

RELIGIOUS ORIENTATION AND ITS EFFECTIVE FACTORS AMONG MEDICAL SCIENCES STUDENTS

MOHAMMAD REZA MOSTAFAIE¹, FARHAD INANLOO², ALI RAZAGHPUR², HOSSEIN RAFIEI¹

¹School of Nursing and Midwifery, Qazvin University of Medical Sciences, Qazvin, Iran. ²Student Research Committee, Qazvin University of Medical Sciences, Qazvin, Iran. Email: hosseinr21@gmail.com

Received - 07.06.2018; Reviewed and accepted - 27.06.2018

ABSTRACT

Aim: Having information about how religious orientation is in medical sciences students, is necessary to improve it. Thereby, based on the limited studies in this regard, the present study was designed with the aim of studying the religious orientation and its effective factors among medical sciences students. **Methods:** This study is a descriptive-analytic study conducted in Iran in 2015-2016. The sample of the study was students who were studying at Qazvin University of Medical Sciences. The sample required for the present study was estimated to be 566 by using the sample size formula. The sampling was Quota Sampling. The Persian version of Religious Orientation Scale was used to examine the religious orientation of the students. The scale consists of 45 items divided into two subscales. **Results:** Among 566 students participating in this study, 358 (61.2%) were girls and the rest were boys, and 508 (87%) were single. The mean age of the participants was 23.3 years. Regarding religion, nearly 98 percent of the samples were Shia. In total, 14.5%, 67.5% and 17.4% of the participants showed poor, moderate, good and excellent religious orientation, respectively. **Conclusion:** The present study showed that students of medical sciences have a good level of religious orientation. According to the importance of the religious attitudes to reduce mental disorders and promoting the academic achievement of students, it is recommended that students be examined at the time of entering universities regarding their spirituality and their attitudes toward spirituality.

Keywords: Religious orientation, Spirituality, Medical student, developing country.

INTRODUCTION

Human beings have been in need of religion from the distant past [1,2]. Many experts believe that religion plays an important role in an individual's physical and mental health [3]. In one hand, religions suggest individuals to positive values such as hope, optimism, friendship, empathy, trust in a higher power, patience in hardship, respect to others' rights, pardon and forgiveness and on the other hand, they prohibit them from negative values such as rape, corruption, aggression, and denial of the others' rights, which in both situations, the observance of them leads to positive effects on an individual's behavior and it makes life meaningful [1,4]. Religion is associated with the sense of meaning and having purpose, growth, and perfection, as well as the power and dominance of an individual and brings the real meaning to life and distance the individuals from the absurdity, which ultimately results in higher traits such as self-actualization [5]. Over the past two centuries, talking about the psychology of religion and its effects on making humans and societies healthier have been developed, and the attention of many experts, as well as psychologists in this field, has attracted.

Religious orientation is one of the religious indicators that is considered as an indicator of adherence and tendency toward religious teachings [6]. Religious orientation refers to the performance of an individual based on religious teachings, which are pointed out as an indicator of adherence and tendency toward religious teachings. Right religious orientation can have beneficial psychological effects on individuals [7]. A variety of classifications for religious orientation are presented. In one classification, Allport and Ross divide religious orientation into two groups of intrinsic and extrinsic. In intrinsic religious orientation, religion is considered as a transcendent inner value, and in extrinsic religious orientation, the purpose is to achieve a better position, place and gaining benefits through pretending to be religious [8]. In fact, the intrinsic religious orientation is to satisfy a real inner need, and extrinsic religious orientation is to satisfy outer desires and demands [6]. Many students in medical science universities face many challenges and stressors. Several factors such as academic environment, hospital environment, facing patients in emergency situations, facing suffering patients and facing dying patients can all cause excessive stress and anxiety in these people. Recent studies have shown that religion and its related subjects, such as religious orientation, can relieve the levels of stress and anxiety and, consequently, appease individuals' mental

and emotional status [9-13]. The results of Musarezaie et al. in this regard, showed that religious orientation plays a major role in relieving stress and anxiety of students [3]. Recent studies showed that religion and spirituality among students are a significant factor in their academic achievement as well [14]. Having information about how religious orientation is in medical sciences students is necessary to improve it. Thereby, based on the limited studies in this regard, the present study was designed with the aim of studying the religious orientation and its effective factors among medical sciences students.

METHODS

Study Population

This study is a descriptive-analytic study conducted in Iran in 2015-2016. The sample of the study was students who were studying at Qazvin University of Medical Sciences. The University has five faculties which are School of Medical, Paramedical Faculty, School of Public Health, School of Nursing and Midwifery and the School of dentistry. At the time of the study, a total of 2,600 students were studying in various fields at the university. The sample required for the present study was estimated to be 566 by using the sample size formula. The sampling was Quota Sampling. In this method, at first, the ratio of students in each college was calculated to the total number of university students. And based on the ratio, the number of samples from each faculty was quantified. The researcher then attended the faculty and received the list of the student and randomly selected the sample from the list. In Total, a number 190 people from the School of Medical, 145 people from the Faculty of Paramedical Faculty, 125 people from the School of Public Health, 75 people from the School of Nursing and Midwifery and 31 people from the School of dentistry were enrolled in the present study.

Data Collection

Data collection was done by two researchers. Data were collected in the university environment at a time when students were not disturbed in their academic affairs. Potential participants were approached and informed about the study and its objectives. The questionnaires then were distributed and participants were asked to complete and return the forms within one hour. After completing the questionnaires by participants, the researcher examined the

questionnaire and placed them in special envelopes. Data, in the present study, were collected using two instruments. The demographic data questionnaire, which was a researcher-made questionnaire, included themes such as age, gender, the field of study, term, academic degree, and religion. The Persian version of Religious Orientation Scale, designed by Bahrami et al., was used to examine the religious orientation of the students. The scale consists of 45 items divided into two subscales. The first dimension is "Getting religion" that includes positive values such as believing in God and the judgment day, believing in helping people, believing in work and trying, believing in serving the mankind, and believing in the help of God in the hard times. The second dimension is "The underdevelopment of religion" that includes negative values such as lack of self-restraint in confronting sin, disbelieving in serving people, being impatient to outcome and having desire for immediate outcome (secularization), lack of care in thought and action, selfishness, lack of attention to others' rights, denial of the others' privacies to fulfill personal goals and dissatisfactions with life. Each question is answered on a 5-Likert scale. The total score ranges from 45 to 225. In the present study, a score of less than 90 was considered as poor orientation, a score of 91 to 136 was considered as moderate orientations, a score of 137 to 182 was good orientation, and a score of higher than 183 was considered as excellent orientation. Validity and reliability of this questionnaire have been determined to be desirable [15]. Data analysis performed in SPSS 16.

Table1: Religious orientation among students with the different field of study

Variable	Fields	level	No. (%)
Getting Religion	Medical	Excellent	47.4%
		Moderate	51.6%
		Poor	1.1%
	Dentistry	Excellent	54.5%
		Moderate	45.5%
		Poor	0
	Nursing	Excellent	50%
		Moderate	46.7%
		Poor	3.3%
	Midwifery	Excellent	66.7%
		Moderate	33.3%
		Poor	0
	Health	Excellent	59.1%
		Moderate	40.9%
		Poor	0
Paramedical	Excellent	49%	
	Moderate	50%	
	Poor	1%	

Ethical considerations

The study was conducted under the supervision of the Ethics Committee of Qazvin University of Medical Sciences. A numerical code was assigned to each patient at the beginning of the study. Attending in the study was voluntary, and the samples were fully assured that the information obtained would remain completely confidential. If the student tended to know the results of the study, a summary of the study's findings would be sent to him.

RESULTS

Among 566 students participating in this study, 358 (61.2%) were girls, and the rest were boys, and 508 (87%) were single. The mean age of the participants was 23.3 years. Most of the students (56%) study in the undergraduate course. Regarding religion, nearly 98 percent of the samples were Shia. In total, 14.5%, 67.5% and 17.4% of the participants showed poor, moderate, good and excellent religious orientation, respectively. Based on the results of this study, religious orientation were different among different faculties in a way that 65.8% of Medical students, 45.5% of Dental school students, 78.3% of the Nursing and Midwifery students, 73% of Health students and 66.2% of the Paramedical students had a good levels of religious orientation. This difference

between faculties was statistically significant (Figure 1). Among the demographic variables, only marital status was a factor affecting the religious orientation of students so that married students had a better orientation.

DISCUSSION

Religiosity and spirituality are one of the capabilities of mankind, which lead people to find ways of coping with problems and learn how to solve them. Religion is also considered as a source of social support against confusion and calamity, which leads to a sense of meaning in an individual's life that ultimately results in a decrease in isolation and loneliness [16]. This study aimed to study the religious orientation of the students who were studying at Qazvin University of Medical Sciences and the factors affecting it. The results of the present study showed that in general, who was studying at Qazvin University of Medical Sciences, have a good religious orientation, although this was different among students of different faculties.

Although the religious attitudes among medical sciences students are so important, little research has been conducted in this regard so far. However, the results of the studies among Iranian population show somewhat similar results to the results of the present study. In a study conducted in this regard in 2017, Jafarimanesh et al. studied the religious orientation of Iran University of Medical Sciences students. The sample of the Jafarimanesh et al. study was made up of 288 students who were studying in Iran University of Medical Sciences. Allport questionnaire was used to study the religious orientation. The mean score of intrinsic and extrinsic spiritual wellbeing in the study of Jafarimanesh et al. was 28.5 and 26.5, respectively, which indicates relatively a good religious orientation [6]. In another study conducted in 2015, Sadeghi et al. studied the religious orientation of 320 students of medical university of Gonabad. Allport questionnaire was used to study the religious orientation. Similar to the results of the present study, the results of Sadeghi et al. study showed that s students of medical university of Gonabad have relatively a good religious orientation [5].

The results of international studies are slightly different from the results of the present study. In a Pakistan study conducted in 2015, Buzdar et al. studied the religious orientation of a group of Pakistan students. To study the religious orientation, Budzar et al. used a questionnaire in which intrinsic religious orientation, personal extrinsic orientation, and extrinsic social orientation were examined. The results of the Buzdar et al. study showed that students have a high intrinsic religious orientation and a very high personal extrinsic orientation [17]. In another study conducted in 2015, Bhat et al. studied the religious orientation of 100 Hindi students. The results showed that more than 99 percent of students had an excellent religious orientation which it is slightly higher than the results of the present study [18]. The difference in the results of internal and international studies can be due to different religions. Cultural differences may be relevant in this regard as well.

CONCLUSION

Religion is one of the factors that have a high ability to create a unit personality in individuals. The present study showed that students of medical sciences have a good level of religious orientation. According to the importance of the religious attitudes in order to reducing mental disorders and promoting academic achievement of students, it is recommended that students be examined at the time of entering universities in terms of their spirituality and their attitudes toward spirituality. It is also important to promote their religious attitudes and spiritual wellbeing, as well as institutionalize spirituality in academic settings. Due to the limited research on religious orientation among students of medical universities, further studies are going to be needed to determine any benefits. It is recommended that studies be conducted among students with different religions as well.

Study limitations

Most of the participants in the present study were Muslim and Shia, which should be considered when using the results of this study.

REFERENCES

- Hosseini Ghomi T, Salimi Bajestani H, Zakeri N. Relationship religious orientation and hope with health anxiety among women nurses in Imam Khomeini hospital of Tehran. *Iranian Journal of Nursing Research*. 2014;9(1):17-24.
- Amirsardari L, Azari S, Esmali Kooraneh A. The relationship between religious orientation, and gender with a cognitive distortion. *Iranian journal of psychiatry and behavioral sciences*. 2014;8(3):84-9.
- Musarezaie A, Momeni T, Najji Esfahani H, Aminoroaia M. Relationship between religious orientation, anxiety and depression of students in Isfahan University of Medical Sciences. 2013. 2013:11.
- Baloochi Beydokhti T, Tolide-ie H, Fathi A, Hoseini M, Gohari Bahari S. Relationship between religious orientation and moral sensitivity in the decision making process among nurses. *Iranian Journal of Medical Ethics and History of Medicine*. 2014;7(3):48-57.
- Sadeghi S, Sadeghi O, Khodadadi Z, Tavakolizadeh J, Tolidei H. The relationship between religious orientation and psychological well-being in Students of medical university of Gonabad in 91-1390. 2. 2015;1(4):57-63.
- Jafarimanesh H, Tavan B, Matorypor P, Ranjbaran M. Relationship between religious orientation and quality of life. *Medical Ethics Journal*. 2017;11(40):13.
- Khansanami S, Abedini Z, Shahsiah M, Taheri Kharameh Z. The relationship between religious orientation and students' quality of life at medical sciences university of Qom. *Journal of Sabzevar University of Medical Sciences*. 2015;22(3):282-8.
- Allport GW, Ross JM. Personal religious orientation and prejudice. *Journal of personality and social psychology*. 1967;5(4):432-43.
- Rezapour Mirsaleh Y, Khabbaz M, Safi MH, Abdi K, Yavari M, Behjati Z. The relationship of religiosity, personality dimensions and self-efficacy with coping style of nurses practitioner students. *Iranian Journal of Nursing Research*. 2011;6(22):53-64.
- Solati K, Rabiei M, Shariati M. The Relationship between mental health and religious orientation. *Qom Univ Med Sci J*. 2011;5(3):42-8.
- Bayani A. The relationship between the religious orientation and anxiety and depression of university students. *Journal of Fundamentals of Mental Health*. 2008;10(39):209-14.
- Farasatkish F, Pirani Z, Khodabakhshi Koolae A. Relationship of psychological well-being and happiness with religious orientation among female students. *Religion and Health*. 2017;4(1):36-46.
- Khoshnood G, Shayan N, Babaie Amiry N, Ashoori J. Rrelationship between religious orientation, happiness, locus of control and coping strategies, and spiritual well-being among nursing students. *Journal of Research Development in Nursing and Midwifery*. 2016;12(3):9-18.
- Tabibi M, Ahmari Tehran H, Soltani Arabshahi SK, Heidari S, Abdi Z, Safaeipour R. The association between spiritual health and academic achievement in medical students of Qom University of Medical Sciences, 2011. *Qom Univ Med Sci J*. 2013;7(2):72-8.
- Bahrami H, Tashak A. The aspects of relationship between religious orientation & mental health and ability of diagnose and clarify of religious orientation scales. *Journal of Psychology and Education*. 2005; 34(2): 41-63.
- Naeimi E, Kazemi Z, Dehghan K. The relationship between the religious orientation and irrational beliefs in the elderly of kahrizak sanitarium. *Clinical Psychology Studies*. 2016;6(23):179-99.
- Buzdar MA, Ali A, Nadeem M, Nadeem M. Relationship between religiosity and psychological symptoms in female university students. *Journal of Religion and Health*. 2015;54(6):2155-63.
- Bhat SA. Religious orientation and academic stress among university students. *Int J Behav Res Psychol*. 2015; 3(3), 85-89.

© 2018 by the authors; licensee MJPMs, India. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC-BY) license (<http://creativecommons.org/licenses/by/4.0/>)