






The relationship between religious attitudes and psychological symptoms in pregnant women referring to Urima health centers in 1395

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Abstract

Background and Objective: Religious beliefs constitute one of the crucial factors in human life and can have a marked effect on his mental health. Therefore, this study aimed to examine the relationship between religious attitudes and psychological symptoms in pregnant women referring to Urima health centers in 1395.

Method: This descriptive, cross-sectional adopted a correlational design. In this study, 350 pregnant women referring to health centers in rural and urban areas of Urmia in the fourth quarter of 1395 were selected through two-stage random cluster sampling. The instrument used for data collection comprised 3 parts: The first part, which was aimed to gather demographic information, had 8 questions; the second part had 25 questions and was intended to assess the participants' religious attitudes; and the third part contained 25 items measuring the participating women's depression, anxiety and stress. After explaining the purpose of study and gaining the participants' consent, questionnaires were administered among them. The data were analyzed through carrying out t-test, chi-square, linear regression and Pearson's correlation coefficient. All ethical issues were observed in the study and the researchers declared no conflict of interests.

Results: The results indicated a significant inverse correlation between religious attitudes, on the one hand, and depression, anxiety and stress, on the other hand. This shows that with the rise of religious attitudes, depression, anxiety and stress are reduced in pregnant women ($P < 0.001$). The findings also displayed significant, positive associations between depression, anxiety and stress. This means that higher degrees of depression will result in more anxiety and stress ($P < 0.001$).

Conclusion: According to the obtained results, stronger religious attitudes can improve the mental health of pregnant women.

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Summary

Background and Objective: Stress, anxiety and depression during pregnancy have negative effects on the outcomes of pregnancy (fetus and infants), such as premature birth, low birth weight, intrauterine growth

restriction (IUGR), mental health and behavioral problems (3-5). Moreover, babies who are born to mothers with mental disorders are more prone to mental disorders (e.g. depression) and the likelihood of educational failure is higher among them (1). Nowadays, one of the most effective factors in the development of health programs, especially in

developing countries, is religious strategies and religion can be an appropriate replacement for all influential items such as social, political, economic, and family factors and can contribute to the enhancement of satisfaction and health of the individual and society (2). Religion has been an integral part of human life in all periods and has a profound impact on all aspects of people's lives (3). Religious health reflects the relationship with God or infinite power (4). Therefore, staying away from religious beliefs paves the way for a person to become involved in internal conflicts, feelings of emptiness and disappointment in the face of adversity and psychological pressures. As a result, religious beliefs of individuals are considered to be very important and influential factors in people's mental health because they affect individuals' attitudes, knowledge and behavior (3). The relationship between religion and health is important in many ways since people who engage in religious activities or have religious beliefs enjoy greater mental health (5). Studies conducted so far have shown that religious beliefs have a very effective role in promoting mental health. Given the positive impacts of religious practices in mental health, especially reducing anxiety, depression and stress, in this study, we aimed to determine the relationship between religious attitude and psychological symptoms in pregnant women referring to Urmia health centers in 2017.

Method: This descriptive research adopted a correlational design. The sample included 350 pregnant women, who were selected through multi-stage sampling. The instrument used for data collection comprised 3 parts: the first part aimed to collect participants' demographic information; the second part was intended to gauge their religious attitude; and the third one measured the participating women's depression, anxiety and stress. The questionnaires were completed by pregnant women after explaining the research goals and gaining their consent. The gathered data were analyzed through carrying out t-test, Chi-square, Pearson correlation coefficient and linear regression.

Results: The results of showed that the mean score of religious attitude in pregnant women was $44/41 \pm 11/44$ (out of 100). In the classification of religious attitude, 76% of women had a low religious attitude and 24% had high attitude. Also, the results indicated that 31.7% of pregnant women were depressed, 32.5% had anxiety and 49.1% suffered from stress. Furthermore, it was found that religious attitude had statistically significant relations with age, education, occupation, type of delivery and economic status ($p < 0.05$). Moreover, significant, inverse correlations were detected between religious attitude with depression, anxiety, and stress ($p < 0.001$). Also, the results of linear regression analysis showed that religious attitude significantly predicted psychological symptoms in pregnant women ($p < 0.001$). More precisely, the increase in religious attitudes predicts 39% reduction in the variance of psychological symptoms in pregnant women.

Conclusion: The relationship between demographic variables and religious attitude showed that religious attitude had a significant relationship with education level, occupation, type of delivery, economic status and age of the subjects. In particular, women with 20 years of age or less had significantly lower religious attitude than other age groups. Besides, pregnant women who had higher academic degrees, had a history of cesarean delivery and good economic situation were at lower levels in terms of religious attitudes. The findings of the study are similar to Agapoor *et al.* (6), Zareipour *et al.* ($p < 0.05$) (7). However, in the study of Ashrafi *et al.* (8), there was not a significant relationship between demographic variables with mean scores of mental health ($p = 0.05$). Thus, the findings of this latter study are not consistent with our results.

In the present study, there was a significant and inverse correlation between religious attitude, on the one hand, and depression, anxiety and stress, on the other hand. Regression analysis also showed that religious attitude is a good predictor of psychological symptoms. In other words, religious attitude in pregnant women can be used as a predictor of mental disorders. This means that as religious attitude increases, depression, anxiety and stress declines in pregnant women.

Also, there was significant, positive correlations between depression, anxiety and stress, meaning that the rise in depression leads to the increase of anxiety and stress. This finding is consistent with the results of Dezutter *et al.* and Ya-Huiwen (9-10). They showed that individuals with internalized religious beliefs are religiously organized. Thus, people will regard internalized religious values as a goal and use them for fulfilling their needs. Therefore, these people are less anxious and use religion as a soothing mechanism for mental balance. The results of the study by Exline and Asgari *et al.* showed that religious beliefs are considered as a factor contributing to mental relaxation and lack of religion is associated with a high level of depression and even suicidal thoughts (11, 12).

Considering that the Iranian society is an Islamic society, the findings of this study are not surprising. From the findings of this research, it can be argued that stronger religious attitudes can improve the mental health of pregnant women.

Ethical Considerations

Compliance with ethical guidelines

The Ethics Committee in Biomedical Research of Shahid Beheshti University of Medical Sciences has confirmed this research.

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Conflict of interest

The authors declared no conflict of interest.

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