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RESEARCH ARTICLE

PREDICTION OF ASSESSMENT OF QUALITY ASSESSMENT IN HIGHER EDUCATION, BASED ON SPIRITUAL HEALTH OF COLLEGE STUDENTS, ILAM UNIVERSITY OF MEDICAL SCIENCES

¹Seyed Rahmatollah Mousavimoghadam, ²Reza Dousti, ^{*2}Behrouz Mahmoudi and ³Neda Zahirikhah

¹Department of Islamic Theology Faculty of Medicine, University of Medical Sciences, ILAM, Iran

²Master Student of in General Psychology Research Science ILAM, Iran

³Master of Educational Psychology Islamic Azad University Science and Research Branch of Khuzestan Ahvaz, Iran

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ABSTRACT

Introduction: One of the common methods for assessing of quality in higher education, students' point of view, in this regard, and spiritual health, as one of health, because it is the integration of other dimensions, and involve two later, and religious.

Methods: This research is descriptive and is the correlation type. The population of this study consisted of all students of ILAM University of Medical Sciences, in the year 1393, at the University, were enrolled. In this research, stratified sampling, was used. According to Morgan, 311 students, as the sample was selected. In this research, three questionnaires: demographic characteristics, and Alison PULUTZIN spiritual health questionnaire, and a questionnaire on the quality of higher education in York (1995), was used.

Discussion: The results of the Pearson correlation coefficient showed that the level of quality in higher education, solidarity and spiritual health, there is a significant positive And male students assess the quality of higher education, was somewhat higher, Also, the results of this research indicate that, between male and female students, in terms of spiritual health, there are significant differences. Also, the results of simple linear regression analysis showed that the prediction quality assessment in higher education students, according to their spiritual health, is significant.

Conclusions: This study showed that, based on spiritual health of college students, they can evaluate the quality of higher education, as predicted; And, accordingly, be aware of the spiritual health of students, in their assessment of the quality of education, the university plans to use it effectively.

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INTRODUCTION

In the past two decades, developments and challenges, such as globalization, development of information technology and communications, knowledge-based economy, a slight increase in students, and declining per capita funding, as well as increasing competition between HEIs at international level and the demand for greater accountability, attention to quality higher education is targeted and caused greater emphasis on the need for performance evaluation in the higher education system in the world have. In this regard, the results of research conducted shows that the success of efforts to improve quality, rooted in the will to assess the country's higher education system (Hatami et al., 2011). System of higher education as the most significant investment in human resources a major role in training and manpower efficient is responsible.

These systems a significant share of the country's budget account and decisive role in various aspects of economic social cultural and political society. Therefore, ensuring the quality of their performance, in order to prevent the loss of human capital and material and also having the ability to compete in the future world, where quality is the most important component of any organization is to survive, necessity it is undeniable (Maarufi et al., 2007). Quality in Higher Education a special case of the system, the result of a series of measures and actions identified to meet certain social needs, at one point in time and specific location (Mohammadi, 2005). According to UNESCO, the quality of higher education is a multidimensional concept that, to a large extent, the state university system, environment, and mission, or conditions, and standards of discipline depends. Accordingly, we cannot say that the quality of a general theory or general pattern is achieved (Bazargan, 2004). One of the common methods for assessing quality in higher education students' point of view in this regard. Much research, the factors relevant to assessing the

***Corresponding author: Behrouz Mahmoudi**

Master Student of in General Psychology Research Science ILAM,
Iran.

quality of the training is done, can the student learning style (MeKeachie, 1990), learning abilities, personal growth, and expected student grades (Jacobs, Lucy, 2004), student attitudes to the course, professor and university and student demographic characteristics (Maarufi *et al.*, 2007), pointed However, several factors led to the shortcomings and inadequacies of the assessment of the quality of education is, Evaluation is based on students' views about the quality of teaching, indirectly, ignoring context, the quality of education provided daily. One factor that seems in assessing the quality of education, the universities involved is spiritual health of students.

Spirituality is Twin humans. The beginning of creation, God's Spirit, He breathed in and spirituality formed the major part of human life and human existence and consequently he, being full of people became familiar with the spirit and spirituality. McDonald (2009), in their model, spirituality, including the five components of spiritual beliefs, spiritual experiences, flexible sense of meaning and purpose, a belief in the possibility of Para psychological phenomena and faith to believe in the existence of a higher power knows (Sohrabi and Naseri, 2011). What has caused structural spirituality is conceptualized as the intelligence, those observations and scientific findings expressing the fact that, applied to specific patterns of thoughts, emotions and behavior in everyday life, may increase the consistency and well-being of humans (Van Nass and Kasl, 2003; Daaleman *et al.*, 2004).

The term is spiritual health, the first time in 1971, by David MUBERG, was established under the spiritual well-being (Anonymous, 1979). According to Ellison (1983), the concept of spiritual well-being which is composed of two components, welfare, religious, symbols associated with a higher power, God and existential well-being, psychosocial elements and a sign of feeling someone is. He states that both religious well-being, existential well-being as well moving beyond its covers. Welfare religious component while the component leads us to reach God beyond our own well-being and to lead others and the environment. Since man has to act as a unified military while separate these two aspects of the interaction and overlap and the resulting sense of spiritual well-being, satisfaction and purpose, therefore is (Abasi *et al.*, 2011).

A quarter of a century ago there was a discussion about the definition of health in addition to physical, mental and social well-being, encompassing the "spiritual" as well. A few years later a large magazine dedicated to the spiritual dimension of health promotion and at the same time, 21 minutes about the right of people to have the physical, mental and spiritual development was recognized (John-Paul Vader, 2006). Spiritual as one of health because it is the integration of other dimensions and encompasses both the existential and religious. Religious well-being, the satisfaction of relationship with a higher power and health to try to understand the meaning and purpose of life defined (Allahbakhshian *et al.*, 2009).

Considering the importance of spiritual health in the prediction of human behavior, this study aims to predict the quality of higher education, student assessment, based on spiritual health of college students was conducted.

MATERIALS AND METHODS

The present research is a descriptive and the correlation type. The statistical population this research consisted of all students of ILAM University of Medical Sciences, in the year 1393 at the University were enrolled. According to Morgan table, 311 students, the sample was selected. In this research stratified sampling was used. Tools used in this study include: spiritual health questionnaire of PULUTZIN and Ellison: spiritual health questionnaire PULUTZIN and Ellison (1982) (Paloutzian and Ellison, 1982) consisted of 20 questions with 10 questions of religion, health, health and other 10 questions check it. Score of range of health of religious and existential, each one, is 60-10. For health subgroups of religious, and existential, stratification does not exist, and judging by the Score of obtained one. The Score of obtained, the higher is the sign of health of religious, and existential higher. Score of spiritual health, is the sum of the two sub-groups, ranging from 120 to 20, is considered. In the study of SEYED FATEMI *et al* (2006) spiritual validity, the content validity was determined and verified, and reliability through CRONBACH alpha reliability coefficient was determined to be 0/82, which indicates the reliability of this tool. Questionnaire of quality in higher education: Health Questionnaire quality in higher education, Mantz York (1995), consisting of 30 questions, each statement on a 5-point LIKERT scale scored: For each item, lot 5, 4 high, 3 moderate, 2 low and 1 very low score of 105 represents 150 top quality measures in higher education. 105-60 points, indicating the quality of higher education is somewhat high and a score below 60 indicating a low quality measures in higher education. Reliability in this research the CRONBACH alpha reliability coefficient was determined to be 0/92, which indicates good reliability of this tool.

RESULTS

Table 1 shows that the mean age of the sample 22/15 years with a range from 18 to 46 years. In terms of gender, 50/5% of the sample consisted of males and 49/5 percent female students.

Table 1. Demographic characteristics of University Medical Sciences students

Variable		Number	Percent
Gender	Boy	157	50/5
	Girl	154	49/5
Marital status	Single	257	88/4
	Married	36	11/6
economic situation	Nice	73	23/5
	Medium	198	63/7
	Weak	40	12/9
Entry year	86	3	1
	87	1	0/3
	89	4	1/3
	90	81	26
	91	94	30/2
	92	89	28/6
Field of Study	Nursing	35	11/3
	Operating Room	20	6/4
	Midwifery	15	4/8
	Anesthesiology	67	21/5
	Laboratory	42	13/5
	Medical	39	12/5
	Emergency	11	3/5
	Health	76	24/4
	Dental	6	1/9

Table 2. Descriptive characteristics of the sample, based on the variables

Variable	Mean	Standard deviation	Number
Quality in Higher Education	77/80	20/05	311
Spiritual health	84/69	17/81	311
Health of religious	45/25	10/57	311
Health	39/44	9/81	311

Table 3. Correlation matrix of variable quality in higher education, intellectual health of religious and spiritual health of religious components

	Quality in Higher Education	Spiritual health	health of religious	health
Quality in Higher Education	1			
Spiritual health	0/238**	1		
Health of religious	0/114**	0/838**	1	
Health	0/231**	0/769**	0/536**	1

* 0/01 p≤ * 0/05 p≤

Table 4. T-test results on the quality of higher education students

Variable	Boy		Girl		T	P
	mean	Standard deviation	mean	Standard deviation		
Quality in Higher Education	81/39	19/23	74/03	20/47	3/16	0/002

Table 5. T-test results on spiritual health of religious, and factors in student

	Boy		Girl		T	P
	mean	Standard deviation	mean	Standard deviation		
Spiritual health	80/81	16/85	88/61	17/92	-3/95	0/001
Health of religious	42/23	10/96	48/33	9/21	-5/30	0/001
Health	38/61	8/25	40/27	11/14	-1/49	0/137

Table 6. Results of simple linear regression for prediction of quality assessment in higher education based on Spiritual health

Model	Predictive variable	Indicators							
		R	R ²	F	P	B	β	T	P
1	health of religious	0/23	0/05	18/63	0/001	0/27	0/23	4/31	0/001

Of the sample group, most members of 63/7 percent average economic status, 23.5% good, and 12.9% of the economically weak. Most members of this group (30.2%) out of 2012 entries, and the lowest members (3.0 percent) were 2008 years of input. In terms of field of study sample consisted of (35 nursing students, 20 students operating room, 15 people Gynecology, Anesthesiology 67, 42 laboratories, 39 medical students, 11 medical emergencies, 76 Health and Dental 6) respectively. In Table 2, the mean and standard deviation scores for quality in higher education, and spiritual components of the research are presented. As can be seen, the mean and standard deviation of quality in higher education, respectively (77/80, 20/05), and the mean and standard deviation of spiritual health, are respectively (84/69 and 17/81). The mean and standard deviation of religious well-being, are respectively (45/25 and 10/57), and the mean and standard deviation health, are respectively (44/39 and 81/9). In Table 3 the Pearson correlation coefficient to examine the relationship between the quality of higher education, and spiritual health-presented. As can be seen in the table, the level of quality in higher education, and spiritual health ($r=0/28$, $p\leq 0/01$), and religious health ($r=0/11$, $p\leq 0/05$) a significant positive correlation there. The results showed that the level of quality in higher education, and health ($r=0/28$, $p\leq 0/01$), there is a significant positive correlation. Using an independent t test, the mean score of male students in higher education quality (SD=19/08, M=81/39)

with mean scores of female students (SD=20/47, M=74/03) were compared. Based on this comparison, we can say that the difference between the two groups is statistically significant ($p=0/002$, $t = 3/16$), and assessment of male students, the quality of higher education, was somewhat higher. Using an independent t test, the mean scores of male students in the spiritual health (SD=16/85, M=80/81), religious health (SD=10/96, M=42/23) and health (SD=8/25, M=38/61) with mean scores of students in the spiritual health (SD=17/92, M=88/61), religious health (SD=9/21, M=48/33) and health (SD=11/14, M=40/27) were compared. Based on this comparison, we can say that the difference between the two groups in the degree of spiritual health is statistically significant ($p=0/001$, $t=-3/95$), and spiritual health the female students, was somewhat higher. The results also show that differences in the health religious groups, statistically significant ($p=0/001$, $t=-5/30$), and religious health of the female students than male students of religious health but with results that were obtained for health it can be stated that between males and females the amount of health there is no significant difference ($p=0/137$, $t=-1/49$). Simple linear regression analysis showed that the prediction quality assessment in higher education students based on their spiritual health significance ($p\leq 0/001$ F=18/63). This variable is the sum of 5 percent, the amount of quality assessment in higher education students, predict ($R^2=0/05$). Spiritual health impact

factor ($B=0/27$). Thus, according to this understanding, spiritual health of students, their assessment of the quality of education predicted.

DISCUSSION

Present research investigated the relationship quality in higher education, and spiritual health, and the dimensions of university students was conducted. The results of the analysis of data showed that, between the spiritual health, and the dimensions of quality in higher education, there is a significant positive relationship. It should be noted that the researchers did a study, the relationship between these two variables, with each other and not be judged. Much research, the factors relevant to assessing quality in higher education is done, can the student learning style (McKeachie, 1990), learning abilities, personal growth, and expected student grades, and evaluating the quality of education (Jacobs, Lucy, 2004) attitude towards students, professors and university and student demographic characteristics (Maarufi et al., 2007), pointed out. The most important indicator of spiritual health, spiritual and human moods, emotions are positive. Additionally the moral man by living, a spiritual sense of social support. Spirituality a devout man a monotheistic view. In this view, believing God is able and None, and to believe in the power and wisdom of God and the things of the Lord imputes, meaning that, in the system of the major factors that cause real finds. Inner peace, and heartfelt, feel supported, and the fruits of another man's spiritual, experience (Abasi et al., 2011). Spiritual health, with features such as stability and balance in life, feeling a close relationship with himself, God and society and having a purpose in life is determined (Fisher, John 2010). Given the positive effects of spirituality it seems that people with spiritual direction, religious and, in particular do homework and their duties, their commitment and their sense of responsibility (Koenig, 2007). Spiritual health with an emphasis on accountability and having hope for the future and valuing self, others and the environment will be the foundation for a better assessment of quality in higher education provides. Can be concluded that people with high spiritual health, planning and university policies, better understood, and in order to have purpose, and hope for the future, in assessing the quality of teaching, the way they will act fairly. According to the researchers one of the factors in assessing quality in higher education, from the perspective of students, motivating them to attend college.

These factors, in assessing the student, and the learning environment, it is very effective. They're spiritual health, because spiritual connection, with unlimited power to ensure that the strong force, will always support them; So these people are relying on faith, and faith in, the incentives are strong, and the challenges of education and training, less stress, and anxiety; Thus, achieving this result is justified. The results of this study the difference between male and female students in assessing the quality of higher education. The results of this comparison showed that the mean scores of male students, the quality of higher education, is somewhat higher. Result's with previous research, including McKeachie (1990). Jacobs Lucy (2004) consistent. Demographic characteristics, such as age, gender, and nationality, may be important factors in the

assessment. For example, research conducted by McKeachie, (1990). found that, among women and men, in assessing the quality of instruction, there is a difference. Who Jacobs, Lucy (2004) found that male and female students alike, their female teachers, male teachers below, estimates. For him, perhaps because, of both sexes, different expectations of male and female teachers. Not only have the above qualifications, but also meets the expectations of traditional gender roles which they operate. Graduate unemployment, the economic problems of the community, thereby reducing the motivation of students, student assessment, and therefore, affect (Maarufi et al., 2007). Hopefully, a feature that is human, to help, to put the disappointment behind pursue your goals, and feel uncomfortable coming to reduce. Hope to have a better life, leading to improvement and promote compliance in person, is (Zheighami Mohammadi et al., 2014). Due to the lack of appropriate working conditions, especially for women in the community and hope to find a job less predictable result is obtained. The results also showed that, spiritual health, and religious health the female students, was somewhat higher, but with results that were obtained for health, it can be stated that, between male and female students in the health, there is no significant difference. The result of this research, the research Seyedalshohadaei et al. (2013), George (2006), Ahmadi and Kajbaf (2008), Kellums (1995), Hammermeister et al. (2005) is coordinated. Some scholars, such as Rene Allport (1931, quoted) have concluded that the interests of aesthetic, social, and religious women, more than men are. Man, the more political aspects, theoretical and practical, and women are more moral issues tend to indicate (Sadatraghib et al., 2008). In explaining these findings, it can be said that female students scored higher, spiritual health may be the reason that of their expected role socialization, life experiences, and their different coping strategies than men (Hammermeister et al., 2005). Also, according to Levine et al. (1994), it is possible that, roles, attributes, and behaviors, socially ascribed to women, with some of the principles and norms of religion is compatible. Results of regression analyzes indicated that the spiritual health college students, 5% of the variance in the assessment of quality in higher education into account, like most research, this study also was confronted with limitations. This research was conducted only on students.

REFERENCES

- Abasi, M. Azizi, F. Shamsikushki, E. Naserirad, M. Akbarilaleh, M. 2011. Defining the concept and operation of spiritual health. *Journal of Medical Ethics*, Vol. VI, No. 20.
- Ahmadi, J. and Kajbaf, MB. 2008. The spiritual attitude of university students, with some demographic characteristics.
- Allahbakhshian, M. Jafarpuralavi, M. Parvizi, S. Haghani, H. 2009. Relationship between spiritual well-being, and quality of life in patients with multiple sclerosis. *Journal of Medical Biotechnology*, Volume Twelve, Number 3
- Anonymous, 1979. Spiritual health is important, say our readers. *WHO Chron*, 33:29–30.
- Bazargan, A. 2004. Quality and evaluation in higher education. Proceedings of the First Conference on Higher Education in Iran. Allameh Tabatabai University. Tehran.

- Daaleman, T. P. Perera, S. and Studensk, S. A. 2004. Religion Spirituality and Health status in Geriatric Outpatients. *Annals of family Medicine*. Retrieved from internet. Wwww. Annfammed. Org. Vol. 2, No January/ February.
- Ellison, C.W. 1983. Spiritual well-being: Conceptualization and measurement. *Journal of Psychology and Theology*, 11(4): 340-330
- Fisher, John W. 2010. Spiritual Health: Its Nature and Place in the School Curriculum, THESIS
- George, M. 2006. Practical application of spiritual intelligence in the workplace. Human resource management international, *Digest Journal*, 14(5), 3-5.
- Hammermeister, J. Flint, M. Alayli, A. Ridnour, A. and Peterson, M. 2005. Gender differences in spiritual well-being: are Females more spiritually well than males? *Am. J. Health Stud.*, 20 (2): 80-4.
- Hatami, J. Mohammadi, R. and Eshaghi, F. 2011. The challenges of structuring, monitoring, and evaluating the quality of higher education in Iran. The fifth conference of "quality assessment, the university system," Technical Faculty of Tehran University campus.
- Jacobs, Lucy, C. 2004. Student Ratings of College Teaching: What Research Has to Say; Indiana University Bloomington. IU Bloomington Evaluation Services and Testing Franklin Hall 014, 601 E. Kirkwood Ave. Bloomington, In 47405.
- John-Paul Vader, 2006. Spiritual health: the next frontier. *European Journal of Public Health*, Vol. 16, No. 5, 457.
- Kellums, K.J. 1995. Gender analysis of the spiritual well-being scale [dissertation]. Newberg: George Fox University.
- Koenig, H. G. 2007. Spirituality and depression. *Southern Medical Journal*, 739- 737, 7.
- Levin, J.S., Taylor, R.J. and Chatters, L.M. 1994. Race and gender differences in religiosity among older adults: Findings from four national surveys. *J. Gerontol.*, 49(3):S137-45.
- Maarufi, Y., Kiamanesh, A.R., Mehrmohammadi, M. Aliasgari, M. 2007. Evaluation of teaching quality in higher education: a review of perspectives. *Journal of Curriculum Studies*, First, No. 5, 112-81.
- Mantz, Yorke 1995. "Self- scrutiny of quality in higher education: a questionnaire", *Quality Assurance in Education*, Vol. 3, No. 1, pp. 10- 13
- MeKeachie, W.J. 1990. Research on college teaching; the historical back- ground. *Journal of Educational Psychology*, 82. 189-200.
- Mohammadi, R. 2005. Quality Assessment in Higher Education (concepts, principles, methods, and standards). Tehran, National Education Assessment Organization.
- Paloutzian, R. and Ellison, C. 1982. Loneliness, spiritual well-being and the quality of life. In: Peplau D, Perlman D. Loneliness: a sourcebook of current theory, research and therapy. New York: John Wiley and Sons. p. 224-35
- Sadatraghieb, M., Ahmadi, J. and Siadat, A. 2008. Analysis of spiritual intelligence, Isfahan University, and its association with demographic characteristics. A study of educational psychology. No. VIII.
- Seedalshohadaei, M. Heshmat, SH. Seedfatemi, N. Haghani, H. and Mehrdad, N. 2013. Spiritual health of elderly residents of nursing homes, and home living. *Journal of Nursing Research Center*, Tehran University of Medical Sciences. Volume 26, No. 81. 20-11.
- Sohrabi, F. and Naseri, E. 2011. Spiritual Intelligence and its measurement scale. Tehran, The Sound of Light.
- Van Nass, P. H. Kasl, S, V. 2003. Religion and Cognitive Dysfunction in an Elderly Cohort. *Journal of Gerontology: Social Science*, Vol. 58 B, NO. 1, S21-S29.
- Zheighami Mohammadi, SH. Tajvidi, M. Ghazizadeh, SH. 2014. The relationship between spiritual well-being, quality of life, mental health, youth with THALASSEMIA. *Journal of Blood*, Volume 11, No. 2, from page 147 to page 154.
