IJBMC
International Journal of Body, Mind and Culture

Volume 12, Issue 3, pp 98-104
DOI: 10.61838/ijbmc.v12i3.880

Article type:
Original Research

Family Cohesion, Religious Values, and Spiritual Intelligence as Predictors of Youth Addiction: The Mediating Role of Social and Psychological Well-being

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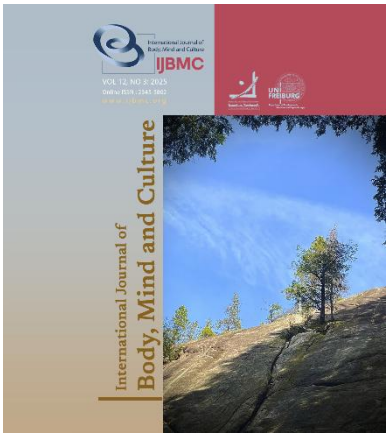

Article history:

Received 28 Dec 2024
Revised 14 Feb 2025
Accepted 24 Feb 2025
Published online 28 Mar 2025

How to cite this article:
Moazami Goudarzi, S., Azemoudeh, M., & Hoseini Nasab, S. D. (2025). Family Cohesion, Religious Values, and Spiritual Intelligence as Predictors of Youth Addiction: The Mediating Role of Social and Psychological Well-being. International Journal of Body, Mind and Culture, 12(3), 98-104.

ABSTRACT

Objective: This study aimed to develop a causal model examining the roles of family cohesion, religious values, and spiritual intelligence in predicting youth addiction, with social and psychological well-being as mediators.

Methods and Materials: Using a descriptive-correlational design, data were collected from 500 students at Azad University in Tehran, selected through multi-stage cluster sampling. Data were gathered using validated questionnaires, including Olson's Family Cohesion Scale, Glock and Stark's Religious Values Questionnaire, King's Spiritual Intelligence Scale, and Ryff's Psychological Well-Being Scale. Structural Equation Modeling (SEM) was utilized to test the hypothesized relationships.

Findings: The results revealed that family cohesion (β= -0.127, p<0.001), religious values (β= -0.107, p<0.05), and spiritual intelligence (β= -0.257, p<0.001) significantly reduced addiction susceptibility. Social and psychological well-being mediated these relationships, collectively explaining 88% of the variance in addiction susceptibility.

Conclusion: These findings highlight the protective roles of family dynamics, religious beliefs, and spiritual intelligence in fostering youth well-being and resilience against addiction.

Keywords: Family cohesion, religious values, spiritual intelligence, social well-being, psychological well-being.

Introduction

Physical, psychological, and personality transformations during youth introduce new challenges, with pressures from instincts, needs, and peer group affiliations contributing to self-expression and independence. However, inadequate facilities, poor emotional relationships, and insufficient awareness often lead to intellectual crises, psychological distress, and tendencies toward social deviations, such as addiction. Substance abuse, particularly during adolescence and youth, poses significant physical, psychological, and societal consequences, including

impaired judgment, criminal behavior, and risk-taking. Statistics indicate that drug-related accidents remain the leading cause of death among individuals aged 15–24 in the U.S. (Chesang, 2013).

Addiction is a global crisis and among the most critical social threats of the 21st century, encompassing biological, psychological, and social dimensions (Shojeyan et al., 2024; Tajeryan et al., 2023). In Iranian society, addiction undermines family structures, social stability, and individual well-being, necessitating urgent interventions. Factors such as family cohesion, religious values, and spiritual intelligence have been identified as protective elements against addiction. Families play a pivotal role in shaping psychological and behavioral outcomes during childhood and adolescence. Dysfunctional family dynamics, including aggression and lack of cohesion, have been consistently linked to increased substance use disorders (Jahandar-lashaki, 2023; Lian & Xiao, 2023; Pirzadeh & Parsakia, 2023; Saleem, 2023).

Religious values and spirituality further contribute to reducing addiction vulnerability. Strong religious beliefs and adherence to moral frameworks provide a protective barrier against substance abuse by fostering self-control and resilience. Research highlights the direct influence of religiosity on reducing the likelihood of drug use, emphasizing its preventive role across cultural contexts (Rajabi et al., 2023). Spiritual intelligence, conceptualized as the ability to derive meaning and purpose from life, enhances adaptability and psychological resilience, acting as a buffer against risky behaviors, including addiction (King, 2008; Cook et al., 2020).

Beyond family and religious values, psychosocial well-being emerges as a significant mediator in addiction prevention. Social well-being reflects the quality of interpersonal relationships and societal functioning, while psychological well-being encompasses self-acceptance, autonomy, and personal growth. Together, these dimensions are critical for fostering resilience and reducing addiction susceptibility (Ko et al., 2018; Ryff & Singer, 1998). Addressing these mediators offers a holistic framework for intervention.

Despite extensive research on addiction, few studies have systematically examined the interplay between family cohesion, religious values, and spiritual intelligence with the mediating roles of social and psychological well-being. This study aims to fill this gap by developing a causal model to explore these relationships among Iranian university students, providing a comprehensive understanding of the factors influencing addiction vulnerability. By integrating these variables into a unified model, the research offers valuable insights for designing culturally sensitive prevention strategies.

Methods and Materials

Study Design and Participants

This study employed a descriptive-correlational design using structural equation modeling (SEM) to examine the relationships between family cohesion, religious values, spiritual intelligence, and addiction susceptibility, with social and psychological well-being as mediators.

The statistical population included all students of Azad University in Tehran (N = 14,700). A multi-stage cluster sampling method was used to ensure regional representation. From five geographic regions (north, south, east, west, central), one university was randomly selected, and within each university, a class was randomly chosen. A total of 500 students participated, exceeding Kline's (2005) recommended minimum sample size of 40 participants per predictor variable. Inclusion criteria included being an enrolled student aged 18–30 years, with no prior history of diagnosed psychological disorders or addiction. Participants provided informed consent and were assured of confidentiality.

Instruments

Family Cohesion Scale: The Family Cohesion Scale, based on Olson's combined model (1999) and developed by Samani (2002), consists of 28 items. Responses are scored on a 5-point Likert scale ranging from "strongly disagree" (1) to "strongly agree" (5) (Olson, 1999). Samani and Razavi (2007) confirmed the validity of this tool for assessing family cohesion. Samani (2002) reported Cronbach's alpha reliability as 0.79 and test-retest reliability as 0.90 (Samani, 2002).

Religious Values Questionnaire: This questionnaire, developed by Glock and Stark to measure attitudes and beliefs related to religiosity, has been

Ijbmc.org
E-ISSN: 2345-5802

standardized in various countries, including Europe, the U.S., Africa, and Asia, and adapted for Islam (Serajzadeh, 2005). The instrument assesses religiosity across five dimensions—belief, emotional, consequential, ritualistic, and intellectual—using 26 items. The 5-point Likert scale ranges from "strongly disagree" to "strongly agree," with scores for each item varying between 0 and 4. The questionnaire demonstrated an overall Cronbach's alpha of 0.83 in its latest administration with students, and dimension-specific alphas ranged from 0.72 to 0.83.

Spiritual Intelligence Scale (SISRI): King's Spiritual Intelligence Self-Report Inventory (SISRI) contains 24 items rated on a 5-point Likert scale (0–4), measuring scores ranging from 0 to 96. It includes four subscales: Critical Existential Thinking (CET), Personal Meaning Production (PMP), Transcendental Awareness (TA), and Conscious State Expansion (CSE). King (2008) reported a Cronbach's alpha of 0.95 and split-half reliability of 0.84 (King, 2008). In Iran, Rabiee et al. (2002) reported a Cronbach's alpha of 0.89 (Hodhodi et al., 2021).

Addiction Susceptibility Questionnaire (Tendency Toward Substance Use): Developed by Ghorbani (2001), this 30-item questionnaire evaluates the tendency toward substance use. Each item is scored on a 3-point scale, with scores ranging from 1 to 2. Content validity was established through expert opinions and literature, and the reliability coefficient was reported as 0.90 (Torki et al., 2006).

Social Well-Being Questionnaire: The Social Well-Being Questionnaire, developed by Lee and Keyes (1998), comprises 15 items measuring dimensions such as social integration, social acceptance, social participation, social flexibility, and social interaction. Responses are rated on a 5-point Likert scale from "strongly disagree" to "strongly agree." In Taheri's (2020) study, reliability was calculated using split-half and Cronbach's alpha methods, yielding coefficients of 0.80 and 0.77, respectively. Confirmatory factor analysis was used to verify the questionnaire's validity (Naderifar et al., 2023).

Psychological Well-Being Questionnaire by Ryff (1989): This questionnaire measures psychological well-being across six factors: autonomy, personal growth, positive relationships, life purpose, self-acceptance, and environmental mastery. It contains 18 items. Ryff (1989) reported Cronbach's alphas ranging from 0.86 to 0.93 across dimensions. In an Iranian study, reliability coefficients were calculated for dimensions such as personal growth (0.78), self-acceptance (0.71), life purpose (0.70), and autonomy (0.82) using Cronbach's alpha (Bayani et al., 2008).

Data Analysis

Descriptive statistics (mean, standard deviation) were computed for all variables. SEM was conducted using AMOS software to test the hypothesized relationships, including mediating effects. Model fit was evaluated using indices such as RMSEA (<0.08), CFI (>0.90), and SRMR (<0.08), ensuring the model's validity.

Findings and Results

The descriptive statistics for all variables are presented in Table 1. These statistics provide an overview of the central tendency and variability in family cohesion, religious values, spiritual intelligence, social well-being, psychological well-being, and addiction susceptibility scores.

Table 1

Descriptive Statistics of Study Variables

Variable	Component	Mean	SD
Family Cohesion	Correlation with Parents	14.89	5.39
	Interaction Duration	19.06	6.30
	Location	13.47	3.21
	Decision-Making	11.20	3.50
	Emotional Connection	12.20	2.20
	Marital Relationships	9.37	2.63
	Parent-Child Relationship	16.46	2.60
Religious Values	Belief	11.05	2.46
	Emotional	13.94	2.02
	Consequential	12.61	1.85
	Ritualistic	12.89	2.19

Spiritual Intelligence	Critical Thinking	9.87	2.52
	Personal Meaning Production	10.44	2.89
	Transcendental Awareness	11.12	2.84
	Conscious State Expansion	6.34	4.47
Social Well-Being	Social Integration	7.89	2.41
	Social Acceptance	9.24	4.27
	Social Participation	6.87	2.16
	Social Flexibility	6.22	4.54
	Social Interaction	9.84	2.17
Psychological Well-Being	Autonomy	9.16	2.59
	Personal Growth	12.24	1.67
	Positive Relationships	14.17	1.21
	Purpose in Life	8.26	2.74
	Self-Acceptance	4.19	4.29
	Environmental Mastery	7.22	2.71
Addiction Susceptibility	Self-Satisfaction	6.29	2.41
	Pessimism	8.44	2.14
	Impulsivity	5.69	1.09
	Risk-Taking	7.22	2.11

The correlations between the study variables are shown in Table 2. All significant relationships were positive for protective factors (e.g., family cohesion) and negative for addiction susceptibility.

Table 2

Correlation Coefficients Between Study Variables

Variables	Family Cohesion	Religious Values	Spiritual Intelligence	Social Well-Being	Psychological Well-Being	Addiction Susceptibility
Family Cohesion	1					
Religious Values	0.48**	1				
Spiritual Intelligence	0.37**	-0.01	1			
Social Well-Being	0.29**	0.19**	0.16**	1		
Psychological Well-Being	0.41**	0.32**	0.11**	0.15**	1	
Addiction Susceptibility	-0.51**	-0.21**	-0.19**	-0.25**	-0.20**	1

**p<0.01 indicates statistically significant correlations.

The results in Table 2 indicate significant relationships between family cohesion, religious values, spiritual intelligence, social and psychological well-being, and addiction susceptibility. Most variables demonstrate significant correlations. The negative correlations between family cohesion, religious values, spiritual intelligence, and addiction susceptibility highlight their protective effects. Path analysis was conducted to test the hypotheses and the mediating roles of social and psychological well-being. The final model is summarized in Table 3.

Table 3

Path Coefficients for Research Hypotheses

Paths	β	t-value	Result
Addiction Susceptibility --- Family Cohesion	-0.127	4.286	Accepted
Addiction Susceptibility --- Religious Values	-0.107	2.117	Accepted
Addiction Susceptibility --- Spiritual Intelligence	-0.257	4.486	Accepted
Addiction Susceptibility --- Social Well-Being	-0.187	3.210	Accepted
Addiction Susceptibility--- Psychological Well-Being	-0.227	4.592	Accepted
Family Cohesion ---> Well-Being ---> Addiction Susceptibility	-0.247	5.471	Accepted
Religious Values ---> Well-Being ---> Addiction Susceptibility	-0.289	6.241	Accepted
Spiritual Intelligence ---> Well-Being ---> Addiction Susceptibility	-0.255	5.627	Accepted

According Table 3, family cohesion, religious values, and spiritual intelligence significantly reduce addiction susceptibility both directly and indirectly through social and psychological well-being. Social and psychological

well-being act as strong mediators, explaining a substantial portion of the variance (88%) in addiction susceptibility. Among predictors, spiritual intelligence (-0.257) exhibited the strongest direct effect on addiction susceptibility, followed by psychological well-being (-0.227). The model fit indices confirm the adequacy of the proposed structural model and presented in Table 4.

Table 4

Model Fit Indices

Index	Acceptable Value	Computed Value
X^2/df	≤ 2	2.74
RMSEA	< 0.08	0.04
NFI	≥ 0.9	0.97
CFI	≥ 0.9	0.96
GFI	> 0.9	0.94
IFI	≥ 0.9	0.95
RFI	≥ 0.9	0.98
PRATIO	≥ 0.5	0.81
PNFI	≥ 0.5	0.72
PCFI	≥ 0.5	0.74
SRMR	< 0.08	0.07

Table 4 showed that all indices meet the acceptable thresholds, confirming good model fit (RMSEA = 0.04, CFI = 0.96, GFI = 0.94, SRMR = 0.07, X^2/df = 2.74). To assess construct reliability, Cronbach's alpha and composite reliability (CR) values were calculated. Acceptable CR values were ≥ 0.60, and Cronbach's alpha values ≥ 0.70.

Discussion and Conclusion

The present study aimed to explore the role of family cohesion, religious values, and spiritual intelligence in predicting addiction susceptibility among university students, with social and psychological well-being as mediators. The findings confirm that these variables significantly contribute to addiction vulnerability, aligning with and extending existing research in this area.

The results highlight the protective role of family cohesion against addiction. A strong family unit fosters emotional support, enhances adaptability, and reduces risky behaviors (Xiang et al., 2022). Previous studies have similarly emphasized that cohesive family environments decrease aggression and promote psychological stability, acting as a buffer against addiction (Hummel et al., 2013). Dysfunctional family dynamics, conversely, correlate with increased addiction vulnerability (Yan et al., 2014). The current findings underscore that fostering intimate and cooperative family relationships is critical in reducing the likelihood of addiction among youth.

Religious values were found to have a significant negative relationship with addiction susceptibility, consistent with prior research (Rajabi et al., 2023). Religiosity provides a moral framework that discourages substance use and fosters resilience through spiritual practices and community support. Strong religious beliefs can enhance self-control and provide coping mechanisms that counteract stressors often linked to addiction (Jahandar-lashaki, 2023; Jangi-Zehi, 2017). The findings reinforce the idea that families should integrate religious practices into their daily lives to shield youth from addiction.

Spiritual intelligence, conceptualized as the ability to find meaning and purpose in life, demonstrated a robust protective effect against addiction susceptibility. This aligns with the work of King (2008) and Sohrabi & Naseri (2010), who emphasized that spiritual intelligence fosters self-awareness and resilience, reducing tendencies toward substance abuse (King, 2008; Sohrabi & Naseri, 2010). Spiritual intelligence may provide youths with tools to navigate existential challenges and emotional distress, mitigating the risk of turning to addictive substances.

Social and psychological well-being emerged as significant mediators in the relationship between predictors and addiction susceptibility. This finding is supported by Ryff & Singer's (1998) framework, which identifies psychological well-being as a multidimensional construct encompassing autonomy, personal growth, and life purpose (Ryff & Singer, 1998).

Similarly, social well-being, characterized by social integration and participation, enhances an individual's sense of belonging and reduces feelings of isolation, both of which are critical in addiction prevention (Ko et al., 2018). These mediators highlight the need for interventions that not only strengthen individual traits but also enhance social and psychological resources.

The mediating effects of social and psychological well-being suggest that these variables act as pathways through which family cohesion, religious values, and spiritual intelligence exert their protective influences. For example, cohesive family environments may indirectly reduce addiction susceptibility by promoting social skills and psychological resilience in children. Likewise, spiritual intelligence may enhance psychological well-being by providing a framework for meaning-making, which in turn reduces the appeal of addictive substances (Florez et al., 2018). Future studies should further explore these mechanisms using longitudinal designs to establish causal pathways.

The findings are particularly relevant within the Iranian cultural context, where family and religion play central roles in shaping youth behavior. Unlike Western contexts, where individualism may dominate, Iranian society places a high value on collectivism, familial bonds, and religious adherence (Rezaei et al., 2014). These cultural factors amplify the significance of family cohesion and religious values in addiction prevention. However, these findings may also hold relevance for other collectivist cultures, suggesting broader applicability.

The strong association between family cohesion and addiction susceptibility underscores the importance of family-based prevention programs. These could include family therapy, parenting workshops, and initiatives to strengthen communication and emotional bonds within families. Religious institutions and community programs can play a vital role in fostering religious and spiritual values among youth. Activities such as youth mentorship programs, spiritual workshops, and religious gatherings could enhance resilience against addiction. Schools and universities should prioritize programs that promote psychological well-being and social connectedness. Examples include peer support groups, mental health services, and extracurricular activities aimed at building community and life skills.

While the study provides significant insights, it is not without limitations: The cross-sectional nature of the study limits causal inferences. Future research should employ longitudinal designs to better understand the temporal relationships between variables. The reliance on self-report questionnaires may introduce social desirability bias, particularly on sensitive topics like addiction and religiosity. The findings are specific to the Iranian cultural context and may not fully generalize to other societies. Comparative studies in diverse cultural settings are recommended.

This study highlights the critical roles of family cohesion, religious values, and spiritual intelligence in reducing addiction susceptibility among youth, with social and psychological well-being serving as mediators. These findings contribute to a growing body of literature emphasizing the importance of holistic, culturally tailored approaches to addiction prevention. By addressing both individual and systemic factors, policymakers and practitioners can design effective interventions that enhance resilience and well-being among vulnerable populations.

Acknowledgments

The authors extend their gratitude to all participants in the study.

Declaration of Interest

The authors of this article declared no conflict of interest.

Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants. Ethical considerations in this study were that participation was entirely optional.

Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

Funding

This research was carried out independently with personal funding and without the financial support of any governmental or private institution or organization.

Authors' Contributions

All authors equally contribute to this study.

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