

Association between Spirituality and Mental Health Status

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ABSTRACT

Background: Increasing globalization and commercialization is leading to stress and mental health issue. The need of the research was to understand the importance of spirituality in maintaining good mental health.

Methods: Quantitative cross sectional methodology was used to find out the association between spirituality and mental health status among adults aged 18-65 in Bhaktapur district, Nepal. The sample size of the study was 159. Simple random sampling was used.

Results: There was significant negative association between spirituality and mental disorders (anxiety and depression). However, no significant association was found between any demographic variables and mental disorders.

Conclusion: With the involvement of both community and psychiatrists and with proper awareness, we can maintain good mental health and reduce mental disorders through spiritual well-being.

Keywords: Spirituality, Mental disorders, Mental health

INTRODUCTION

Spirituality is a sense of connection to something bigger than us, and it typically involves a search for meaning in life. ⁽¹⁾ Ellison (1983) states that spiritual well-being includes a psycho-social and also a religious element. Religious well-being which is a religious element indicates a relation with a superior power i.e. God. Existential well-being is a psychosocial element and indicates feeling of a person of who he/she is, what he/she does and why and where he/she belongs to. ⁽²⁾

Mental health includes our emotional, psychological, and social well-

being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood. ⁽³⁾ One in four people in the world will be affected by mental or neurological disorders at some point in their lives. ⁽⁴⁾ According to World Health Organization, mental illness represents 13% of the global disease burden, surpassing both cardiovascular disease and cancer. Approximately 30% of the population of Nepal suffers from one or other mental health issue. ⁽⁵⁾

There are several researches in the past that supports the association between spirituality and psychological well-being. According to such researches, spirituality has positive influence in mental health reducing stress and other mental disorders.

MATERIALS AND METHODS

The study was quantitative cross-sectional study. The study was conducted in Bhaktapur district, Nepal. Adults aged 18-65 years visiting a particular historical place were the study population. Sample size was calculated considering 11.7% prevalence of depression among Nepalese adults, ⁽⁶⁾ 95% desired level of confidence and 5% acceptable margin of error. The sample size was 159. Sampling technique adopted in this study was simple random sampling.

Exclusion criteria: (a) People aged below 18 and above 65 years (b) Those who were reluctant to give informed consent
Data was collected through questionnaire. The data collection tools used were:

- i) Spiritual Well-Being Scale (SWS): The SWS is made up of 20 items, 10 of which evaluate the religious well-being (RWB), and the others, the existential well-being (EWB). Each one of the 20 items is answered according to a six-point scale, varying from “I strongly agree” to “I strongly disagree”.⁽⁷⁾ This scale was modified in order to suit the Hindu population. The median score of the SWS results was considered cutoff score and denominated as high spirituality and low spirituality.
- ii) Hospital Anxiety and Depression Scale (HADS):⁽⁸⁾ HADS is used to determine the levels of anxiety and depression that a person is experiencing. In the analysis of this study, the HADS results were denominated positive for the abnormal (11-21) and borderline abnormal (8-10) whereas negative for the normal (0-7) scores.
- iii) Bergen Insomnia Scale: There are six items, of which the first three pertain to sleep onset, maintenance, and early morning wakening insomnia, respectively. The last three items refer to not feeling adequately rested, experiencing daytime impairment,

and being dissatisfied with current sleep.⁽⁹⁾ The median score of the Bergen Insomnia Scale results was considered cutoff score and denominated as Insomnia and No insomnia.

All 3 scales were translated into Nepali language.

Statistical Analysis

The obtained data were first entered in MS-Excel and then analyzed by using RStudio. First, the descriptive analysis was performed to see the prevalence of anxiety, depression, insomnia and socio-demographic characteristics of the sample. Further Fisher's exact test was applied to assess the association between spirituality and mental health disorders (anxiety, depression, insomnia). The level of significance for confidence was set at 95% (p<0.05)

RESULTS

General characteristics of respondents

Majority of the respondents were male (63.5%), and aged 18-25 years (34.6%). Moreover majority of the respondents were undergraduate (37.7%), single (50.3%) and student (20.1%).

Table 1: Demographic characteristics of respondents (n=159)

Demographics	Response	Frequency	Percentage (%)
Gender	Male	101	63.5
	Female	58	36.5
Age group	18-25	55	34.6
	26-35	46	28.9
	36-45	29	18.2
	46-55	17	10.7
	56-65	12	7.5
Marital status	Single	80	50.3
	Married	77	48.4
	Widowed	2	1.3
Education	Illiterate	2	1.3
	No formal education	4	2.5
	Primary	3	1.9
	Lower Secondary	7	4.4
	Secondary	24	15.1
	Higher Secondary	32	20.1
	Undergraduate	60	37.7
	Postgraduate	27	17.0
Occupation	Student	32	20.1
	Civil service	28	17.6
	Business	18	11.3
	Engineer	17	10.7
	Housewife	13	8.2
	Teacher	10	6.3
	Priest	9	5.7
	Banker	7	4.4
	Medic	4	2.5
	Others	21	13.2

Prevalence of mental disorders

The prevalence of anxiety and depression among 159 respondents was found to be 34% and 25.2% respectively whereas prevalence of insomnia was 36.5%.

Spirituality and Mental disorders

Table 2: Spirituality VS Anxiety

	Low Spirituality	High Spirituality	p-value	Odds ratio
Anxiety -ve	53	52	8.33E-07	0.13
Anxiety +ve	48	6		

Since $p\text{-value} < 0.05$ and $\text{odds ratio} < 1$, significant negative association was found between spirituality and anxiety. The odds that people with high spirituality to be anxious (anxiety +ve) is 87% less likely as compared to people with low spirituality. (Odds ratio = 0.13 i.e. $1 - 0.13 = 0.87 = 87\%$)

Table 3: Spirituality VS Depression

	Low Spirituality	High Spirituality	p-value	Odds ratio
Depression -ve	65	54	4.44E-05	0.14
Depression +ve	36	4		

Similarly, significant negative association was found between spirituality and depression since $p\text{-value} < 0.05$ and $\text{odds ratio} < 1$. The odds that people with high spirituality to be depressive (depression +ve) is 86% less likely as compared to people with low spirituality. (Odds ratio = 0.14 i.e. $1 - 0.14 = 0.86 = 86\%$)

However there was no significant association found between spirituality and insomnia. Moreover no significant association was found between any demographic variables and mental disorders.

DISCUSSION AND CONCLUSION

The main objective of this study was to assess association between spirituality and mental health among adults aged 18-65. The study's findings showed that there is a negative association between spiritual well-being and mental disorders (anxiety and depression). The result of the study is consistent with several previous researches.

The significant association between spiritual well-being and mental health disorders doesn't necessarily mean there is cause-effect relationship between these variables. It may just be a correlation or may be due to confounding factors. More similar researches among different statistical

population are required to establish such cause-effect relationship between spiritual well-being and mental disorders.

The limitation of this study was it only included quantitative information. Spirituality is a subjective phenomenon so quantitative information may require the qualitative elucidation for the precise evaluation.

Increasing globalization and commercialization is leading to stress and mental health issue. Mental health issues are rocketing all over the world. Spirituality can be one of the effective interventions for this big problem. With the involvement of both community and psychiatrists and with proper awareness, we can maintain good mental health and reduce mental disorders through spiritual well-being.

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