi MJ. Semantics of spiritual health and its religious scope. *Med Ethics J* 2012;6(20):45-68. (In Persian) [Link](#)
7. Ehyakonandeh M, Shaikholeslami R. The role of identity styles and meaning of life on the mental health of university female students. *J Appl Psychol* 2014;8(3):117-37. [Link](#)
8. Kaviani H, Mousavi AS. Psychometric properties of the Persian version of Beck Anxiety Inventory (BAI). *Tehran Univ Med J* 2008;66(2):136-40. [Link](#)
9. Goldberg DP, Gater R, Sartorius N, Ustun TB, Piccinelli M, Gureje O, et al. The validity of two versions of the GHQ in the WHO study of mental illness in general health care. *Psychol Med* 1997;27(1):191-7. [Link](#)
10. Salmabadi M, Farahbakhsh K, Zolfaghari S, Sadeghi M. Evaluation of the relationship between Islamic lifestyle and students' mental health at Birjand University. *J Relig Health* 2015;3(1):1-10. (In Persian) [Link](#)
11. Momeni K, Karami J, Rad AS. The relationship between spirituality, resiliency and coping strategies with students' psychological well-being in Razi University of Kermanshah. *J Kermanshah Univ Med Sci* 2013;16(8):626-34. [Link](#)
12. Asadi M, Barati MB, NaghaviKoljahi M. The relationship between dimensions of Islamic lifestyle and happiness among the students of Kharazmi University. *Islam Health J* 2015;2(1):33-8. (In Persian) [Link](#)
13. Mazloomi-Mahmoodabad S. Study of health-promotion behaviors among university of medical science students. *Zahedan J Res Med Sci* 2011;13(4):29-34. [Link](#)
14. Mahbobi M, Etemadi M, Khorasani E, Ghiasi M. The relationship between spiritual health and social anxiety in chemical veterans. *J Mil Med* 2012;14(3):186-91. [Link](#)