

A Comparative Study of Spirituality and Mental Health in spiritual Leaders (Muslim: Gaddi Nasheen, Christian: Fathers) and in adults

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Citation:

Ghafoor, Atia, Dr. Um i Lela and Baneeha Zainab" A Comparative Study of Spirituality and Mental Health in spiritual Leaders (Muslim: Gaddi Nasheen, Christian: Fathers) and in adults."Al-Idrāk Research Journal, 3, no.2, Jul-Dec (2023): 33– 54.

ABSTRACT

The present study was focused on the relationship between spirituality and mental health in spiritual leaders and adult population. It explores the multi-moderation role of spiritual leaders and adult population in term of spirituality and mental health. It was hypothesized that there is likely to be a relationship between spirituality and mental health in spiritual leaders and adult population. There are likely to be gender differences in spirituality and mental. The sample was comprised of (n=174) male and (n=128) female adults. Purposive and snowball sampling technique was used to select participants. For that purpose, the scale The Spirituality in the Workplace: Theory and Measurement by Edwards and Bagozzi (2000), Positive Mental Health (PMH) scale and semi-structured interview was conducted by the participants which used for quantitative data collection spirituality and mental health, qualitative to explore more in depth respectively. Pearson correlation, multi-moderation with help of SPSS and Jescio. Findings of the study showed that there is likely to be a significant negative relationship between spirituality and mental health. Results showed that there is significant positive relationship between spirituality and mental health in spiritual leaders (Gaddi Nasheen, Fathers/sisters) and adult population. Furthermore, more research is needed to better understand the impact of the spirituality on mental health.

Key Words: Spirituality, Mental Health, Spiritual Leaders, Adult Population, Spiritual Leaders

Introduction

Today, around ninety percent of people around the world are involved in a roughly sort of spiritual activity.¹ According to recent research, spirituality can be used as a social and psychological tool to help people deal with

¹ Koenig HG. Research on Religion, Spirituality, and Mental Health: A Review. The Canadian Journal of Psychiatry. 2009;54(5):283-91.

stress. People who have spiritual experiences exhibit clear shifts in their outlook on life, other people, and themselves that indicate a turn away from materialism. The formation of values that support both individual and social survival from damaging personality traits. This could significantly alter the hostile environment we are increasingly living in.² The target population is religious leaders in Muslims and Christians and adult population in Pakistan.

According to Hooder, spirituality is a complex construct. Because of this, each of its numerous definitions varies depending on the dimension the author's focus. The idea of spirituality has evolved over time. Originally associated with religion, its meaning has expanded over the past few decades to encompass additional ideas like determination and give meaning in life, connectedness to others, peace, harmony & coherence, and well-being.³

A style of being and experiencing that is considered by definite recognizable ideals about oneself, others, nature, life, and whatever one deems to be the final are those that are said to as spiritual.⁴

Spirituality is recognized by the feelings and sense or belief to considered someone greater than oneself, more than sensory experience and greater is the part of the divine one. It is also a sense of peace and purpose which produce the importance of life and connections with peoples if they have no specifics any set of spiritual values.⁵

There are seven definitions for mental health which are the lack of illness, suitable social behavior, freedom from worry and guilt, personal competency and control, self-acceptance and self-actualization, unification, and organization of personality, open minded and flexibility. Mental health is referring as psychological, emotional, and social well-being of the individual which is very important for a healthy lifestyle. Mental health depends upon the absence of any type of psychological issue like anxiety, depression and any other type of disorders and an individual

² Kaur D, Lone ZA. Religious practices and spirituality as predictors of mental health wellbeing among religious preachers. *International journal of health sciences*. 2022;6(S2):8883-91.

³ Koenig HG. Research on Religion, Spirituality, and Mental Health: A Review. *The Canadian Journal of Psychiatry*. 2009;54(5):283-91.

⁴ Elkins DN, Hedstrom LJ, Hughes LL, Leaf JA, Saunders C. Toward a Humanistic-Phenomenological Spirituality: Definition, Description, and Measurement. *Journal of Humanistic Psychology*. 1988;28(4):5-18.

⁵ Out R. 2019.

enjoy balance lifestyle.⁶

Mental health, according to the,⁷ is the state of mental wellbeing that enables a person to successfully manage life's stresses, study and work effectively, realize their potential, and contribute to the welfare of their community. It is seen as an important aspect of health and wellbeing that aids in wise decision-making and improves communities. Everybody's fundamental right is to have a healthy mental life.

Mental health is not separated, it is the part of overall health which defines with three different ways means absence of disease, normally perform all functions and which is within oneself and one social and physical environment.⁸

Literature Review

A study's findings indicate that there is no meaningful connection between spirituality and mental health because of the concepts of spirituality and religion not being conceptually clear. Many researchers conducted on the spirituality effects the mental health of the individual in which describes that high the spirituality level lowers the mental health issues.⁹

One research which is conduct on the quality of life with the elements of mind, body, and spirit by give intervention of regular health measures in cancer patients. This study outcomes that physical health, emotional health, and quality of the life enhanced with the help of the spirituality.¹⁰

In physical as a well as in mental health spirituality effected by the spirituality those individuals achieve high scores in the spirituality having good mental health and vice versa. In other words, people with high level of the mental health more assured they are strong in spiritual.¹¹

There are other outcomes that many other factors affect the relationship of spirituality and mental health like contextual factors which is included type

⁶ Why Is Health Not Just The Absence Of Disease? | Diet and Nutrition, Healthy Lifestyle [Internet]. 2020.

⁷ Mental Health. World Health Organization; [Internet]. 2022.

⁸ Bhugra D, Till A, Sartorius N. What is mental health? International Journal of Social Psychiatry. 2013;59(1):3-4.

⁹ Garssen B, Uwland-Sikkema, N. F., & Visser, A. . How Spirituality Helps Cancer Patients with the Adjustment to their Disease. . Journal of Religion and Health. 2014;54(4):1249–65.

¹⁰ Mytko JJ, & Knight, S. J. . Body, mind and spirit: towards the integration of religiosity and spirituality in cancer quality of life research. Psycho-Oncology. 1999;8(5):439–50.

¹¹ Duberstein PR, He H, King DA, Lyness JM, Seaburn DB, Tu XM. Religious involvement and depressive symptoms in primary care elders. Psychological Medicine. 2007;37(12):1807-15.

and frequency of the religious practices, the cultural and social context in which spirituality practiced and the last individual personal beliefs and experiences in one research describe that spirituality has negative effect on the mental health because no conceptual clarity in the religiosity and spirituality.¹²

In a survey three different school of thoughts presented by the three different group of psychologists. The objective of that survey to find out the values system which present in the clinical setting or practices. There are 315 participants, including spiritual directors, psychologists who are members of the Christian association for psychological studies (CAPS), and psychologists who are members of the American psychological association (APA), while the psychologist is employed in a spiritual environment. According to the findings, spiritual directors outperformed American Association and Christian Association of Psychological Studies members and psychologists in self-awareness and forgiveness.¹³

Many intangible issues discussed and explored in recent years while the aim of this research to determine the spirituality in the spiritual leaders. In which top Turkish religious leaders and apply the test of model to find out the results. There are weak, positive relationship between the spiritual leadership and issues of spirituality.¹⁴

This research completed in the light of the Holy Quran in which the characteristics of the Mutaqeen is Taqwa which means spirituality and responsibility. It hypothesized that there is effective relationship between the spirituality and leadership. The research method is used is cross sectional design (n=200) while the scale of the spirituality is self-constructed, and the scale of the leadership effectiveness is taken from the literature already constructed measurements. By using SSPS apply the multiple and hierarchy regression model and testified the hypothesis. Findings describe the positive relationship between the leadership and spirituality.¹⁵

¹² Koenig HG. Research on Religion, Spirituality, and Mental Health: A Review. The Canadian Journal of Psychiatry. 2009;54(5):283-91.

¹³ Ayranci E, & Semercioz, F. The Relationship between Spiritual Leadership and Issues of Spirituality and Religiosity :A Study of Top Turkish Managers. . International Journal of Business and Management. 2011;6(4).

¹⁴ Ayranci E, & Semercioz, F. The Relationship between Spiritual Leadership and Issues of Spirituality and Religiosity :A Study of Top Turkish Managers. . International Journal of Business and Management. 2011;6(4).

¹⁵ Zandi G, Sulaiman M, Rashed N. Spirituality and Leaders Effectiveness: An Islamic Perspective. Asian Economic and Financial Review. 2015;5(1):155-66.

This research examined the spiritual experience in the spiritual leaders in Christian schools setting. The purposed to determine the spiritual experience in the Christian spiritual leaders. For that recorded interview conducted by the 12 Christian spiritual leaders while the data analysis is used were Rudestam and Newton's method of researcher description. While the findings found that spiritual experience is active in the spiritual leaders which enhance the personal and spiritual growth, relation with God, and supporter for the members of the community.¹⁶

This research conducted to investigate the mental health in the spiritual leaders of different religion sample size (N=114). This is quantitative research to find out the result by using the SPSS hierarchical regression which showed modern spirituality and mental health are effectively correlate and spiritual leaders acquired good mental health.¹⁷

Spirituality is the vital factor of our civilization this research is conducted on the religious preachers (N=100) in which female (N=50) and male (N=50) and the test applied on it are validate and reliable used in previous researches. According to this study, spiritual practices have an impact on mental health. And positive relationship between religious practice and spirituality. Means high level of the spirituality found in the spiritual leader due to preaching and which enhanced their mental health. So, the religious leaders enjoy the sound mental health while there is significant gender difference among religious preachers.¹⁸

In literature research found that religious leaders also experienced the mental disturbance like feeling of grandiose narcissisms. To find that research conducted to take the religious leaders with the sample size 274 to find out the mental health. Overall half of the sample show the symptoms of the grandiose narcissisms PTSD means in some context it also effects the mental health of the spiritual leaders.¹⁹

This study uses the General Health Questionnaire (GHQ) and the Spirituality Assessment Inventory (SAI) to collect data on the effects of

¹⁶ Banke S, Maldonado N, Lacey CH. Christian School Leaders and Spirituality. *Journal of Research on Christian Education*. 2012;21(3):235-64.

¹⁷ Farias M, Underwood R, Claridge G. Unusual but sound minds: Mental health indicators in spiritual individuals. *British Journal of Psychology*. 2013;104(3):364-81.

¹⁸ Kaur D, Lone ZA. Religious practices and spirituality as predictors of mental health wellbeing among religious preachers. *International journal of health sciences*. 2022;6(S2):8883-91.

¹⁹ Ruffing EG, Bell CA, Sandage SJ. PTSD symptoms in religious leaders: Prevalence, stressors, and associations with narcissism. *Archive for the Psychology of Religion*. 2020;43(1):21-40.

spirituality on mental health in healthy people (N=50). Find out the result by using SPSS with statistical tool Pearson correlation which show spirituality is positive correlate with mental health.²⁰

Rationale

In current research work on spirituality and mental health in different domain like in clinical complication, nursing there is no research found relationship between mental health and spirituality, with patients those suffered with physical or mental health. But in one research a future direction that Sample of the study is taken from the general population of college students only; it would be more suitable to select the sample from the spiritual practicing population also for such types of the study present. That's a research gap where there is no research found on the relationship of spirituality and mental health in spiritual practicing population. That the unique addition in the research work in Pakistan social context. So, I choose the population who's having high status in religion point of view (Muslim's: Gaddi Nasheen, Christian: Fathers) and those adults (age range from 18 to older) who's having normal status.

Method

Study Design

Survey research design is used for the Research. Also use the cross-sectional design, mixed method design investing difference in the population who's having religious status or without religious status.

Objectives

1. To research the connection between spirituality and adult population, religious leaders, and mental health.
2. To better understand how spirituality affects the mental health of adults and various religious leaders.
3. To investigate the mean differences in gender, Religion, and with a religious status or without religious status in Spirituality and mental health.

Hypothesis: There are following Hypothesis.

1. There is a significant positive relationship between Spirituality and Mental health in spiritual leaders and adult population.
2. There are significant differences between the population with spiritual leaders or adult population.
3. There are significant differences between the Christian and Muslim spiritual leaders in spirituality and mental health.

²⁰ Sodhi R, & Dr. Manju. Spirituality and mental health among normal and chronic disease group. International Journal of Research Studies in Psychology, 2(1) 2012;2(1).

4. Muslims and Christian adults are significantly differed in terms of Spirituality and Mental health.
5. There is significant difference between the male and female in the spirituality and mental health.

Sample

There are 195 participants participating in the mixed method research in which 20 that participants whose participate in qualitative as well quantitative research are part of qualitative research. There is two group of spiritual leaders one is Muslim's leaders (Gadi Nasheen) and second Is Christian's leaders (fathers). While also conduct data from the without spiritual status adult people (according to APA 18 or older). If a person has the following criteria, then he/she is the part of research if he/she never fulfilled the criteria not the part of research.

Inclusion Criteria; If the participants have spiritual status and belong to Christian and Muslim religion, he/she are falls in inclusion criteria. On the other hand, if the participants are adult having age equal are more than 18 and belong to the Muslim and Christian religion falls in the domain of inclusion criteria.

Exclusion Criteria; If a person is not being to Muslim and Christian religion, having no spiritual status and below the age of 18 is not eligible to be a part of the research. If a person fills the incomplete form also exclude his data while in a case a participants want to withdraw his/her data, they also fall in the exclusion criteria.

Sampling technique; The sampling techniques is snowball is used to approach the religious leaders and random sampling used to collect data from that population who's not having any religious status.

Research Instruments

Personal information sheet this is the front page of the entire questionnaire booklet, where the participant has filled out all their own personal information. It has guidelines, name, gender, age, and a few questions about the concept of spirituality.

The Spirituality in the Workplace: Theory and Measurement; To illustrate reflections or manifestations of the spirituality construct in this 16-item, we used reflective measures.

Positive Mental Health (PMH); Positive Mental Health (PMH) is a German Version⁴ Likert scale brief questionnaire with psychometric properties of PMH- scale using classical test theory according to the Rasch model. It is a self-reported tool with nine items that are rated on. 4 points (Vaganian et al., 2022).

Semi-structure Interview; To achieve the qualitative data, I conducted the semi-structure interview. There are seven questions of the interview that are structured according to the spirituality and mental health while when participate answer have flexibility to ask question from the answer of the participants.

Procedure

There are three phases to collect the data from the participants which are given below. While also collected qualitative data and conducted the semi-structure interview from the spiritual leaders. The leading variable is spirituality and dependent is mental health.

PHASE 1

Tool Translation: Firstly, translation of The Spirituality in the Workplace and PMH are stated below in a flow chart (MAPI Research Trust, 2012).

Conceptualization of Definition: Original scales were translated to examine simplify which is easily understand for the population. It is linguistic translation Urdu to English which is understandable in own social context and population which is target.

Recruitment and Briefing: The researcher, supervisor (Dr. Ume Laila), co supervisor was involved in that process. They have Urdu language as a native language as well as have command on the fluency of the English language. They guided me in the translation of the tool.

Forward Translation: The tool of The Spirituality in the Workplace and PMH (Positive Mental Health) were translated from original language (English) to the translated language (Urdu) with the help of the supervisor and co-supervisor.

Backward Translation: Now it is compulsory that researcher put the three translations of the translated scale into the original scale. So, for that purpose the researcher composed three different translated copies by the expert in English language as well as Urdu language from translated language to original language on each scale.

Proof Reading: This is done by checking the spell, grammatically, words, and any other type of the mistake which is offensive in reading.

Try Out: To assess the reliability, understanding of the items to participants, take a try out and after taking a committee approach find out the results and finalize the tool translation.

Phase 2:

Quantitative Research:

The data is collected from the spiritual leaders and who's not the spiritual leader's means common adult population the techniques is used is snowball for the spiritual leader (Muslim's leader and Christian's leaders). The data is collected through a survey and there are two questionnaire one is on the mental health and other on the spirituality. In these studies we investigate the relationship between the mental health and spirituality.

Phase 3:

Qualitative Data: For the more exploration collected data through qualitative research with the help of semi-structure interview. The purpose of the interview to explore the more information from the participants. The participants of this part are spiritual leaders Muslims and Christian.

Summarizing Interview

The high frequency participants mentioned that spirituality is the recognition of the God while on the second some participants mentioned that the love of Allah and his prophet on third, participants mentioned that spirituality is the worship of Allah a little no. of people mentioned that to serve humanity is spirituality.

The high frequency of participants mentioned mental health is absence of the any type of mental distortion. Secondly, participants mentioned that a person is mentally healthy if he has concept of right and wrong. Third, participants mentioned that satisfaction is positive mental health. While some participants mentioned that if you spend your life according to Allah and his prophet's teaching means you are mentally healthy.

The frequency of participants who's mentioned you see the world according to passenger. While secondly, participants mentioned that see the world with love. Thirdly, you see the world with a positive eye. The low frequency of the participants who's mentioned that see the world according to the Islam.

The highest frequency of the participants to create a connection between Allah and humans is love with creatures. Second high frequency is that it is a secret, and it is created by following the teaching of Allah with pure heart. Third, high frequency is that create bond through prayers (namaz) the least frequency is that if you have unconditional love.

The high frequency of the participants the aim of the human life is to recognize own self and serve humanity. The second high frequency is that worship of Allah. The third high frequency is to fulfill the promise of Allah at the spot of creation. The fourth high frequency to ignore own self and work for Allah. The least number of participants mentioned that top train the child in good manners is the aim of life.

The highest frequency to communicate with Allah according to teaching of the holy prophet Muhammad S.W.A. the second highest frequency is communicated like a master and servant. Third, high frequency is that communicate through prayers. The least participants rely that if you want to communicate with Allah firstly you keep focus on cleanliness of soul, environment.

All the participants agree that spirituality influences mental health. High frequency of participants who debrief that if you spend life according to the Islamic teaching it's means you are satisfied with your life and you are mentally healthy. Secondly, frequently if you raise your children, living with Allah means you are peaceful in your life.

Results:

The collective data was analysed using Statistical Package for Social Sciences (SPSS) and Correlation, moderation was used for this purpose.

Variables		<i>f</i>	%
Social status			
	Gaddi Nasheen	41	23.4
	Fathers/sisters	10	5.7
	Adult population	124	70.9
Gender			
	Male	93	53.1
	Female	82	46.9
Religion			
	Muslim	112	64.0
	Christian	63	36.0
Age			
	Young adulthood	110	63
	middle adulthood	65	37

Note: Table 1 indicates the sample characteristics of our sample.

These are the demographics of the sample, social status has three categories which are Gaddi Nasheen ($f=41$, $\%= 23.4$), Father/sisters ($f=10$,

%= 5.7), adult population ($f=124$, %= 70.9), secondly gender also has two categories female ($f=93$, %= 53.1) and male ($f=82$, %= 46.9). Religion also has two categories; one is Muslim ($f=112$, %= 64) and other is Christian ($f=63$, %= 36.0). Age has two categories, young adulthood and second middle adulthood according to Erickson.

Table 2:

Psychometric properties of the study variables

Scales	Subs	M	SD	Min	Max	R	Skewness	S.E Skewness	kurtosis	Std. error of kurtosis	Cronbach's α
T_SPR		66.14	10.512	18	80	62	-1.512	.184	3.227	.365	.902
	TLA	25.84	4.27	6	30	24	-1.703	.184	3.834	.365	.843
	TAn	20.26	3.9	6	25	19	-.672	.184	.331	.365	.765
	TLP	20.02	3.8	6	28	22	-.954	.184	1.135	.365	.732
T_MH		20.81	4.358	6	40	34	-.144	.184	2.070	.365	.696

Note: TLA = Total Spirituality Relationship with Allah, TLP = Total Spirituality Relationship with people, TLA_n = Total Spirituality Relationship with nature and living organisms, T_{spr} = total Spirituality, T_{MH} = Total mental health

Table 1:*Correlation Matrix between Study Variable (N = 174)*

Variable	1	2	3	4	5
1. TLA	-	-	-	-	-
2. TLP	0.702 ***	-	-	-	-
TLA _n	0.617 ***	0.635 ***	-	-	-
3. T _{Spr}	0.892 ***	0.882 ***	0.854 ***	-	-
4. T _{MH}	0.237 **	0.216 **	0.375 ***	0.315 ***	-

*** $p<.001$, ** $p<.01$

Note: TLA = Total Spirituality Relationship with Allah, TLP = Total Spirituality Relationship with people, TLA_n = Total Spirituality Relationship with nature and living organisms, T_{spr} = total Spirituality, T_{MH} = Total mental health

Table 3 indicates the relationship between spirituality and mental health. Findings show that spirituality is significantly positively related with mental health ($r= 0.315$, $p<.001$), while relation with subscale of spirituality with mental is that spirituality (relation with Allah) is significantly positively related with mental health ($r= 0.237$, $p<.01$), spirituality (relation with people) is significantly positively related with mental health ($r= 0.216$, $p<.01$), spirituality (relation with nature and living

organisms) is significantly positively related with mental health ($r= 0.375$, $p<.001$).

Table 4:

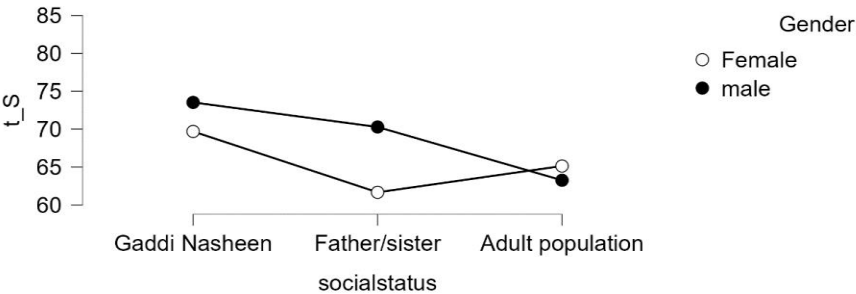
Descriptive of spirituality in Two-way ANOVA according to gender

Variable		M	SD	N
Adult Population				
	Male	65.136	11.693	66
	Female	63.255	9.340	55
Father/sister				
	Male	61.667	23.288	3
	Female	70.286	4.071	7
Gaddi Nasheen				
	Male	69.696	8.911	23
	Female	73.529	6.559	17

Note: This table descriptive indicates that Adult population with spirituality according to the gender(N=121) in which male (M= 65.136, SD = 11.693) and female (M= 63.255, SD = 9.34) while in Fathers/Sisters (N=10) male (M= 61.667, SD = 23.288) and female (M= 70.286, SD = 4.071) and the Gaddi Nasheen (N=40) in which male (M= 69.696, SD = 8.911) and female (M= 73.529, SD = 6.559).

Figure 1:

Graphical representation of descriptive of spirituality in two way ANOVA



according

Interpretation

This figure indicates the spirituality in the Gaddi nasheen is highest while male are higher in spirituality rather than female. In father/sisters the

spirituality level in male is comparative higher than female at the same time the spirituality in the male is lower than female.

Table 5:

Two-way ANNOVA for the spirituality

	df	SS	MS	F	<i>p</i>	η^2	Post Hoc
Social status	2	1622	1923.7	7.77	0 ***	.084	1>2
Gender	1	182	757.5	1.75	0 **	0.009	
Interaction	2	405	673.7	1.95	0 **	0.021	
Residual	1721	409, 165	104.35				

Note. This table indicate that there are significant mean difference in spirituality of social status and gender. Findings also find that participants according gender (MS=757.5, SS= 182) has lower spirituality than those has greater level of spirituality participant according to social status (MS=1923.7, SS= 1622) with the with the small effect size η^2 0.02.

Table 6:

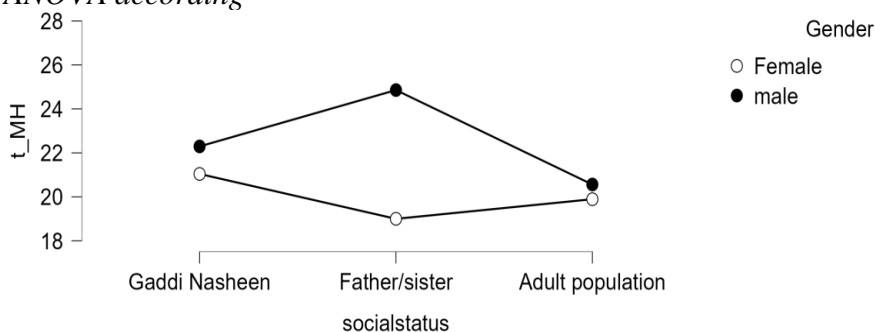
Descriptive of mental health in two way ANOVA according to gender

Variable		<i>M</i>	<i>SD</i>	<i>N</i>
Adult Population				
	Male	19.892	4.082	65
	Female	20.561	4.115	57
Father/sister				
	Male	19.000	5.568	3
	Female	24.857	1.773	7
Gaddi Nasheen				
	Male	21.042	4.227	24
	Female	22.294	3.601	17

Note: This table descriptive indicates that Adult population with spirituality according to the gender(N=122) in which male (M= 19.892, SD = 4.082) and female (M= 20.561, SD = 4.115) while in Fathers/Sisters (N=10) male (M= 19.00, SD =5.568) and female (M= 24.857, SD = 1.773) and the Gaddi Nasheen (N=41) in which male (M= 21.042, SD = 4.227) and female (M= 22.294, SD = 3.601).

Figure 3:

Graphical representation of descriptive of mental health in two way ANOVA according



Interpretation:

This figure indicate that the mental health is high comparative others. While mental health of male in Gaddi Nasheen is higher than female. Secondly, the mental health in male in father and sister is highest while in female lower than male. At the same in adult population the mental health of the male is higher than female.

Table 5:

Two-way ANNOVA for the spirituality

	df	SS	MS	F	p	η^2	Post Hoc
Social status	2	76.724	38.362	2.361	0.1 **	0.027	1<2
Gender	1	99.257	99.257	6.108	0.01***	0.035	
Interaction	2	53.335	26.668	1.641	0.1**	0.019	
Residual	167	2713.626	16.249				

Note: This table indicate that there is significant mean difference in spirituality of social status and gender. Findings also find that participants according to gender (MS=99.257, SS= 99.257) has higher positive mental health than those has lower level of mental health participant according to social status (MS=38.362, SS= 76.724) with the with the small effect size $\eta = 0.01$

Hypothesis Summary

This research is exploratory nature and in-depth study of spirituality and mental health. In this research target population is highly specified

population whose are spiritual leaders and genialized population adult population. The aim of this research to explore the relationship of spirituality and mental health with the help of mixed method research designed. Findings describe that there is positive relationship between spirituality and mental health in spiritual leaders and adult population, and there is significant difference between the spiritual leaders and adult population, and there is significant difference in spirituality and mental health on the base of the gender differences. The whole hypothesis has been approved by findings.

Discussion

The current study was proposed to explore the relationship between spirituality and mental health in spiritual leaders and adult population. The research was designed to get an in depth understanding that how spirituality and mental health related with each other. To explore it, used the spirituality at workplace scale, positive mental health scale, and semi-structured interview in which 174 participants participate and data entered in the SPSS and then processed for analysis. All three scales psychometric characteristics were established. Frequencies and percentages were computed for gender, age, social status, and religion. Findings indicated that 53.1% male and 46.9 % female. Most of participants range of age is 19-40 young adulthood and 40-56 middle adulthood, according to the social status the percentage of the Gaddi Nasheen are 41%, fathers/sisters 10%, and adult population is 70.9%. there are two categories of the religion the percentage of the Muslim 64.0% and Christian is 36.0%. Mean and standard deviation were computed. Findings suggests that our data is regularly distributed because skewness and kurtosis have significant values within an acceptable range. Alpha coefficient of all scales was computed. There is a significant positive relationship between Spirituality and Mental health in spiritual leaders and adult population, and significant differences between population with spiritual status or adult population on the other hand, there are difference found in Muslims and Christian in terms of Spirituality and Mental health. There is significant difference between the male and female in the spirituality and mental health.

It is hypothesized that there is significant relationship between the spirituality and mental health. Findings proves that there is significant relationship between the spirituality and mental health. Another proves it that if the spirituality high then there are low mental issues arise (Garssen et al., 2020). A meta-analysis also supports it that there are positive relationship between spirituality and mental health (Ronneberg et al.,

2016). Other research also supports this finding, that people with high mental health are good n spiritual (Garssen et al., 2021).

It was hypothesized that spiritual leaders having spirituality and good mental health like adult if they achieve high level of spirituality, they achieve high status of spirituality rather than adult population a recent research support that spiritual leadership can enhance your spiritual and improve positive mental health (Zandi et al., 2015).

It is hypothesized that there is significant difference between spiritual leaders of Muslim and Christian. This research also finds out the significant difference of the spirituality and mental health in Muslim and Christian. Research supports our hypothesis and describe those spiritual leaders has high in spirituality. This research was conduct on the Christian seminary and the findings of that research that spiritual leaders are high in spirituality (Ayranci & Semercioz, 2011)

Conclusion

Present study set to explore the relationship between spirituality and mental health in spiritual leaders and adult population. Findings describe that population with high spirituality having positive mental health. And if spiritual leaders achieve high spiritual their moderation comes and get more positive mental health than adult population. While in gender differences female are high in spirituality and having good mental health rather than male.

Limitations

The study faced a series of limitations that impacted its effectiveness and results. A key issue was participant confusion about the purpose and use of the data collected, leading to difficulties in obtaining accurate and willing responses. The research was constrained by time, as it had to be completed within a semester, limiting the depth of analysis and breadth of data collection. Financial limitations were also a significant challenge, with a limited budget potentially restricting the study's scope and the resources available for thorough data collection.

Approaching and engaging with spiritual leaders, as well as convincing participants to complete forms and partake in interviews, was notably challenging. This was exacerbated by a religious divide between the researcher and the participants, which hindered open and effective communication. Language barriers presented additional difficulties, with participants from diverse linguistic backgrounds necessitating the hiring of a translator, further straining the budget and possibly affecting data accuracy.

Another issue was the participants' hesitancy and lack of seriousness in engaging with the study, which required extra efforts for persuasion and participation. The research was limited by its sample range and diversity, which might have influenced the representativeness and applicability of the findings. Moreover, a fundamental challenge was the absence of a clear conceptual understanding of spirituality and religiosity within the study, leading to potential inconsistencies in participant responses and interpretations. These challenges underscore the need for more comprehensive planning, effective communication, and strategic engagement in future research within this area.

Recommendation

To enhance the depth and applicability of this study on spirituality and mental health, several key recommendations are proposed. Firstly, the research should be expanded to include a wider array of religions, particularly focusing on Muslim and Christian communities, to gain a more comprehensive understanding across different faiths. Additionally, adopting a cross-cultural approach, especially considering the current focus on Pakistani ethnicity, would significantly enrich the research's relevance and universality. It's also recommended to extend the study to encompass adolescents, which could provide critical insights into early intervention strategies in mental health. Focusing solely on qualitative methods in future studies could allow for a deeper exploration of individual experiences and perceptions. Budget planning is crucial; ensuring adequate funding for the chosen research population is vital for the feasibility of the study. An experimental design that develops and tests specific techniques for enhancing spirituality and improving mental health would offer practical applications. Longitudinal studies to observe long-term effects, engaging with community leaders for diverse perspectives, and considering the policy implications of the findings are also recommended. These steps will broaden the understanding of the relationship between spirituality and mental health and enhance the study's impact in both clinical and community settings.

Implication

The implications of this research are multifaceted and significant. Firstly, it highlights the importance of incorporating spirituality into mental health practices, offering a new dimension of support for those with psychological disorders. Secondly, the research underscores the necessity of addressing the mental stress that accompanies physical disorders, suggesting that a holistic approach to health care can be more effective. In

clinical settings, these findings can revolutionize treatment plans by integrating spiritual and psychological therapies to manage complications more effectively. Furthermore, the research emphasizes the critical role of reconnecting with nature and nurturing interpersonal and intrapersonal relationships in the digital age. This can lead to healthier, more balanced lifestyles, potentially reducing the prevalence and impact of mental health issues in society.