

A Study of Spirituality in Relationship with Perceived Happiness Status, Perceived Health Status and Academic Achievement among Adolescents

Aastha Sharma^{1*}

ABSTRACT

Adolescence is a sensitive period of life which is accompanied by a series of biological, psychological, and cognitive changes in an individual. This age of confusion and immaturity predisposes individuals towards risky behaviour like alcohol/drug abuse, violence, sexual experimentation etc. The Mental Health Foundation (2009) enlisted various protective factors for adolescents that can help in keeping them safe from risky behaviour. These were: spirituality, social support, parental support, meaningful relationships, constructive hobbies etc. Spirituality is a relationship of an individual with the Divine, with oneself and with others. Houston and Cartwright (2007) defined spirituality using four components. The first was a belief in transcendence, something higher than oneself. The second was interconnectedness, which meant the sense of unification with all living beings. The third component was a feeling of love and compassion for others. Fourth component included a sense of purpose and meaning in life. Spirituality has been consistently linked with happiness, better health outcomes and general feelings of wellbeing among adolescents. The present study aimed to investigate the relationship of spirituality with perceived happiness status, perceived health status, and academic achievement among adolescents. A sample of 100 adolescents (50 males and 50 females) in the age range of 16 and 18 years was included in the study. Inter correlation Analysis was conducted to find the relationship between the variables. In order to find out differences between two groups viz. males and females, t tests were employed. Results showed a significant relationship between spirituality, perceived happiness status and academic achievement of adolescents. This study highlighted the importance of spirituality, and how it can be meaningful not only in the emotional and psychological domain, but the cognitive domain as well.

Keywords: *spirituality, adolescence, perceived happiness, perceived health, academic achievement*

¹ Research Scholar, Department of Psychology, Panjab University, Chandigarh, India

**Responding Author*

Received: July 4, 2018; Revision Received: August 3, 2018; Accepted: September 1, 2018

A Study of Spirituality in Relationship with Perceived Happiness Status, Perceived Health Status and Academic Achievement among Adolescents

The World Health Organization (2002) defined adolescence as the period from ten to nineteen years of age. It is the period characterized by physical, psychological and social changes and generally it is classified into two stages, i.e., early adolescence between ten to fourteen years; and late adolescence between fifteen to nineteen years of age. Arnett (2002) defined adolescence based on the conceptualized by G. Stanley Hall, the founder of adolescent science. He called adolescence as a process of physical and psychosocial “rebirth”.

Greenfield, Keller, Fuligni, and Maynard (2003) defined adolescence as a complex, multi-system transitional process involving progression from the immaturity and social dependency of childhood into adult life with the goal and expectation of fulfilled developmental potential, personal agency, and social accountability. According to Steinberg (2014), adolescence is a critical developmental period, and is conventionally understood as the years between the onset of puberty and the establishment of social independence. Curtis (2015) called adolescence as a dynamically evolving theoretical construct informed through physiologic, psychosocial, temporal and cultural lenses. Further, it was defined as the transition from childhood to puberty to maturity.

Omotoso and Olunkunle (2007) opined that out of all these five stages of human development the stage or the period of adolescence is the most confusing and the most poorly understood stage. This is because the adolescent is now acquiring physical attributes of adulthood but less emotionally developed as an adult. Most parents use authority over their children all in the name of caring and preventing them from making mistakes. Hence an adolescent trust and relies more on his/her peer group. Adolescents form youth gangs with the hope that the collective strength of their group would make them feel stronger than parents and teachers. During this period, adolescents face a dramatic challenge, one requiring adjustment to changes in the self, in the family, and in the peer group. In contemporary society, adolescents experience institutional changes as well. Among young adolescents, there is a change in school setting, typically involving a transition from elementary school to either junior high school or middle school; and in late adolescence there is a transition from high school to the worlds of work, university, or childrearing.

STRESS AMONG ADOLESCENTS

American Psychological Association (APA, 2002) identified factors that caused stress among adolescents. These were body image and weight, self-esteem issues, dating and sexual relationships, sexual orientation (gay/lesbianism), and developing a sense of identity.

National Association of School Psychologists (NASP, 2012) enlisted the causes of stress among adolescents into three main headings, i.e., at school, at home and peer related. At school, stress come from an unstructured classroom, unclear or unreasonable expectations, or fear of failure. At home, stress can occur through a lack of family routines, over-scheduling, prolonged or serious illness, poor nutrition, change in the family situation, financial

A Study of Spirituality in Relationship with Perceived Happiness Status, Perceived Health Status and Academic Achievement among Adolescents

problems, family strife or abuse, or unclear or unreasonable expectations. Peer-related stress can be a result of changing school buildings, having to deal with a bully, fitting in with the crowd, or moving to a new community.

Beacom (2015) surveyed one hundred and twenty four adolescents to understand the factors of stress among them. It was found that majority of adolescents were stressed by homework/school reasons, which included grades/GPA, tests, examinations etc. About a third of the sample responded that parental expectations and pressure to perform well and achieve high stressed them. A small section of the sample responded that their social life was a cause of stress. This included friends, boyfriends/girlfriends, relationships, extra-curricular activities, and sex. Adolescents were also stressed due to lack of time, lack of sleep, too many tasks, deadlines and lack of preparedness.

Risk and Protective Factors Affecting Stress Among Adolescents

American Psychological Association (2002) identified a number of risk and protective factors in adolescents. The most commonly found risk factors were alcohol and drug abuse, pregnancy and sexually transmitted diseases, school failure and dropout, delinquency, crime and violence. The protective factors stated by APA (2002) were stable, positive relationship with at least one caring adult; religious and spiritual anchors; realistic academic expectations; positive and warm family environment; emotional intelligence and an ability to cope with stress.

According to the State of the World Children report by UNICEF (2011), Risk-taking is a common feature of early to middle adolescence, as individuals experiment with 'adult behaviour'. This risk taking behaviour declines during late adolescence, as the ability to evaluate risk and make conscious decisions develops. Some risk factors are accidents, tobacco/drug/alcohol consumption, early sexual initiation/ teenage pregnancies, and violence and abuse. Accidents are the greatest cause of mortality among adolescents. Boys are more prone than girls to injury and death from such accidents. Tobacco consumption, drug and alcohol use are growing health risks for adolescents. Adolescents show readiness to experiment with substances like drugs and alcohol, which are otherwise forbidden by their caretakers or parents. Sexual and reproductive health of adolescents is another major concern. Girls are more likely to have engaged in early sex in adolescence but also less likely to use contraception. Violence and abuse, particularly against girls, are commonplace and too frequently tolerated. Acts of violence take place within the home, at school, and in the community; they can be physical, sexual or psychological.

Spirituality seems to play an important role as a protective factor among adolescents. Spirituality, which is the relationship of an individual with oneself and with the Divine, also manifests in one's interactions with other individuals. Belief in God, or a higher power, gives hope to individuals dealing with issues like trauma, abuse, violence, illness etc. Spiritual practices like prayer, meditation, relaxation exercises, breathing exercises, yoga,

A Study of Spirituality in Relationship with Perceived Happiness Status, Perceived Health Status and Academic Achievement among Adolescents

contemplation etc keep an individual in a positive frame of mind. Even in daily hassles like parental pressures, peer pressure, bullying, academic stress, etc; spirituality can play an important role by acting as a buffer from stress among adolescents. Research has shown that spirituality plays a positive role in the overall development of adolescents. Adolescents who are spiritually-inclined do not get much involved into destructive activities like drug/alcohol abuse, violence, early sexual initiation, self-harm, suicide etc. Spirituality promotes mental and physical health of individuals, positive coping styles and happiness. Since spirituality involves a close relationship with God/Nature/ Universe, it instils a feeling that one is not alone, and that everything happens for a reason. Spiritual individuals are more positive about their future expectations and present life (Shek, 2012).

Defining Spirituality

Bonner, Koven, and Patrick (2003) were of the view that Spirituality involved feelings of closeness to a higher power, harmony with others, and a sense of coherence. Spirituality may or may not be expressed in a particular religious faith or religious institution (Sheridan, 2003). Miller and Thoresen (2003) suggested that spirituality refers to one's engagement with that; which she or he consider holy, divine, or beyond the material world. Good and Willoughby (2008) thought that spirituality was typically characterized as more private thoughts or behaviours that might not necessarily associated with formal religion (i.e., prayer, meditation, spiritual beliefs).

Benefits of Spirituality

Zohar and Marshall (2000) emphasized the existence of spiritual intelligence. It was defined as the intelligence by which people addressed and solved problems of morals and values; the intelligence by which one could place one's actions and one's lives in a wider, richer, meaning-giving context.

The Royal College of Psychiatrists' (2002) acknowledged the beneficial aspects of spirituality in psychiatric care. A new aspect of spirituality-training was added in the psychiatry training curriculum, which said that an average trainee must have sufficient ability to demonstrate awareness and have a working knowledge of spiritual aspects of psychiatric care.

According to Wink and Dillon (2002), spirituality and religiousness both have long term benefits. While religiousness was related to wellbeing through positive connections with others and involvement in social and community events; Spirituality seemed to confer wellbeing from personal growth, creativity and knowledge.

Lyon (2012) enumerated a number of benefits of practising spirituality. Spirituality provides clarity in the midst of one's overflowing and demanding days. It cultivates the attention required to complete one's tasks. Precision and awareness become elevated in whatever it is you apply yourself to. It lifts the mood. Joy and upliftment moods come much more readily.

A Study of Spirituality in Relationship with Perceived Happiness Status, Perceived Health Status and Academic Achievement among Adolescents

It creates a sense of steadiness and grounding in change. It keeps an individual 'afloat and even-keeled' in even the most riotous emotional storms. It helps gain a broad perspective of one's life, and also a perspective of one's own self. Spirituality helps an individual to stay in the 'here and now', rather than into the anxiety and fears regarding the future, and the guilt and doubt regarding the past. And lastly, spirituality connects an individual with oneself and helps understand the true spirit.

Sehgal (2016) conducted a review of literature on spirituality at work, and found that spirituality at workplace was linked to a number of positive outcomes. Spirituality enhanced employee wellbeing and quality of life; provided employees with a sense of purpose and meaning at work; provided employees a sense of interconnectedness and community. Spirituality was positively linked to positive work attitudes, job satisfaction, turnover, self esteem, success, happiness, honesty, mutual trust, organisational commitment, and managerial effectiveness. Spirituality was found to be negatively linked to work stress, loneliness, fear of redundancy and lay-offs. It was concluded that organisations were required to inculcate spirituality, which could act as a protective factor against stress and burnout. This could be done by promoting, implementing and encouraging spirituality at the organisational level. This could include fundamental changes in the vision, mission and purpose of the organisation. The organisation could provide meaningful work to individuals with a need for spiritual fulfilment. Values such as benevolence, humanism, generativity, integrity, justice, receptivity, respect, trust and responsibility could be promoted in the organisation.

Aim of the Study

The aim of the present study was to study the relationship between spirituality, perceived happiness status, perceived health status and academic achievement among adolescents in Chandigarh (India).

Hypotheses

Based on the review of literature, the following hypotheses were formulated:

1. Spirituality was expected to be positively related to perceived happiness status among male and female adolescents.
2. Spirituality was expected to be positively related to perceived health status among male and female adolescents.
3. Spirituality was expected to be positively related to academic achievement among male and female adolescents.

METHODOLOGY

Sample

The sample comprised of 100 adolescents (50 males and 50 females) in the age range of 16-18 years. They were randomly selected from various schools of Chandigarh, and neighbouring areas of Panchkula, and Mohali in India.

A Study of Spirituality in Relationship with Perceived Happiness Status, Perceived Health Status and Academic Achievement among Adolescents

Tests and Tools used

The following standardised tests and tools were administered for the purpose of the study:

1. Daily Spiritual Experiences Scale (Underwood and Teresi, 2005)
2. An eleven-point rating scale to measure perceived happiness status
3. An eleven-point rating scale to measure perceived health status
4. Average marks achieved in two previous annual examinations

Statistical Analysis

Keeping in line with the objectives of the present study, descriptive analysis was conducted. t-test was computed to compare male and female adolescents on spirituality and its correlates. Inter correlation analysis was carried out.

RESULTS AND DISCUSSION

The results from the present study are tabulated in tables 1-4. Table 1 shows means, S.D.'s, and t-ratio scores on spirituality, perceived happiness status, perceived health status and academic achievement. Table 2 shows the intercorrelation matrix for the total sample (n=100).

Table 3 shows the intercorrelation matrix for male adolescents (n=50). Table 4 shows the intercorrelation matrix for female adolescents (n=50).

Table 1 shows that there are no significant gender differences on spirituality, perceived happiness status, and perceived health status. However, there is a significant difference on academic achievement, wherein females scored higher than male adolescents.

Table 1 showing Means, S.D. and t-ratios for the study variables

Sr. No.	Variables	Male Adolescents (n=50)		Female Adolescents (n=50)		t-ratios
		Mean	SD	Mean	SD	
1	Spirituality	48.37	11.86	47.14	11.34	1.06
2	Perceived Happiness Status	6.49	2.19	6.88	2.32	1.75
3	Perceived Health Status	6.845	1.48	6.93	1.69	0.53
4	Academic Achievement	68.17	12.79	74.02	12.91	4.60**

*t-value significant at .05 Level = 1.97

**t-value significant at .01 Level = 2.58

A perusal at the intercorrelation tables (tables 2, 3 and 4) revealed that spirituality was positively related with perceived happiness status among total sample ($r = -.36$), male ($r = -.40$) and female ($r = -.39$) adolescents. The hypothesis stating that spirituality was positively related to perceived happiness status was supported.

A Study of Spirituality in Relationship with Perceived Happiness Status, Perceived Health Status and Academic Achievement among Adolescents

Table 2 showing Inter correlation matrix for total sample (n=100)

S. No.	Variables	1	2	3	4
1.	Spirituality	-	-.36**	-.13	-.10
2.	Perceived Happiness Status		-	.11	.40**
3.	Perceived Health Status			-	.08
4.	Academic Achievement				-

*Correlation value significant at 0.05 level=0.15

**Correlation value significant at 0.01 level=0.21

Table 3 showing Inter correlation matrix for male adolescents (n = 50)

S. No.	Variables	1	2	3	4
1.	Spirituality	-	-.40**	-.18	-.41**
2.	Perceived Happiness Status		-	-.16	.44**
3.	Perceived Health Status			-	.01
4.	Academic Achievement				-

*Correlation value significant at 0.05 level=0.23

**Correlation value significant at 0.01 level=0.33

Table 4 showing Inter correlation matrix for female adolescents (n = 50)

S. No.	Variables	1	2	3	4
1.	Spirituality	-	-.39**	-.19	-.46**
2.	Perceived Happiness Status		-	.15	.38**
3.	Perceived Health Status			-	.14
4.	Academic Achievement				-

*Correlation value significant at 0.05 level=0.23

**Correlation value significant at 0.01 level=0.33

Spirituality was not found to be related to perceived health status in any of the three groups viz. of total sample, male and female adolescents. The hypothesis stating that spirituality was positively related to perceived health status was rejected.

Spirituality was positively related to academic achievement among male ($r=-.41$) and female ($r=-.46$) adolescents. No relationship was found in case of total sample. Therefore, the hypothesis stating that spirituality was expected to be positively related to academic achievement was partially supported.

Many previous studies showed mixed results. Francis, Jones and Wilcox (2000) conducted in-depth interviews with adolescents, young adults and adults regarding various aspects of church attendance, religious commitment, overall spirituality, satisfaction with church activities, religious beliefs, and attitude toward Christianity, and their relationship with happiness. It was concluded that all the variables positively correlated with happiness.

A Study of Spirituality in Relationship with Perceived Happiness Status, Perceived Health Status and Academic Achievement among Adolescents

According to Lee (2004), academic success of adolescents depended on a large number of factors that could be physical, emotional or cognitive. Since spirituality acted as a resiliency mechanism and also a factor for better coping with challenges, it was theorized to be an indirect help for students dealing with academic issues. It was opined that religion/spirituality provided adolescents with an internal mechanism, which buffered them from stress and anxiety, therefore serving as a factor that helped students with their academic success. Spirituality not only acted as a support system, but also a 'strengthening' factor; which adolescents can use when dealing with stress, especially academic stress. Channelizing stress efficiently can be directly linked to confidence in oneself and also the subsequent better academic performance.

Baron (2006) investigated the religious relationship with health, happiness and anxiety among adolescents. It was concluded that there was a negative relationship between religiosity and anxiety and positive relationship between religiosity and mental-physical health and happiness among adolescents. Kelley and Miller (2007) reported that religious attendance did not predict life satisfaction for adolescents from different religious denominations as well as nonreligious self-identifications.

Singh, Kaur and Singh (2010) studied the influence of spiritual intelligence, altruism, gender, type of school and their various interactions on Academic Achievement of adolescents. Results through multiple correlation and regression analysis revealed that type of school, spiritual intelligence, altruism, rejection (dimension of school environment) and control dimension of school environment) were significant predictors of mental health; and gender, location of residence, creative stimulation, cognitive encouragement, acceptance, permissiveness and academic achievement were not significant predictors of Mental Health. Results also revealed that an inverse relationship existed between academic achievement and spiritual intelligence. Rather, the academic achievement of adolescents with low spiritual intelligence was better than adolescents with average spiritually intelligence; and academic achievement of adolescents with average spiritually intelligence was better than adolescents with high spiritual intelligence. Significant gender differences were also found on academic achievements, wherein male adolescents scored higher than females.

Logan (2013) conducted a mixed method, pragmatic, research study to determine, the influences on academic success of successful African-American adolescents. Quantitative data was collected using two survey instruments, the Religious Commitment Inventory and a researcher-created demographic instrument for data collection. Qualitative data was collected through five researcher-conducted focus group discussions with ten African- American students enrolled in a four year university located in the southeast region of the United States. Results showed that there was a disparity between the perceived and the actual relationship between academic success and religious commitment. Adolescents perceived that religious commitment played a significant and positive role in their academic success. Quantitative

A Study of Spirituality in Relationship with Perceived Happiness Status, Perceived Health Status and Academic Achievement among Adolescents

data, however did not replicate those results. Rather, a negative correlation was found between Grade point average (GPA) scores of adolescents and their religious commitment.

Battle and DeFreece (2014) conducted empirical research to understand the relationship between spirituality, happiness and health. On employing regression analysis, it was found that having a higher household income, being in a romantic relationship, and having higher levels of spirituality were robust predictors of happiness. Variables like being younger, having a higher household income, a regular health-care provider, no religious affiliation, and higher levels of spirituality all predicted increased levels of self-reported overall health. It was concluded that access to money and spirituality were the key factors that shaped happiness among individuals.

Sajjadian, Kalantari, Abedi and Nilforooshan (2016) found that the relationship between spiritual wellbeing and psychological wellbeing and happiness were direct, but weak. It was found that the effect of spiritual wellbeing on happiness was statistically significant. Psychological wellbeing played a role of a mediator in the relationship between spiritual wellbeing and happiness. Considering the fact that direct effect of spiritual wellbeing on happiness was statistically significant, the mediation of psychological wellbeing was a partial mediation in the relationship between the variable of spiritual wellbeing and happiness.

Sillick, Stevens and Cathcart (2016) compared the happiness levels of the religious and the nonreligious groups using two separate measures of happiness, i.e., the Oxford Happiness Questionnaire, and the Subjective Happiness Scale. One hundred and twenty four people (forty three men and eighty one women), aged between eighteen and seventy three years, participated in the study by completing an online survey. There were thirteen participants in the 'believe in God' group, fifty three participants in the 'believe in God and participate in religion' group, seventeen participants in the 'agnostic' group, and forty one participants in the 'atheist' group. The results found that there was no difference in happiness levels between any of the groups for both measures of happiness. These findings suggested the religious individuals were not happier than the nonreligious individuals.

To conclude, spirituality showcased a strong positive relationship with perceived happiness and academic achievement among adolescents. This knowledge can be used to focus on the development of spirituality among children and adolescents, which not only would help them in the aforementioned areas, but also many other social, personal and psychological arenas that a variety of research has showcased. The development of models for promotion and development of spirituality is still in its infancy stage. Although some spiritual development models have been theoretically suggested, their practical application and success is still not known. This could be an important area for future research. Also, comparative analysis across various countries and cultures could help throw more light on the spiritual aspects of adolescents. Having a more enlightened view about the importance, benefits and correlates of

A Study of Spirituality in Relationship with Perceived Happiness Status, Perceived Health Status and Academic Achievement among Adolescents

spirituality can have long term positive consequences in terms of personality development of children and adolescents.

REFERENCE

- Arnett, J. J. (2002). The psychology of globalization. *American Psychologist*, 57(10), 774-783.
- Battle, J., & DeFreece, A. (2014). The impact of community involvement, religion, and spirituality on happiness and health among a national sample of Black Lesbians. *Women, Gender, and Families of Colour*, 2(1), 1-31.
- Beacom, B. (2015). *What stresses teens out?* Sutter Health. Palo Alto Health Foundation.
- Bonner, K., Koven, L. P., & Patrick, J. H. (2003). Effects of religiosity and spirituality on depressive symptoms and prosocial behaviors. *Journal of Religious Gerontology*, 14 (2-3), 189-205.
- Curtis, A. C. (2015). Defining adolescence. *Journal of Adolescent and Family Health*, 7(2), 2.
- Francis, L. J., Jones, S. H., & Wilcox, C. (2000). Religiosity and happiness: During adolescence, young adulthood, and later life. *Journal of Psychology & Christianity*, 19, 245–257.
- Good, M., & Willoughby, T. (2008). Adolescence as a sensitive period for spiritual development. *Child Development Perspectives*, 2(1), 32-37.
- Greenfield, P. M., Keller, H., Fuligni, A., & Maynard, A. (2003). Cultural pathways through universal development. *Annual review of psychology*, 54(1), 461-490.
- Kelley, B. S., & Miller, L. (2007). Life satisfaction and spirituality in adolescents. In *Research in the Social Scientific Study of Religion*, 18, 233-262.
- Lee, W. Y. (2004). Transforming the First-Year of Experience of African Americans. Columbia, SC: University of South Carolina, *National Resource Center for the First-Year Experience and Students in Transition*, 93–107.
- Logan, B. C. (2013). *The impact of religious commitment and motivation on African American male academic achievement*. Unpublished Dissertation, Georgian Southern University.
- Lyon, M. (2012). The Top 10 Benefits of Spiritual Practice. HuffPost.
- Miller, W. R., & Thoresen, C. E. (2003). Spirituality, religion, and health: An emerging research field. *American psychologist*, 58(1), 24.
- Omotoso, O. and Olunkunle, R. (2007). Adolescents Transition: The Challenges and the Way out (African Perspective). In *Poster Presentation. 5th African Population Conference, Tanzania*.
- Sajjadian, P., Kalantari, M., Abedi, M. R., & Nilforooshan, P. (2016). Predictive Model of Happiness on the Basis of Positive Psychology Constructs. *Review of European Studies*, 8(4), 81.
- Shek, D. T. (2012). Spirituality as a positive youth development construct: a conceptual review. *The Scientific World Journal*, 1-8.

A Study of Spirituality in Relationship with Perceived Happiness Status, Perceived Health Status and Academic Achievement among Adolescents

- Sillick, W. J., Stevens, B. A., & Cathcart, S. (2016). Religiosity and happiness: A comparison of the happiness levels between the religious and the nonreligious. *The Journal of Happiness & Well-Being*, 4(1), 115-127.
- Singh, A., Kaur, P., & Singh, T. (2010). Spiritual intelligence, altruism, school environment and academic achievement as predictor of mental health of adolescents. *Journal of Exercise Science and Physiotherapy*, 6(1), 34.
- Steinberg, L. (2014). *Age of opportunity: Lessons from the new science of adolescence*. Houghton Mifflin Harcourt.
- UNICEF. (2011). *The state of the world's children 2011: adolescence-an age of opportunity*. Unicef.
- Wink, P., & Dillon, M. (2002). Spiritual development across the adult life course: Findings from a longitudinal study. *Journal of Adult Development*, 9(1), 79-94.
- World Health Organization. (2002). *The world health report 2002: reducing risks, promoting healthy life*. World Health Organization.
- Zohar, D., Marshall, I., & Marshall, I. N. (2000). *SQ: Connecting with our spiritual intelligence*. Bloomsbury Publishing USA.

Acknowledgements

The authors profoundly appreciate all the people who have successfully contributed in ensuring this paper is in place. Their contributions are acknowledged however their names cannot be able to be mentioned.

Conflict of Interest

The authors colorfully declare this paper to bear not conflict of interests

How to cite this article: Sharma, A(2018). A Study of Spirituality in Relationship with Perceived Happiness Status, Perceived Health Status and Academic Achievement among Adolescents. *International Journal of Indian Psychology*, 6(3), 74-84. DIP:18.01.047/20180603, DOI:10.25215/0603.047