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**INDO AMERICAN JOURNAL OF
PHARMACEUTICAL SCIENCES**<http://doi.org/10.5281/zenodo.1050441>Available online at: <http://www.iajps.com>**Research Article****STUDY OF THE STATUS OF SPIRITUAL HEALTH OF THE ELDERLY
ADULTS****Milad borji¹, Hamid Taghinejad*¹, Zainab Suhrabi²**1-Department of Nursing, Faculty of Nursing and Midwifery, Ilam University of Medical
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Abstract;

Aims: spirituality as one of the important dimensions of the healthy concept, and is an effective factor on human consistency with the malady. This investigation has been done in order to determine the spiritual health status and its relationship with the demographic characteristics of the elderly adults.

Materials and the methods: this investigation was done in a sampling method available on 360 individual adults of 65 years old and upper in Ilam city. Questionnaire of the spiritual healthy from Islam view point was used in order to collecting of the this tool data including four items of the belief system, thought moral system, and life style which its reliability and validity has been confirmed in previous studies. Data have been analyzed by SPSS software using correlation coefficient.

Results: findings showed that spiritual health of the most of participants in above investigation, and also spiritual health has had a significant relationship with age, status of the disease addiction, status of the elderly adult life with his/her family and low education. But it had no significant correlation to gender.

Concluding: according to the spiritual health role in the individuals' consistency, necessity of the more attention for elderly adults' health and its promotion is necessitate for health care providers.

Keywords: spiritual health, dimensions of the spiritual health, Islam, elderly adult age.

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INTRODUCTION:

Phenomenon of the increase in elderly adults' community is one of the most important economic, social, and health challenges in 21th century. In developing countries, growth speed of the adult community is more than in developed countries. And nowadays, more than half of the elderly adult community of the world lives in developing countries.[1] .In Iran country, according to the community censuses in 1956, elderly adults compose 1183980(6.25%) of the country community, which gets 5118000(7.2%) in 2006. And it is estimated to be 2591200 individuals, that is, 24.62 percent in 2050.[2, 3] .

Based on to the reports of the country statistics institute, in census of 2011, total community of adults in Ilam city is 11204 individuals. So, adulthood is one important phenomenon in health of the world. Increase in adults community in present age, is so important that health institute of the world mentioned that a revolution is occurring in demographics.[4] .

Since number of elderly adults is increasing, attention to the adults problem is increasing fast. Attention to the case of healthy, and representation of their comfort and deferent aspects of their health in the society is very important.[5-7]. Spiritual health is an unique power station that correlates physical, psychological, and social aspects, and it is crucial in order to consistency to the disease. During decades, healthy had been analyzed on the bases of the special aspects. Analysis of the spiritual healthy was proposed by some clear-sighted persons which was noticeable for experts of the society health in different countries[8].Totally, spiritual health provides a correlative and coherent relation between internal powers of individuals. And, it is identified with the characteristics of peace, relativity, correlation, sense of the close relation to oneself, society and environment.[9, 10] .

According to the importance of the subject of spiritual health in adults, a significant increase in community of them, and this subject that few investigations have been done in this field. So, more investigations are needed about subjects related to the elderly adult community. Thus, investigators decided to do this investigation in order to determine the spiritual health rate of elderly adults of Ilam city from Islam view point.

MATERIALS AND METHODS:

In present study, 360 individuals of adults up to 65 years old in Ilam city participated who apparently, according to their first speaking with questioner, had no disorder in mind. And they had tendency to

participate in the study. Method of sampling was a compositional method including clustery and random sampling. For this purpose, investigator identified elderly adult individuals through referring to the health care institutes. And then, according to the share of each local, and accidentally, sampling was done. Questionnaire was completed through interview.

In order to collect the data, spiritual health questionnaire was used from Islamic view point. This questionnaire assesses spiritual health from Islam view point. In this questionnaire, grade 6 is given to the complete acceptability case, and grade 1 is given to the complete disagreement. In negative questions, grading was done in a revers way. Spiritual health questionnaire includes four items belief system, thoughtful system (5 questions), moral system (5 questions), and life style (5 questions) each of which has 6 grade. Each of these four scales including 5 clauses, and total grade of spiritual health is the collection of the grades of these four items which is 20-120. Finally, spiritual health was in the low level (20-40) grade, average spiritual health towards up (71-99) grade and spiritual health in up level (100-120) grade. In this questionnaire, variable if the spiritual health as the central philosophy of life, and also is the result of providing need of love, meaning, mercy. And belief system means that creation of all is done by Allah, thoughtful system means that we should use thinking to understand wisdom of the creation of world. Moral system means one knows himself/herself responsible for others and Allah. And finally, life style means how we reach paradise through obeying Allah.

Imannejad et.al determined reliability and validity of this questionnaire by the methods of the content validity and Alpha coefficient of cronbach 0.82.[11]. In this study, alpha – cronbach was 0.76.

Data analysis was done by SPSS software 21, and through the use of statistic tests t-test for variables with two groups and ANOVA was used for more than two group vriables. In order to analyze all variables, significant level was $P < .05$ was considered.

RESULTS:

Studied elderly adults included 139 male and 221 female individuals. The most frequency belonged to the group 65-70 years old (39.4), and the least one belonged to the age of up to 86 years old (3.3). 228 individuals of elderly adults (63.3) married, 125 individuals (34.7) widow, and 3 individuals (0.8) were single. Most of them were illiterate (52.8

percent), and only 11 individuals (3.8) were literate with university education.

Table 1: Details of variable and location of residence of various subjects

Variable	Location of residence			mean±SD	mean±SD	P - value		
	variable	frequency	percent					
Age	65 - 70	city	104	73.18-11.30	80.89-18.02	P < 0.0001		
		Village	35	103.8-14.46				
	71 - 75	city	43	78.60-9.27				
		Village	12	13.01-15.27				
	76 - 80	city	100	88.17-16.35				
		Village	12	99.33-10.38				
	81 - 85	city	31	101.0-8.79				
		Village	10	91.09-36.73				
86 and above	city	12	109.33-9.81					
	Village	1	41.00-0					
Sex	male	city	114	82.59-14.29	85.61-16.94	P < 0.29		
		Village	25	99.4-21-12				
Marriage	female	city	176	84.30-17.74	87.66-18.6	p< 0.001		
		Village	45	100/8-16/03				
	single	city	3	79.67-14.57				
		Village	0	0				
	Married	city	190	79.17-16.14				
		Village	38	99.75-18.68				
	divorcee	city	4	85.00-5.41				
		Village	0	0				
widow	city	93	92.78-13.58					
	Village	32	99.75-18.68					
Education	illiterate	city	145	91.32-15.84	93.43-16.5	p< 0.001		
		Village	45	99.91-17.01				
	reading & writing	city	66	73.53-10.21				
		Village	16	101.13-21.27				
	elementary	city	46	78.09-17.43				
		Village	6	92.00-14.87				
	High school	city	22	72.5-7.11				
		Village	2	117.5-3.53				
	collegiate	city	11	88.18-10.13				
		Village	1	120.00-0				
	Income level	Less than 100 thousand per month	city	165	100.84-16.84		91.38-17.54	p< 0.001
			Village	45	100.84-16.93			
Between 100 and 500 thousand per month		city	86	78.35-14.81				
		Village	22	97.77-20.04				
More than 500 thousand per month		city	39	73.38-7.65				
		Village	3	110.67-16.16				

Table 2: Average score of spirituals health in different areas in elderly subjects

Spiritual health domains	Number of questions		mean±SD	P - value	
compass	5	city	22.36 – 5.26	0.03	
		Village	24.4 – 4.96		
				22.75 – 5.29	
	5	city	21.62 – 5.33	0.001	
		Village	24.61 – 5.38		
				22.2 – 5.46	
	5	city	20/46 – 4/48	0.001	
		Village	24.82 – 5.7		
				21.31 – 5.04	
	5	city	19.17 – 5.55	0.001	
		Village	26.445 – 4.98		
				20.59 – 6.15	
	5	city	83.62 – 16.47	0.001	
		Village	100.3 – 18.87		
				86.87 – 17.98	

143 individuals (39.7) of adults were living with their wife/husbands, 104 individuals (28.9) alone, and 78 individuals (21.7) were living with their children. 210 individuals (58.3) had income lower than 100000 monthly, and only 42 individuals (19.2) have income more than 500000. 291 individuals of these adults (80.8) lived in city and 69 individuals (19.2) in rural. (see table 1)

Lowest level of the spiritual health in urban elderly adults had been in aspect of the life style, while, in rural adults, life style gets the higher grade of virtual health. And average total grades of the spiritual health of the rural adults was higher than urban adults, and was 10 (table 2). Maxim of the studied adults had average and high grade of virtual health (55.6 percent), and no one of adults had weak virtual health. 19.4 percent of individuals had average spiritual health towards low, and only 25 percent had high spiritual health.

DISCUSSION AND CONCLUSION:

The spirituality is effective on compatibility person to Chronic diseases, and can be affected by various demographic characteristic, so that the results of different studies indicated that of the positive correlation between spiritual health and physical health, mental and spiritual person[12-14]. This study has done to determine the status of spiritual health from the Islamic perspective and its relationship with demographic characteristics of elderly people in 93-94. More elderly subjects had with spiritual health intermediate and upward (% 55.6) and none of them were poor spiritual health. 19.4% of individuals with

intermediate down spiritual health and only 25% were with upward spiritual health.

In study of Sadrollahi et.al (1393), Jadidi and partners (1392), Saydalshohadaei et.al (1384) and Debnam et.al (2012) Also showed elderly people studied had owned intermediate spiritual health[15-18].

In study of Jadidi et.al the average score of spiritual health of elderly people living in nursing homes Tehran's Kahrizak was 96.26 ± 17.93 , that in ratio to this study the situation was better[16].

In this study there was no significant relationship between spiritual health and gender, which is consistent with the studies of Jadidi et.al (1392), Bussing and partners (2005).[16, 19]. but the results of studies Stefanaki et.al (2014) and study of Baldacchino et.al (2012) the spiritual health was further in women elderly[14, 20].

The results showed that spiritual health was significantly associated with being sick. So that older people were suffering from a chronic disease had lower levels of spiritual health, which is consistent with the results of study of Khalili et.al (1393) and also Raholm et.al (2004).[15]. It can be concluded that spiritual health in people with chronic illness, because of illness, lower than healthy persons. The result can increased their spiritual health with improved health status and quality of life of older people.

The relationship between spiritual health and education, it can be said that older people have lower levels of education, had higher spiritual health, which

it is not consistent with the results of study of Fatemi and Khalili[21].

The results showed that elderly people who lived alone, from the lowest level of spiritual health and as well as those who lived with his wife and children, had the highest level of spiritual health.

The strengths of this study can point to used from Islam's spiritual health questionnaire that in several studies that have been done in Iran in connection with spirituality. Than questionnaire has been used, it is not compatible with the Islamic and Iranian culture in studied elderly persons.

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Authors' Contribution

Study concept and design: hamid taghinejad, milad borgi; Analysis and interpretation of data: koroush sayemiri, hamid taghinejad; Drafting of the manuscript: hamid taghinejad, milad borgi, zainab suhrabi; Critical revision of the manuscript for important intellectual content: hamid taghinejad, milad borgi; Statistical analysis: koroush sayemiri

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