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The Correlation between Happiness and Spiritual Health with Academic Self-Efficacy among Medical Sciences Students

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Abstract

Background: Successful accomplishment of a task or an assignment needs academic self-efficacy. This study was designed to examine the relationship between happiness and spiritual well-being with academic self-efficacy among the students of Shahrud University of Medical Sciences.

Methods: We randomly selected 500 students in this cross-sectional study by employing spiritual well-being, happiness, and academic self-efficacy questionnaires in 2018. We applied the SPSS 16 software to analyze the collected data using ANOVA, Chi-square, and Pearson Correlation tests. The significance level was considered 0.05 in all tests

Results: The mean scores obtained for spiritual health and happiness were at a moderate level, accounting for 89.56±16.11 and 39.95±12.52, respectively, while the academic self-efficacy mean score was assessed to be high and equal to 109.32±18.44. We found a significant relationship between spiritual well-being and happiness with academic self-efficacy (P=0.001). The variables of happiness and gender appeared to be significant in the logistic regression final model. According to the results, women had a potential to show higher self-efficacy 1.8 times more than men. In addition, the rate of self-efficacy increased by 5% per every 1 score increase in happiness (OR=1.05). Conclusions: Due to the fact most of students showed a moderate level of spiritual health and happiness and over a third of students had a

Conclusions: Due to the fact most of students showed a moderate level of spiritual health and happiness and over a third of students had a moderate level of academic self-efficacy, we need to further focus on spiritual health and happiness. Obviously, improving these two factors will be a key in improving the academic self-efficacy.

Keywords: Spiritual wellbeing, Academic self-efficacy, Happiness, Life satisfaction, Self-Efficacy.

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Introduction

The attention of professionals in the healthcare and medical area has been drawn to the significance of spirituality and spiritual well-being in humans as well as their effects on medical care. Spirituality has been the focus of attention in recent studies as an aspect of health. ¹⁻³ Spirituality has been recognized as an effective factor in human development by WHO due to the physical, psychological, and social dimensions of human existence. ^{3,4} The definition of spiritual health explains it as the sense of communicating with others, owning meaning and goal in life, and communicating with a transcendental power. ^{3,5-7} In other words, spiritual health can be

described as the ability to show a sense of acceptance and positive emotions to others, adherence to ethics, and positive interaction with a superior and transcendent power, others, and oneself. All of these can be generated through a personal dynamic, harmonic, cognitive, and emotional process. Spiritual health includes two religious health and existential health dimensions. Religious health reflects a relationship with God or the infinite power, while existential health encompasses the relationships with one's self, others, and the environment. We can understand these two as the ability of uniting different aspects of being and having various choices. 1,11,12 Happiness refers to two concepts of joy, meaning to have positive emotions about the present time, and satisfaction with life. Happiness, as the most fundamental man's psychological need, can affect the people's mental health.

The effect of spiritual health on happiness and academic self-efficacy of students has been demonstrated in a number of studies. ^{14,15} Happiness is introduced as a source of energy, vitality, movement, dynamism, and a shield by evidence, which can guarantee the people's protection against stress and ensure their physical and mental health. According to Diner, happiness involves a person's assessment of himself and his life, covering things such as life satisfaction, excitement, and positive mood as well as the absence of depression and anxiety. ¹⁶ It can be also seen as a kind of judgment not forced upon the individual from outside; it is rather an inner state influenced by positive emotions, ¹⁷ and a personality variable that improves the individual's quality of work , which is effective in the process of education and self-efficacy. ¹⁸

By definition, self-efficacy is to perceive a certain scope of abilities to do necessary actions aimed at achieving valuable goals. ¹⁹ Academic self-efficacy is a person's beliefs in his or her ability to successfully complete a task or an assignment. ²⁰ It seems to be an influential factor in an individual's the success in school and university. ²¹ Some studies conducted on universities students showed the presence of a moderate level of spiritual health, ^{1,3,4,10,12,22,23} moderate levels of happiness, ^{24,25} and moderate scores of academic self-efficacy among the students. ^{15,26}

Necessary interventions to improve the knowledge of Medical Sciences students and the levels of their spiritual health, happiness and academic self-efficacy can promote the quality of their services. This study was designed to determine the correlation of happiness and spiritual well-being with academic self-efficacy among students of Shahrud University of Medical Sciences due to the importance of this issue.

Materials and Methods

Using a multistage random sampling method in this cross-sectional study conducted in 2018, we selected 500 students from different disciplines of medical sciences. The number of students studying at each faculty was considered as a base criterion for sampling. The total number of students in 4 faculties accounted for 1750 students, including Nursing and Midwifery, Public Health, Medicine, and Paramedics schools. Of all, we randomly selected 30% based on the students' ID numbers. The Ethics Committee of Shahroud University of Medical Sciences approved the design and methods of this study (Code: IR.SHMU.REC.1397.020).

The completed questionnaires included 530, 30 of which were incomplete and were excluded from the analysis. The research main variables were age, sex, level of education, semester, marital status, residency, family income and life status of the parents. We used the Paloutzian, Ellison's Spiritual Health Questionnaire, Oxford Happiness Questionnaire, and Owen & Froman's Academic Self-Efficacy Questionnaire in this research.

The Spiritual Health Questionnaire includes 20 items, 10 of which assess the religious health and the other 10 measure the individual's existential health. The total score of spiritual health is obtained from the sum of these two scores, ranging from 20 to 120. The students were divided into three groups according to on this scale: low spiritual health (scores 20-40), moderate spiritual health (41-99), and high spiritual health (100-120). The reliability of the Persian version of questionnaire was reported as 0.82 using the Cronbach's alpha.

The Oxford Happiness Questionnaire has 29 items with a total score of ranging from 0 to 87. A higher score suggests a higher level of happiness. The questionnaire covers five dimensions of life satisfaction (items 1-8), self-esteem (items 9-15), subject's well-being (items 16-20), satisfaction (items 21-24), and positive mood (items 25-29). Using Cronbach's alpha, the reliability of the Persian version of the scale was $0.93.^{31,32}$ calculated The academic self-efficacy questionnaire33 includes 33 items, which options are scored from very low to very high. The scores of 32-52 indicate a low academic self-efficacy, while the scores of 53-105 suggest a moderate level of academic self-efficacy, and finally, the scores of 106 and higher show a high level of academic self-efficacy. The internal consistency of the whole test was calculated as 0.91 in the Iranian sample with a Cronbach's alpha equal to 0.90 for female students and 0.91 for male students. 14

The students filled out the questionnaires anonymously as the participation in the study was voluntary.

The collected data were analyzed using SPSS 16 software with employing ANOVA, Chi-square, and Pearson correlation coefficient. The significance level was considered 0.05in all the tests

Results

The mean scores of spiritual health and happiness were 89.56±16.11 and 39.95±12.52, respectively, both of which are

moderate. The mean score of academic self-efficacy was also calculated as 109.32 ± 18.44 . The mean scores of life satisfaction, self-esteem, subject's well-being, satisfaction, and the positive mood were 10.21 ± 4.01 , 9.31 ± 3.41 , 6.91 ± 2.60 , 5.90 ± 2.11 , and 7.61 ± 2.48 , respectively.

We divided the final model into two groups in this study due to the low number of people with low academic self-efficacy: low and moderate academic self-efficacy (N=182) and high self-efficacy (N=318). Of all the participants, 138 (27.6%) students had a high spiritual health and 359 (71.8%) were at a moderate level, and 3 (0.6%) had a low level. In addition, 318 (63.6%) students had a high level of academic self-efficacy and 178 (35.6%) were at a moderate level with 4 (0.8%) at a low level. The mean scores of some variables are shown in Table 1.

Table 1. Mean scores of some variables among participants of the study

Variable	Mean	SD	Minimum	Maximum
Age	22.06	3.23	18	54
Semester	5.36	3.33	1	14
Happiness	39.95	12.52	0	86
 Life satisfaction 	10.21	4.01	0	24
 Self-esteem 	9.31	3.41	0	21
 Subject wellbeing 	6.91	2.60	0	15
 satisfaction 	5.90	2.11	0	12
 Positive Mood 	7.61	2.48	0	15
Spiritual health	89.56	16.11	35	120
Academic self-efficacy	109.32	18.43	32	160

No significant relationship was found between spiritual health and age, semester, gender, educational level, marital status, native or non-native status, student's semester, year of study, economic status of student's family, student's economic activity, and the parental life status (Table 2).

According to the Chi-square test, academic self-efficacy has a significant relationship with gender. However, there was no significant correlation between age, semester, educational level, marital status, native or non-native status, student's economic status, and the parental life status (Table 3).

As seen in Table 4, the t-test identified no significant differences between the mean scores of spiritual health and native or non-native status, life satisfaction, self-esteem, the subject's well-being, satisfaction and positive mood, happiness, and academic self-efficacy (P=0.001). However, according to the t-test results, a significant difference was seen between the mean scores of academic self-efficacy with life satisfaction, self-esteem, subject's well-being, satisfaction and positive mood, happiness, spiritual well-being, gender, and the year of education (P=0.001).

A significant relationship was found between spiritual well-being and happiness with academic self-efficacy based on the Pearson correlation coefficient (P=0.001). The Pearson correlation coefficient was calculated as 0.584 between happiness and spiritual well-being; this value was equal to 0.29 based on the relationship between spiritual well-being and academic self-efficacy and 0.325 regarding the correlation between academic self-efficacy and happiness.

	Sp	X ²				
Variable	High	Moderate	Moderate Low		P.V	
Gender						
- Male	51(24.6)	155(74.9)	1(0.5)	1.67	0.434	
- Female	87(29.7)	204(69.6)	2(0.7)			
Educational level						
 Associate degree 	3(33.3)	6(66.7)	0(0)			
 Bachelor's degree 	73(25.9)	207(73.4)	2(0.7)	3.05	0.931	
- Medical doctor	53(29.6)	137(69.9)	1(0.5)			
 Master of science and over 	4(30.8)	9(69.2)	0(0)			
Marital status						
- Single	119(26.4)	328(72.9)	3(0.7)	3.25	0.197	
- Married	19(38)	31(62)	0(0)			
Residence status						
- Native	25(38.5)	40(61.5)	0(0)	4.74	0.094	
 Non-native 	113(26)	319(73.3)	3(0.7)			
Parental residence						
- City	125(27.6)	325(71.7)	3(0.7)	0.313	0.855	
- Village	13(27.7)	34(73.3)	0(0)			
Year of education						
 1st year (semester 1 or 2) 	36(29.5)	86(70.5)	0(0)	2.00	0.440	
- 2nd year (semester 3 or 4)	30(24.2)	92(74.2)	2(1.6)	3.90	0.419	
 3rd year and higher (semester 4, 5 or higher) 	72(28.3)	181(71.3)	1(0.4)			
Economic status of the family						
- ≤50\$	5(27.8)	13(72.2)	0(0)			
- 50-100\$	4(22.2)	14(77.8)	0(0)	2.75	0.840	
- 100-150\$	3(14.3)	18(85.7)	0(0)			
- ≥150\$	126(28.4)	314(70.9)	3(0.7)			
Student's economic activity						
- Yes	38(35.5)	69(64.5)	0(0)	4.92	0.085	
- No	100(25.4)	290(73.8)	3(0.8)			
Life status of parents						
- Both alive	132(28.2)	333(71.2)	3(0.6)	4 =0	0 =0-	
Only father alive	2(15.4)	11(84.6)	0(0)	1.73	0.786	
- Only mother alive	4(21.1)	15(78.9)	0(0)			

Table 3. The relationship between some variables and academic self-efficacy

Academic self-efficacy N(%)

Uiah					
High	Moderate	Low	X ²	P.V	
			7 01	0.020	
121(58.5)	86(41.5)	0(0)	7.01	0.020	
197(67.2)	92(31.4)	4(1.4)			
7(77.8)	2(22.2)	0(0)	11 58	0.171	
187(78.3)	91(32.3)	4(1.4)			
113(57.7)	83(42.3)	0(0)	11.58		
9(90)	1(10)	0(0)			
2(66.7)	1(33.3)	0(0)			
290(64.4)	157(34.9)	3(0.7)	2.14	0.342	
28(56)	21(42)	1(0.2)			
50(76.9)	15(23.1)	0(0)	5.97	0.050	
268(61.6)	163(37.5)	4(0.9)			
		<u> </u>			
293(64.7)	157(34.7)	3(0.7)	3.23	0.199	
25(53.2)	21(44.7)	1(2.1)			
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81(66.4)	41(33.6)	0(0)			
76(61.3)	46(37.1)	2(1.6)	2.47	0.649	
161(63.4)					
12(66.7)	6(33.3)	0(0)			
14(77.8)	4(22.2)		3.31	0.769	
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73(68.2)	33(30.8)	1(0.9)	1 36	0.508	
			1.00	0.500	
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Life status of parents - Both alive 300(64.1) 164(35) 4(0.9)					
٠,			1.47	0.832	
		* *			
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Table 4. Comparison of mean scores of happiness, spiritual health and academic self-efficacy in terms of demographic variables

Variable	Academic self-efficacy	Spiritual health	Happiness
Gender			
– Male	106.42±17.43	87.91±16.77	40.90±13.39
– Female	111.37±18.88	90.72±15.54	39.28±11.84
- t	-2.98	-1.92	1.43
- P	0.003	0.055	0.152
Marital status			
Single	109.30±17.71	89.21±16.08	39.91±12.32
 Married 	109.44±24.20	92.64±16.19	40.28±14.30
- t	-0.039	-1.43	-1.196
– P	0.960	0.154	0.844
Residence status			
- Native	112.37±15.81	93.86±14.29	43.82±11.93
 Non-native 	108.86±18.77	88.91±16.28	39.37±12.51
- t	1.43	2.32	2.69
– P	0.152	0.021	0.007
Year of education			
1st year	109.59±18.32	90.40±14.99	39.84±13.05
2nd year	108.69±17.18	87.59±16.95	40.19±14.02
 3rd year and higher 	109.49±19.13	90.11±16.18	39.89±11.49
- t	0.097	1.25	0.032
– P	0.907	0.289	0.969
Parental residence			
- City	109.60±17.23	89.45±16.34	40.06±12.32
– Village	106.55±27.57	90.60±13.80	38.91±14.37
- t	0.743	0.465	0.595
– P	0.461	0.642	0.552
Educational level			
 Associate degree 	118.44±22.28	93.78±15.04	44.78±17.53
 Bachelor's degree 	109.34±18.66	89.95±14.78	39.80±12.19
Medical doctor	108.21±18.14	88.82±18.08	40.03±12.78
 Master's degree 	119.50±9.38	88.60±15.12	38.70±14.29
– PhD	118±16.09	90.67±7.10	38.33±0.577
– t	1.67	0.310	0.382
– P	0.158	0.871	0.821

Table 5. Variables which influence academic self-efficacy using logistic regression

Table 5. Variables which influence academic sen-efficacy using logistic regression							
Academic self-efficacy	Odds Ratio	SE z		P> z	[95% Conf. Interval]		
Spiritual health	1.04	0.27	0.14	0.886	0.63	1.72	
Happiness	1.05	0.01	5.49	0.000	1.03	1.07	
Age	0.99	0.03	-0.25	0.801	0.93	1.05	
Female v.s male	1.81	0.38	2.87	0.004	1.21	2.72	
Marital status	0.57	0.19	-1.70	0.089	0.30	1.09	
Economic activity	0.67	0.17	-1.58	0.114	0.40	1.10	
Constant	0.40	0.40	-0.92	0.359	0.06	2.81	

We entered the variables of spiritual well-being (qualitative), happiness, age, gender, marital status, and economic activity of students along with education into the final model of logistic regression. Ultimately, the variables of happiness and gender were found to be significant. According to the results, the potential of women to have self-efficacy was higher than men. In addition, the chance of high self-efficacy increased by 5% per unit of increase in the rate of happiness (OR=1.05) (Table 5).

Discussion

The mean score of spiritual health was equal to 89.56 ± 16.11 , which is consistent with some of studies. $^{1,\,4,\,10,\,12,\,22,\,23,\,34-37}$

The mean score of happiness was equal to 39.95±12.52. This value in other studies was as follows: Barati et al. (44.1), Ebadi et al. (45.46), Varaei et al. (47.03) in seminary school, and (42.27) in university, Mozafarinia et al. (75.46). These results are higher than the results of our study.^{24, 25, 35, 38} The

factors such as cultural and religious issues and family relationships are probably effective in this regard.

The mean score of academic self-efficacy was equal to 109.32±18.43, which is consistent with some research. 15

Of all the participants, 359 students (71.8%) had a moderate spiritual health. In a study at Urmia University, people with a moderate spiritual health accounted for 96.7%, which is higher than the current results.³⁹ The target population of this study involved the medical students, which can be the reason for this discrepancy. Our results are consistent with the results of some domestic and foreign studies.^{1,3,4,10,12}

We found no relationship between happiness and gender, which seems inconsistent with some other studies. ^{24,25} Moreover, we found no correlation between happiness with the educational level and residence status of students ²⁴ and marital status, which is in line with the results of some other research. ^{24,25}

Also, a significant relationship was seen between spiritual well-being with satisfaction with life, self-esteem, subject wellbeing, satisfaction and positive mood, happiness, and academic self-efficacy. However, spiritual health was not significantly correlated with age, term, gender, educational level, marital status, native or non-native status, student's term and academic year, economic status of the student's family, student's economic activity, and the parental life status. According to Ebadi et al., 25 no correlation was reported between spiritual well-being and age and gender, which is inconsistent with our results. Some studies in Yazd and Urmia showed a relationship between spiritual well-being and marital status of students, ²⁵ which is inconsistent with the present results. Accordingly, it can contribute to the cultural, demographical equalities, and fields of studies. Some research has found a relationship between spiritual well-being and gender^{36,37} inconsistent with our results. A study conducted in Kermanshah University of Medical Sciences led to finding no relationship between variables such as age, marital status, housing status, term, and field of study with spiritual health, which seems to be consistent with recent results.³⁴ In a study on students of Shahid Beheshti University in Iran, a relationship was found between gender and spiritual health, which does not conform to the present study results.²³ These differences may arise from cultural differences, life experiences, differences in sample size, and sometimes the use of different scales for measuring spiritual well-being.

We found a significant relationship between spiritual wellbeing and happiness with academic self-efficacy in this study, which is in line with the results of a number of studies. 25,35

A large number of students had a moderate level of spiritual health and happiness, and more than one-third indicated moderate and low levels of academic self-efficacy. In addition, spiritual health and happiness were found to be related to the academic self-efficacy. Hence, as higher academic self-efficacy of medical students can improve the efficiency of these people in providing high-quality and effective services, the authorities have to pay more attention to the spiritual health and happiness of students and need to take measures to improve these factors. These factors may play an important role in improving the academic self-efficacy.

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Conflict of Interest

The authors declared that they have no conflict of interest.

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