



Research Paper: Public Health, Resilience and Identity Crisis in Children of Families under the Support of Imam Khomeini Relief Committee



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Abstract

The aim of this study is to investigate the general health, resilience, and identity crisis among children from families supported by the Imam Khomeini Relief Committee, as well as predicting the general health of individuals based on resilience and identity crisis. In this research, 156 male students from the province of Zanzan and the city of Maragheh, who were under the support of the Imam Khomeini Relief Committee, were studied using the Goldberg General Health Questionnaire (GHQ), Connor-Davidson Resilience Scale (CD-RISC), and Rajaei Identity Crisis Scale. The data were analyzed using Pearson correlation and multiple regression analysis. The findings indicated a significant positive relationship between general health and resilience, and a significant negative relationship between general health and identity crisis among these individuals. Furthermore, a significant negative relationship was found between resilience and identity crisis. Multiple regression analysis showed that general health explains a small amount of the variance in resilience and identity crisis in these individuals. This study demonstrated that under conditions of high resilience and low identity crisis, individuals would have better general health.

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1. Introduction

Mental health means that a person can adapt, interact, and be compatible with their environment, surroundings, and others (Milanifar, 2023). The World Health Organization defines it as the ability to establish balanced and harmonious relationships with others, adapt and modify one's personal and social environment, and resolve conflicts and personal tendencies logically, fairly, and appropriately (Abaspour et al., 2014). Many factors can affect mental health, such as anxiety (Anamagh et al., 2020), physical activity (Ghorbani et al., 2021; Christodoulides et al., 2023), internet addiction (Baniasadi et al., 2022), parenting styles, and ineffective coping strategies (Khosravi et al., 2023), and feelings of loneliness (Seyed Mousavi & Moharrami, 2019). In this study, we will focus on two variables that are related to mental health: resilience and identity crisis.

Resilience is a capacity that self-esteem, emotional stability, or personality traits define. It enables individuals to overcome difficulties, manage stress, and withstand hardships (Taghva et al., 2020; Seyedi Asl et al., 2021). Resilience involves two important conditions: first, significant threats or severe hardships confront individuals; second, they achieve positive adaptation and progress despite these difficulties and significant challenges (Luthar et al., 2000). Resilience depends on the interaction between risk factors and protective factors (Soltani et al., 2019).

Risk factors are any conditions or events that lead to maladaptive outcomes. Protective factors are those that promote positive

adaptation and resilience. Some common risk factors are low socio-economic conditions, widespread social damages, or parental divorce. Protective factors usually include personality traits, family factors, and social support (Masten & Reed, 2002).

Identity crisis is a state of confusion and uncertainty about one's identity, values, goals, and role in society. It can occur during adolescence or adulthood when individuals face major changes or challenges in their lives. Identity crisis can affect one's self-esteem, mental health, and social relationships. Some of the social factors that influence identity crisis include weak religious values, weak cultural values, and weakened self-esteem (Arshad Khargardi, 2002). Revell (2008) also found a relationship between spirituality and factors such as community, identity, and personality. He examined spiritual growth in public schools. He believes that educators should nurture the different dimensions of identity, personality, and spirituality that students have.

In this study, we want to examine the relationship between general health, resilience, and identity crisis among children from families supported by the Imam Khomeini Relief Committee. We hypothesize that there is a significant relationship between these variables.

2. Method

2.1. Participants

This correlational study examined the relationship between general health, identity crisis, and resilience using Pearson

correlation and multiple regression analysis. All male secondary school students under the coverage of the Imam Khomeini Relief Committee in Zanjan Province and Maragheh city formed the statistical population. Cluster sampling in each of the cities of Zanjan and Maragheh selected 156 secondary school students under the coverage of the Imam Khomeini Relief Committee as the sample under investigation.

2.2. Instruments

General Health Questionnaire (GHQ): It is a self-report questionnaire used in clinical settings to screen individuals with mental disorders (Khayatan et al., 2022). The 28-item form of this questionnaire is applicable to all individuals and can determine the likelihood of a mental disorder in an individual. This questionnaire consists of four subscales: physical symptoms, anxiety and insomnia, social dysfunction, and depression. It also provides a total score based on the sum of scores (Goldberg, 1972). In this questionnaire, a higher score indicates lower general health. Rajaei (2008, as cited in Rajaei, 2009) obtained the reliability of the 28-item form of the General Health Questionnaire as 0.93.

Connor-Davidson Resilience Scale (CD-RISC): This Scale was designed by Connor and Davidson (2003). It is a 25-item instrument that measures resilience on a five-point Likert scale from 0 to 4. The minimum

and maximum scores on this scale are zero and one hundred, respectively. Besharat et al. (2009) has confirmed the reliability and validity of the Persian version of this scale in normal and patient samples. The Cronbach's alpha coefficient was found to be 0.86, indicating acceptable reliability of the questionnaire.

Identity Crisis Questionnaire: This questionnaire was developed by Rajaei et al (2008 as cited in Rajaei et al., 2009). It has 50 questions that measures 10 indicators of identity crisis based on the RCET theory. These indicators are aimlessness, emptiness, and hopelessness, lack of self-confidence, worthlessness, life dissatisfaction, anxiety, sadness, aggression, and irritability. The questionnaire has 50 questions and experts have confirmed its validity. The questionnaire also has high internal consistency, with a Cronbach's alpha coefficient of 0.93 (Rajaei et al., 2009).

2.3. Procedure

The individuals selected through random sampling complete the mentioned questionnaires under the guidance of the researcher.

3. Results

The results of the present research are shown in Table 1 along with the mean and standard deviation of the variables:

Table 1

The relationship between general health, resilience, and identity crisis

Variables	General health (pathological signs)	Resilience	Identity crisis
General health (pathological signs)	–	*-39.7	*-36.8
Resilience		–	*-35.3
Identity crisis			–
Mean	15.64	68.14	96.78
Standard Deviation	8.96	10.31	16.32

*P<0.01

Table 1 shows the mean scores of general health, resilience, and identity crisis for these individuals. They are 15.64, 68.14, and 96.78, respectively. The findings show that general health (normal signs and not pathological signs) and resilience are positively related, while general health and identity crisis are negatively related. Resilience and identity crisis also have a negative relationship. Multiple regression analysis reveals that general health accounts for a small part of the variation in resilience and identity crisis for these individuals.

4. Discussion

The results of this study showed that general health has a significant positive relationship with resilience and a significant negative relationship with identity crisis among these individuals. In addition, Resilience and identity crisis showed a significant negative association. Multiple regression analysis showed that general health explains a small amount of the variance in resilience and identity crisis in these individuals.

This study is consistent with the study of [Aghayusefi and Bazyari Meymand \(2013\)](#),

which stated that migraine patients who had higher resilience also had higher general health and vice versa. Studies also show that neurofeedback strengthens and improves resilience and flexibility of the individual, and decreases the severity of general health. [Farber et al' study \(2000\)](#) on AIDS patients showed that low resilience in the target group was significantly positively associated with low physical and mental health.

These findings are consistent with the concepts of cognitive-emotional religious theory, because according to this theory, humans face fundamental questions in their lives that without answering them, their lives will be empty and aimless and they will suffer from identity crisis ([Rajaei, 2008](#)). The findings show that there is a significant negative relationship between identity crisis and general health. This issue shows that individuals who suffer from identity crisis have problems in terms of general health and symptoms of depression, anxiety, physical symptoms and social actions.

5. Conclusion

Social supports such as covering vulnerable groups in the Imam Khomeini Relief Committee, welfare, etc., enhance general health and resilience and lower identity crisis among adolescents. The research has a limitation that it only included male students and those under the coverage of the Imam Khomeini Relief Committee. We recommend that future research should involve both sexes and people under the coverage of other social systems.

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Conflict of interest

The author has no conflict of interest to declare.

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