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Investigating the Moderating Role of Itikaf on the Relationship between Psychological Distress and Subjective Happiness

Khalil Ullah[a*], Syed Muddasar Ali Shah[b], Irshad Ahmad[c]

[a,b]International Islamic University Islamabad, Pakistan. [c]RIPHAH International University, Pakistan

[*]**Email:** khalilullah14052000@gmail.com

***Abstract*:** This study examines the moderating effect of Itikaf, an Islamic ritual that involves dedicating time in a mosque for exclusive worship and refraining from worldly activities, on the relationship between psychological distress, specifically depression, anxiety, stress, and subjective happiness. To achieve this, data were gathered from 385 participants utilizing a cross-sectional approach that incorporated the Depression Anxiety Stress Scale and the Subjective Happiness Scale. The sample included 247 individuals who engaged in Itikaf and 134 non-practitioners identified through purposive sampling. Data analysis was conducted using IBM SPSS (Version 25). The results indicated a significant negative correlation between psychological distress and subjective happiness. Moderation analysis revealed that Itikaf effectively lessens the influence of depression on subjective happiness, whereas anxiety and stress did not present a significant effect. Thus, while Itikaf appears to be an effective means of alleviating depression, it does not significantly improve overall subjective happiness. This indicates that the advantages of Itikaf might be more evident in addressing specific psychological distress rather than in enhancing general happiness.

Keywords: Itikaf, Psychological distress, Subjective Happiness, Psychological Wellbeing

1. Introduction

Engaging in religious practices has long been linked to enhanced mental well-being. Such activities assist individuals in coping with life's stressors (Kaur & Lone, 2022). One example of such a practice is Itikaf, a spiritual retreat observed by Muslims, particularly during the final ten days of Ramadan. Itikaf provides a chance for self-reflection, a respite from everyday distractions, and fosters a deeper spiritual connection.

Itikaf serves as a period of reflection, solitude, and expression of one's devotion to Allah. Individuals often report a heightened sense of inner tranquility when they step away from their daily routines to focus on spiritual development. Studies suggest that engaging in activities like prayer and meditation can reduce the risk of mental health issues by enhancing coping strategies (Koenig, 2012; Pargament & Roya, 2007). The Quranic verse 13:28 reinforces this claim, indicating that hearts find solace in the remembrance of Allah. This highlights how mental clarity and serenity can be attained through practices like Itikaf.

Psychological distress, characterized by symptoms such as stress, anxiety, and depression, is a prevalent issue, especially in developing countries where poverty and inadequate mental health resources contribute to a higher incidence of these conditions (Patel & Kleinman, 2003; Lund et al., 2010). Research by Dyrbye et al. (2006) and Ahmed et al. (2009) shows that university students are particularly vulnerable to the adverse

effects of psychological distress on their academic success, physical health, and emotional well-being. While conventional psychological methods have mainly concentrated on diagnosing and treating mental disorders, there is increasing interest in exploring how positive mental states and personal strengths can foster overall well-being. This study aims to explore the extent to which the spiritual practice of Itikaf may alleviate the detrimental effects of psychological distress.

Happiness, often known as subjective well-being, refers to the emotional state of being satisfied and feeling positive about oneself (Seligman & Csikszentmihalyi, 2005). There is a frequent correlation between religious affiliations and happiness (Abdel-Khalek, 2006; Joshanloo, 2011; Levin, 2014). Individuals who are religious usually report higher levels of life satisfaction. Furthermore, they tend to manage stressful situations more effectively and experience lower rates of substance abuse (Myers, 2000; Emmons, 1999). Building on this idea, our research explores whether engaging in Itikaf can alleviate psychological distress and enhance happiness.

This study examines the potential of Itikaf to serve as a buffer against psychological distress in relation to subjective happiness. The results could significantly influence the religious and mental health practices within Muslim communities. Gaining insights into how Itikaf affects well-being may offer practical recommendations for incorporating spiritual activities into therapeutic approaches to enhance mental health outcomes.

2. Literature Review

Religion plays a crucial role in fostering self-discipline and providing individuals with a sense of meaning and purpose in life, as noted by Łowicki et al. (2018). The physical, mental, and spiritual health of a person is intimately linked to their religious convictions and commitment to spiritual practiceet al., 2019; Alizadeh Fard et al., 2020). Engaging in religious activities can facilitate the establishment of goals and an exploration of life's significance (Krok, 2015).

Islam encompasses various religious practices that function as coping strategies, aiding individuals in managing daily stressors and challenges. Practices such as ablution, prayer, fasting, and meditation are effective in alleviating anxiety and addressing mental health issues (Abdel-Khalek, 2019). Itikaf, a dedicated time for seclusion and spiritual focus, integrates these practices and underscores their importance for overall well-being.

Cross-cultural studies have consistently illustrated a strong association between religious practices and mental health outcomes. For instance, itikaf has been found to promote spiritual growth, self-reflection, and resolution of past conflicts, all contributing positively to mental health (Mikaeli et al., 2021). Additionally, Niajam et al. (2017) state that Islamic practices like itikaf foster a disciplined lifestyle and enhance self-control, thereby reducing stress and feelings of depression. Furthermore, itikaf has been associated with heightened subjective well-being, reduced anger, and improved self-regulation (Karakaras & Eker, 2018). Collectively, these findings highlight the multifaceted benefits of itikaf in enhancing mental health and overall life satisfaction.

These findings are further corroborated by research conducted by You et al. (2019), which examines the link between religious engagement and the mental health of young adults in Korea. Their study indicates that elements such as congregational support, prayer, and active involvement in religious activities contribute positively to mental well-being. More specifically, a strong correlation was found between high spiritual well-being and lower levels of depression in individuals with robust religious beliefs. However, the research did not identify a significant relationship between the length of one's faith and mental health outcomes. It emphasized the vital role of community support in maintaining these beneficial effects.

Another investigation explored the effects of stressors and religiosity on the mental health of Muslim youth, revealing a nuanced relationship. While religious practices generally promote mental well-being, they at times intensify the negative impacts of stress stemming from discrimination and cultural challenges. Notably, a strong religious identity served to mitigate the adverse effects of cultural transition stress on depression, while also providing increased resilience against stress related to discrimination. These findings indicate a complex interplay between stress factors and religious engagement, suggesting that religious identity can act as a coping strategy, particularly in contexts of discrimination (Stuart & Ward, 2018).

Similarly, Ganga and Kutty (2012) investigated the relationship between religion and mental health across

various faiths, including Christianity, Islam, and Hinduism. Their findings underscore the significance of religious practices, such as itikaf, in enhancing mental health and highlight the necessity for further research into the impacts of specific rituals. In support of this perspective, Husseini et al. (2015) found that individuals participating in itikaf exhibited higher self-esteem levels, which aids in emotional regulation and managing challenging emotions.

Additional research has examined fasting, which is an essential component of itikaf. Bahram et al. (2012) indicated that fasting during Ramadan contributes to increased happiness and improved cognitive abilities. Similarly, Jawanbakht et al. (2010) discovered that fasting students exhibited lower levels of depression and anxiety, reinforcing the beneficial effects of Islamic practices on mental well-being. Amirfakhrai and Alinaghizach (2012) provided further evidence of the positive influence of prayer and fasting on the mental health of students, suggesting that spiritual practices like itikaf can enhance overall well-being.

Furthermore, Aghababaei (2018) identified a positive relationship between religiosity and happiness among college students. This aligns with the findings of Faicatore et al. (2000), which demonstrated a strong link between spirituality and mental health across various populations. These studies underscore the significance of religious practices in enhancing mental health and highlight the necessity for further investigation into their specific effects.

The literature presents compelling evidence that religious practices, particularly itikaf, positively influence mental health. Numerous studies indicate that itikaf alleviates psychological distress and enhances subjective well-being. To better understand the specific mechanisms through which itikaf affects the relationship between psychological distress and happiness, additional research is required. The current study seeks to deepen our understanding of how spirituality fosters mental health by exploring this moderating role.

3. Material and Methods

3.1 Population and Sample

The focus of this study is on individuals residing in the Ghanche district of Gilgit-Baltistan, where the tradition of Itikaf is prevalent. To collect data, a purposive sampling method was utilized, involving 385 participants from September 1, 2022, to December 1, 2022.

3.2 Measures

3.2.1 Subjective Happiness Scale (SHS)

The Subjective Happiness Scale (SHS), created by Lyubomirsky and Lepper in 1999, serves as a self-assessment tool designed to measure overall happiness through a questionnaire consisting of four items. It has a reliability coefficient of 0.68.

3.2.2 Depression, Anxiety, and Stress Scale (DASS)

The Depression, Anxiety, and Stress Scale (DASS), developed by Lovibond in 1995, assesses negative emotional states with a total of 42 items. It exhibits strong internal consistency, with Cronbach's alpha values of 0.94 for depression, 0.88 for anxiety, and 0.93 for stress, confirming its reliability and construct validity.

3.3 Proposed Data Analysis

The data were analyzed using IBM SPSS Version 25. Descriptive statistics, Pearson correlation, and moderation regression analyses were utilized to evaluate the data.

4. Data Analysis and Result

Table 1: Descriptive Statistics of the study population

Characteristics	Category	n	%
Age	Young adult	224	59.0

	Middle adult	122	32.0
	Late adult	29	7.0
Education	Madrassa	39	10.2
	University	342	89.2
Marital Status	Married	135	35.4
	Unmarried	237	62.2
Itikaf	Practitioner	247	64.8
	Non-practitioners	134	35.2

Table 1 indicates that there are significantly more young adults in this study compared to middle-aged and older adults. The majority of these individuals were university students. Additionally, most of the participants were single. The number of non-Itikaf practitioners was lower than that of those who practiced Itikaf.

Table 2: Correlation between Depression, Anxiety, Stress and Happiness

Variable	*M*	*SD*	1	2	3	4
1. Depression	9.30	8.06	--	.78**	.67**	-.27**
2. Anxiety	10.3	7.76	--	--	.75**	-.15**
3. Stress	15.7	15.7	--	--	--	-.06**
4. Happiness	4.43	4.43	--	--	--	--

*p<.01

Table 2 demonstrates a significant negative correlation between depression and happiness (r=-.27, p<.01). Additionally, anxiety also shows a negative relationship with happiness (r=-.15, p<.01). However, the table indicates that stress has a non-significant negative correlation with happiness (r=.06, p<.05).

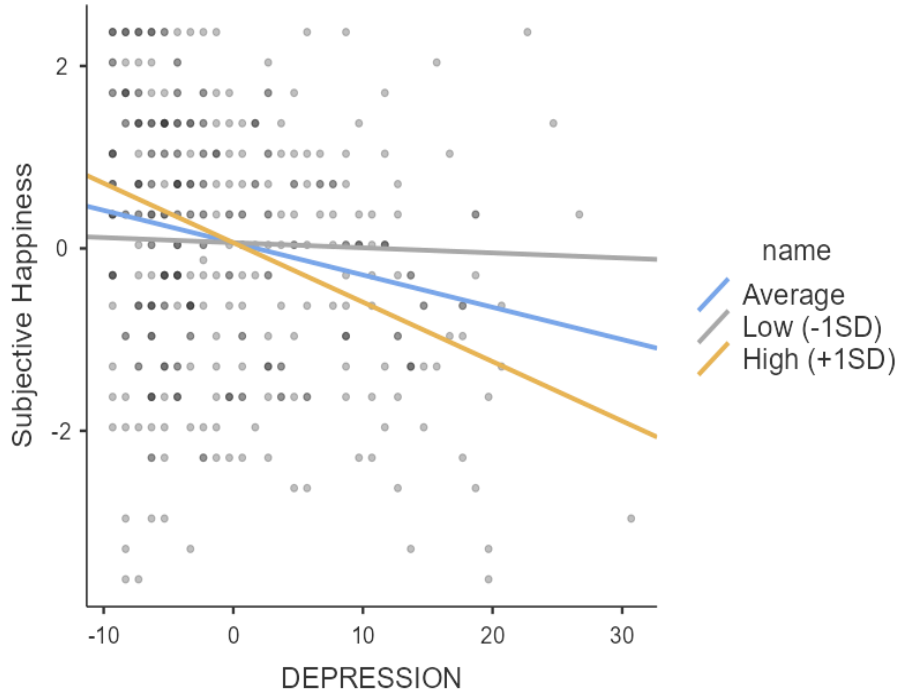
4.1 Moderation Estimates

Table 3: Moderation analysis with depression 95% CI

			95% CI			
Variable	Estimate	SE	Lower	Upper	Z	p
Depression	-0.04	0.01	-0.06	-0.01	-3.05	0.002
Duration of Itikaf	0.27	0.11	0.04	0.49	2.34	0.019
Depression* Duration of Itikaf	-0.04	0.02	-0.07	-0.01	-2.37	0.018

Simple Slope Estimates						
Average	-0.04	0.01	-0.06	-0.01	-3.03	0.002
Low (-1SD)	-0.01	0.02	-0.04	0.03	-0.32	0.752
High (+1SD)	-0.07	0.02	-0.10	-0.03	-3.90	< .001

Figure 1



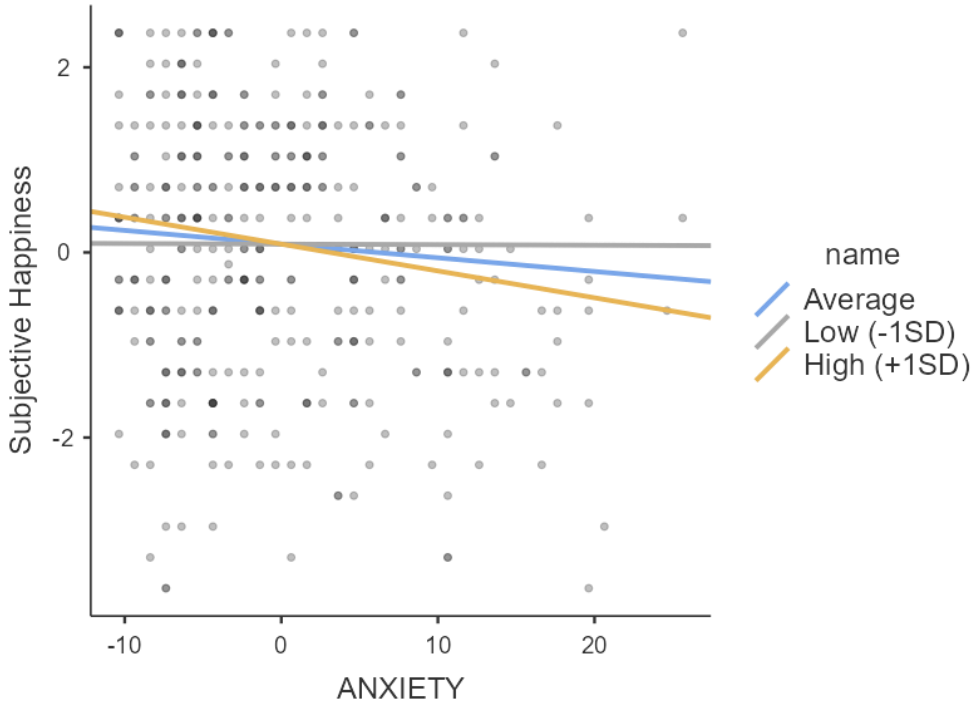
4.2 Moderation Estimates

Table 4: Moderation Analysis of Anxiety

			95% CI			
Variable	Estimate	SE	Lower	Upper	Z	p
Anxiety	-0.01	0.01	-0.04	0.01	-1.26	0.209
Duration of Itikaf	0.29	0.12	0.06	0.52	2.51	0.012
Anxiety*Duration of Itikaf	-0.02	0.02	-0.06	0.02	-0.98	0.327
Simple Slope Estimates						
Average	-0.01	0.01	-0.04	0.01	-1.26	0.206

Low (-1SD)	-0.00	0.02	-0.04	0.04	-0.03	0.976
High (+1SD)	-0.03	0.02	-0.06	0.01	-1.65	0.100

Figure 2



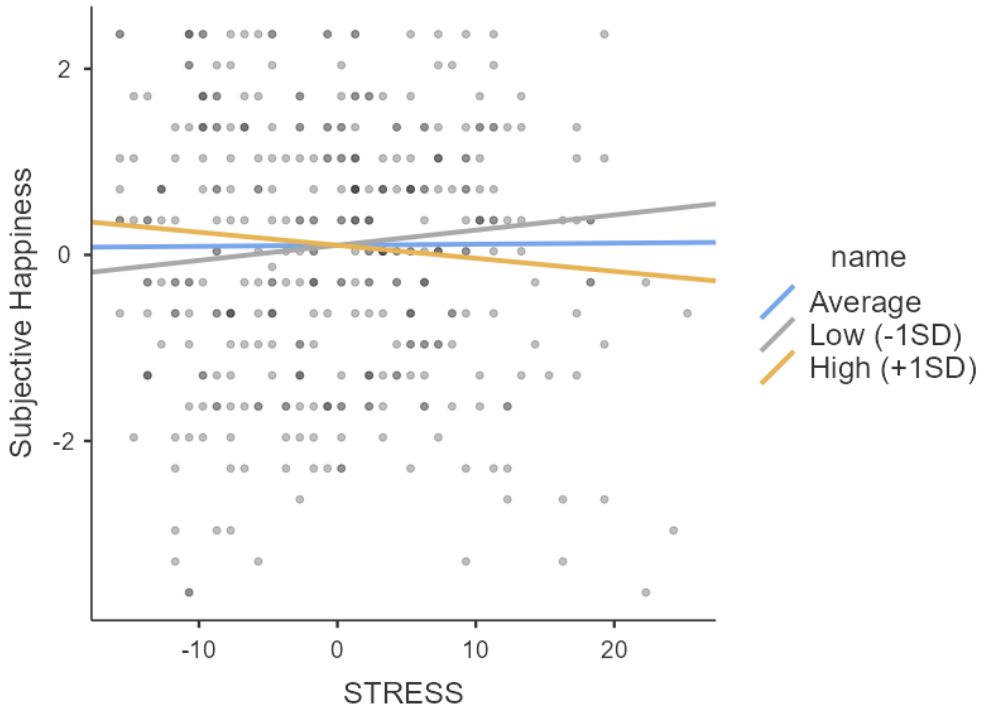
4.3 Moderation Estimates

Table 5: Moderation Analysis of Stress

			95% CI			
Variable	Estimate	SE	Lower	Upper	Z	p
Stress	0.00	0.01	-0.02	0.02	0.12	0.903
Duration of Itikaf	0.27	0.12	0.04	0.49	2.28	0.023
Stress*Duration of Itikaf	-0.02	0.01	-0.05	0.01	-1.38	0.167
Simple Slope Estimates						
Average	0.00	0.01	-0.02	0.02	0.11	0.902
Low (-1SD)	0.02	0.01	-0.02	0.05	1.02	0.302

	High (+1SD)	0.01	0.01	0.04	0.01	-1.00	0.319

Figure 3



4.4 Discussion

The current research sought to evaluate the moderating effect of Itikaf on the relationship between psychological distress and subjective happiness. It also investigated how the association between predictors—such as depression, anxiety, and stress—and the outcome of subjective happiness vary based on the duration of Itikaf. The results indicated a negative relationship between psychological distress and subjective happiness. Notably, the duration of Itikaf played a significant role in moderating the link between depression and happiness, with longer Itikaf periods diminishing the adverse effects of depression on happiness. In contrast, anxiety and stress did not exhibit a significant relationship with happiness, nor did Itikaf duration influence these effects. The simple slope analysis demonstrated that individuals who participated in Itikaf for extended periods experienced a reduced impact of depression on their happiness. These results imply that Itikaf could serve as an effective strategy for alleviating depression, although it seems to be less beneficial for anxiety and stress. Additional research is necessary to further investigate its impact on various types of psychological distress. Our research indicated a notable negative correlation between depression, anxiety, stress, and subjective happiness, reinforcing the idea that psychological distress diminishes happiness, as these two states cannot coexist. This aligns with earlier studies. For instance, Corcoran and McNulty (2018) identified a similar adverse relationship between psychological distress and subjective well-being. These results enhance our understanding of Itikaf's moderating influence in this context. Bahram et al. (2012) observed that individuals who fasted during Ramadan reported higher levels of happiness, which supports our conclusions. Likewise, Maryam et al. (2012) found that fasting reduced symptoms of depression and anxiety while boosting self-esteem and mental health. Additionally,

Alinaghizach (2012) revealed that the core practices of fasting and prayer associated with Itikaf significantly enhanced mental health.

Our study also showed that those who engaged in Itikaf experienced lower levels of depression, anxiety, and stress compared to those who did not practice Itikaf, which aligns with the findings of Karakas and Eker (2018). Similarly, Malinkova et al. (2020) found a positive association between religiosity and mental health, further supporting our results and highlighting the beneficial effects of religious practices like Itikaf on mental well-being.

Finally, our research indicated that individuals who engage in Itikaf reported greater levels of happiness compared to those who do not participate. This aligns with the findings of Karakas and Eker (2018), who noted an enhancement in happiness following Itikaf involvement. The deeply immersive experience of Itikaf, which enables individuals to concentrate exclusively on worship while distancing themselves from everyday distractions, likely plays a significant role in fostering increased happiness. Additionally, Argyle (2001) found that, on average, religious individuals tend to experience higher levels of happiness and satisfaction, further supporting the beneficial impact of religious practices like Itikaf on overall well-being.

5. Conclusion

The present research highlights the moderating influence of Itikaf on the connection between psychological distress and subjective happiness. The findings indicate that Itikaf, especially its duration, significantly mitigates the adverse effects of depression on happiness, suggesting its potential as an effective strategy for coping with depression. However, its impact on anxiety and stress was deemed insignificant, underscoring the necessity for further investigation into its overall mental health advantages. Additionally, the study reaffirms the negative correlation between psychological distress and subjective happiness, aligning with prior research in this area.

In light of these results, Itikaf appears to be a valuable approach for enhancing mental health through spiritual practices that foster discipline, patience, and emotional regulation. Future studies, particularly those that are experimental and longitudinal, could explore Itikaf's therapeutic potential in alleviating psychological distress and boosting overall happiness. The results suggest that integrating religious practices like Itikaf into mental health interventions may enhance emotional stability and personal well-being.

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Annexure

اسلام علیکم۔

ہم بین الاقوامی اسلامی یونیورسٹی اسلام آباد میں BS نفسیات (آخری سمسٹر) کے طالب علم ہیں اپنے آخری سال کی ریسرچ پروجیکٹ کے لئے تحقیق کر رہے ہیں۔ لہذا یہ سوالنامہ Pschological distress اور Subjective Happiness کے درمیان اعتکاف کے کردار کا جائزہ لینے کیلئے ڈیزائن کیا گیا ہے۔ اس سوال نامے میں جو معلومات ہمیں آپ سے ملیں گی وہ صرف تحقیقی مقصد کی لئے استعمال ہوں گی۔ ہم آپ سے موصول ہونے والی تمام معلومات کو خفیہ رکھیں گے۔ براہ کرم ہر سوال کو غور سے پڑھیں اور اپنا حقیقی جواب دیں۔ اس سوال نامے کو بھرنے میں مشکل سے 5-6 منٹ لگیں گے۔ آپ کی شرکت کی عین نوازش ہوگی۔

عمر: _____

تعلیم

(1) میٹرک (2) ایف اے (3) بی اے (4) ایم اے یا مساوی (5) دیگر _____

ازدواجی حیثیت

(1) شادی شدہ (2) غیر شادی شدہ (3) طلاق شدہ (4) رنڈوا

ماہانہ آمدنی _____

علاقہ: _____

پیشہ:

(1) طالب علم (2) بے روزگار (3) گورنمنٹ ملازمت (4) ذاتی کاروبار (5) دیگر _____

1۔ کیا آپ اعتکاف میں گئے ہیں؟ ہاں ( ) نہیں ( )

اگر ہاں تو کب؟ _____

(اگر نہیں تو 2 سے آگے کو چھوڑ کر اگلے سوال پر جائیں)

حالیہ دنوں میں ( ) (2) گزشتہ 6 ماہ میں ( ) (3) سال پہلے ( ) (4) گزشتہ 3 سال ( )

(5) دیگر _____

2۔ آپ نے پہلا اعتکاف کہاں کیا؟ _____

3۔ دورانیہ _____

(1) 24 گھنٹہ (2) تین روز ( ) (3) 10 دن ( ) (4) 40 دن ( ) (5) دیگر _____

4۔ زندگی میں اعتکاف کی تعداد _____

(1) 1 دفعہ ( ) (2) تین دفعہ ( ) (3) 5 دفعہ ( ) (4) 10 دفعہ ( ) (5) دیگر _____

5۔ آپ نے آخری اعتکاف کب کیا؟ _____

حالیہ دنوں میں ( ) (2) گزشتہ 6 ماہ میں ( ) (3) سال پہلے ( ) (4) گزشتہ 3 سال ( )

(5) دیگر _____

6۔ آپ کے آخری اعتکاف کتنے دنوں پر مشتمل تھی؟ _____

(1) 24 گھنٹہ (2) تین روز ( ) (3) 10 دن ( ) (4) 40 دن ( ) (5) دیگر _____

7۔ آپ کے زندگی میں اعتکاف کا طویل دورانیہ _____

(1) 24 گھنٹہ (2) تین روز ( ) (3) 10 دن ( ) (4) 40 دن ( ) (5) دیگر _____

8۔ کیا آپ کو کبھی کوئی نفسیاتی عارضہ کی تشخیص ہوئی ہے؟ ہاں ( ) نہیں ( )

1

ڈی۔اے۔ایس۔ایس۔اسکیل

ہدایات:

مندرجہ ذیل فقرات کوغور سے پڑھیں اور جوفقرہ آپکی کیفیت، خیالات اوراحساسات کے مطابق ہواُس کے سامنے3,2,1,0 میں سے کسی ایک پر دائرہ لگائیں جوآپ کے لئے شدت کے لحاظ سے پچھلے سال کی کیفیت کومناسب طور پرظاہر کرے۔آپ کے جوابات کوصحیح یاغلط تصورنہیں کیا جائے گا۔کسی بھی فقرہ پرغوروفکر کرنے کے لیے زیادہ وقت ضائع نہ کریں۔کسی بھی جواب کے شدت کے معیار کوجاننے کے لیے پیمانہ درج ذیل ہے

0۔ یہ مجھ پر ہرگز لاگونہیں ہوتا ہے
1۔ کبھی کبھار کسی حدتک مجھ پرلاگو ہوتا ہے
2۔ زیادہ تروقت/ مناسب حدتک مجھ پرلاگو ہوتا ہے
3۔ اکثراوقات/ بہت زیادہ حدتک مجھ پرلاگو ہوتا ہے

نمبرشمار	فقرات	بالکل نہیں	کبھی کبھار/کسی حدتک	زیادہ تروقت/ مناسب حدتک	اکثراوقات/ بہت زیادہ حدتک
1۔	میں بہت معمولی باتوں پر پریشان رہا/ رہی۔	0	1	2	3
2۔	مجھے یوں محسوس ہوتا رہا جیسے میرا منہ خشک ہورہا ہے۔	0	1	2	3
3۔	میں ہرگز خوشگوار احساسات محسوس نہیں کرسکا/سکی۔	0	1	2	3
4۔	میں نے جسمانی تھکاوٹ محسوس کیے بغیر سانس لینے میں دقت محسوس کی۔	0	1	2	3
5۔	میں خودکوکام کرنے کے لیے مستعد نہ پاسکا/سکی۔	0	1	2	3
6۔	میں نے بعض صورتحال میں غیرمناسب رویے کا اظہار کیا۔	0	1	2	3
7۔	میں نے کپکپاہٹ محسوس کی (جیسے میں گرنے والا/ والی ہوں۔	0	1	2	3
8۔	میں نے ذہنی طور پر بہت کم سکون محسوس کیا۔	0	1	2	3
9۔	میں ایسے حالات سے بھی گزرا/گزری جومیرے لیے بے حد پریشان کن تھےاوراُن حالات سے نکل کرمیں نے خودکوبہت پرسکون پایا۔	0	1	2	3
10۔	میں نے محسوس کیا کہ میرا مستقبل تاریک ہے۔	0	1	2	3
11۔	مجھے محسوس ہوا کہ میں جلدی پریشان ہوجاتا/ جاتی ہوں۔	0	1	2	3
12۔	میں نے محسوس کیا کہ میں نے کام کرنے کے لیے بہت زیادہ ذہنی توانائی صرف کی۔	0	1	2	3
13۔	میں نے خودکو بہت غمزدہ اورافسردہ محسوس کیا۔	0	1	2	3
14۔	جب بھی مجھے کسی بھی وجہ سے انتظار کرنا پڑا میرے لیے ناقابل برداشت ہو گیا۔	0	1	2	3
15۔	مجھے دم گھٹنے اورغشی پڑنے کا احساس ہوا۔	0	1	2	3
16۔	مجھے محسوس ہوا کہ کسی بھی کام میں میری دلچسپی نہیں رہی۔	0	1	2	3
17۔	میں نے محسوس کیا کہ میری کوئی اہمیت نہیں ہے۔	0	1	2	3
18۔	مجھے محسوس ہوا کہ میں بہت حساس ہوں۔	0	1	2	3

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19۔	مجھے زیادہ درجہ حرارت یا جسمانی مشقت کے بغیر بھی بے حد پسینہ آتا رہا۔	0	1	2	3
20۔	بغیر کسی مناسب وجہ کے میں خوفزدہ ہو جاتا/ جاتی تھی۔	0	1	2	3
21۔	میں نے محسوس کیا کہ زندگی کی کوئی اہمیت نہیں۔	0	1	2	3
22۔	میرے لیے غصے پر قابو پانا مشکل ہو جاتا تھا۔	0	1	2	3
23۔	میں نے کھانا نگلنے میں دقت محسوس کی۔	0	1	2	3
24۔	میں اپنے کسی بھی کام سے لطف اندوز نہیں ہوا/ ہوئی۔	0	1	2	3
25۔	بغیر کسی جسمانی مشقت کے میرے دل کی دھڑکن تیز ہو گئی۔	0	1	2	3
26۔	میں نے محسوس کیا جیسے میرا دل بیٹھ گیا ہو اور میں اداس ہوں۔	0	1	2	3
27۔	میں نے جھنجھلاہٹ اور چڑچڑاپن محسوس کیا۔	0	1	2	3
28۔	میں نے محسوس کیا جیسے میری پریشانی حد سے بڑھ گئی تھی۔	0	1	2	3
29۔	میں نے محسوس کیا کہ جب کسی وجہ سے میں پریشان ہوا/ ہوئی تو میرے لیے پرسکون ہونا مشکل ہو گیا۔	0	1	2	3
30۔	مجھے ڈر تھا کہ مجھے کسی معمولی لیکن غیر مانوس کام کی ذمہ داری سونپی جائے گی۔	0	1	2	3
31۔	میں کسی بھی کام کے بارے میں پُر جوش نہیں رہا/ رہی۔	0	1	2	3
32۔	اپنے ذمہ کام مین کسی کی مداخلت برداشت کرنا میرے لیے مشکل تھا۔	0	1	2	3
33۔	میں ذہنی تناؤ کی حالت میں رہا/ رہی۔	0	1	2	3
34۔	میں نے خود کو بے حد غیر اہم محسوس کیا۔	0	1	2	3
35۔	میرے لیے اُس چیز یا شخص کو برداشت کرنا مشکل تھا جو میرے کام میں رکاوٹ پیدا کرے۔	0	1	2	3
36۔	میں بے حد خوفزدہ رہا۔	0	1	2	3
37۔	مجھے مستقبل میں کوئی چیز ایسی نظر نہیں آتی جسکے متعلق میں پر اُمید ہو سکوں۔	0	1	2	3
38۔	میں نے محسوس کیا کہ زندگی بے معنی اور بے مقصد ہے۔	0	1	2	3
39۔	میں نے خود کو ضدی محسوس کیا۔	0	1	2	3
40۔	میں ایسے حالات کے متعلق پریشان ہوا/ ہوئی جن میں میرے بے وقوف بننے اور میری بے چینی بڑھنے کا خدشہ تھا۔	0	1	2	3
41۔	میں نے اپنے جسم میں کپکپاہٹ محسوس کی۔	0	1	2	3
42۔	مجھے کسی کام کے کرنے کے لیے پہل کرنا مشکل محسوس ہوا۔	0	1	2	3

Subjective Happiness scale

نیچے کچھ بیانات دیے گئے ہیں جن کے سامنے ساتھ جوابات کالم میں بنائے گئے ہیں۔آپ ہر بیان کو غور سے پڑھیے اور اپنی رائے کے مطابق صحیح وجہ بندی کریں

نمبر شمار	بیان	1 بہت کم	2 کم	3 درمیانہ	4 زیادہ	5 بہت زیادہ	6 بہت ہی زیادہ	7 سب سے زیادہ
1	عام طور پر میں خود کو سمجھتا ہوں							
2	اا پنے اکثر ہم جولیوں کے نسبت میں خود کو سمجھتا ہوں۔							
3	کچھ لوگ بہت خوش ہوتے ہیں وہ زندگی کا لطف اُٹھاتے ہیں چاہے جو مرضی ہو جائے۔ یہ بات آپ کے بارے میں کس حد تک درست ہے؟							
4	کچھ لوگ عام طور پر زیادہ خوش نہیں ہوتے جب کہ وہ اداس بھی نہیں ہوتے۔وہ اتنا خوش نظر نہیں آتے ہیں جتنا نظر آنا چاہیے۔ یہ بات آپ کے بارے میں کس حد تک درست ہے۔							