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PRELIMINARY INVESTIGATION OF RELIGIOSITY AND ACADEMICIAN WELL-BEING: A PILOT STUDY IN A MALAYSIAN PUBLIC HIGHER EDUCATION

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Abstract:

This study in general examined the influence of religiosity in improving academicians' mental health within the context of the Job-Demand Resource (JD-R) model. The JD-R model has been utilised to comprehend how job demands and resources affect workers' performance and well-being. Religiosity, often overlooked as a psychological resource, can play a significant role in mitigating the negative effects of job demands and enhancing employee mental health. Religiosity has increasingly gained attention as a potential contributor to improving employee mental health. This study also examines the literature and research findings that suggest a significant link between religiosity and mental health outcomes. To promote a comprehensive strategy for improving mental health in the workplace, it is important to respect employees varied religious perspectives and the necessity of inclusive workplace policies that permit employees to express their religiosity in a way that is consistent with their beliefs. Specifically, this pilot study aims to develop and test an instrument measuring variables related to religiosity and academician mental health at a public higher education institution in Malaysia. Quantitative data were collected using a questionnaire that was distributed to

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100 academicians. The results demonstrate that all the measures exhibited a high level of dependability, with coefficients ranging from 0.863 to 0.918, as determined by Cronbach's alpha coefficient test. Notably, every single one of these coefficients was higher than the criterion of 0.70. Future researchers can adopt and adapt the tested and validated instrument to their contextual studies.

Keywords:

Academicians, Mental Health, Religiosity, Job Demand, Job Resources

Introduction

The mental health and well-being of the employees is a significant resource that impacts the performance of the organization (Saju et al., 2019). Lau (2020) highlighted that when dealing with mental health, it is crucial to have sufficient job resources to experience work engagement. The devastating consequences of poor mental health extend beyond the expenses associated with direct care to even greater indirect costs associated with lost productivity, such as presenteeism and absenteeism (i.e., declining performance when working) (Wu et al., 2021; Pinheiro et al., 2017). Stress-stricken individuals frequently experience poor communication and decision-making, increased irritability, and a decline in their capacity to function as a team, which can lead to breakup and poor performance overall (Haddon, 2018).

In the general population, and compared to the public, academicians have experienced more mental health issues. More recently, it was shown that US academicians reported having poorer mental health more frequently than two comparable national samples of the general population did (McLean et al., 2017). Academicians have lower job satisfaction and worse mental health as compared to other highly pressured occupational groups (Travers & Cooper, 2014). Somatic disorder, anxiety, social dysfunction, and depression are the typical problems faced by academicians while performing their tasks and responsibilities. Previous research has demonstrated that work-related factors have contributed to the development of stress, anxiety, and depression, including high job demands, low job control, high effort–reward imbalance, low relational justice, low procedural justice, role stress, bullying, and low social support in the workplace. Gray et al. (2019) found that employee's mental health is affected due to high job demand, low job control, low workplace social support, effort-reward imbalance, low organizational procedural justice, low organizational relational justice, organizational change, job insecurity, temporary employment status, typical working hours, bullying, and role stress. Crucially, it has been shown that these factors directly affect the health and well-being of employees (Urbina-Garcia, 2020).

Most studies, however, have either addressed the presence of mental health or its influence on different aspects. Fewer studies were conducted that focus on mental health among Muslims such as by Koenig and Al Shohaib (2019). Few empirical studies have been conducted on the effects of academicians' mental health in the Malaysian context. Religiosity, encompassing spiritual beliefs, practices, and a sense of connection to a higher purpose, offers a unique perspective on how individuals navigate the challenges presented by their professional lives. The link between employment demands, job resources, and mental health might be exacerbated by religiosity. Both Abualigah et al. (2021) and Achour et al. (2015) discovered that religiosity can improve job engagement and well-being, respectively, with Abualigah emphasizing the significance of distinguishing between challenging demands and those that are hindering.

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However, few studies treat religiosity as a personal resource from an HRM perspective (Abu Bakar et al., 2016). Even though occupational stress especially mental health is on the rise in modern companies, the work-related aspect of religious coping has largely gone unexplored (Pandey & Singh, 2019). The literature on the use of religiosity as an intervention is very scarce to support its use among academicians (Chirico et al., 2020). Nonetheless, research on the influence of religious elements on occupational performance in Islamic settings remains limited (Hassi et al., 2021).

The Job-Demand Resource (JD-R) model provides a lens through which researchers and organizations can examine the intricate interplay between job demands and resources to enhance overall well-being. Beyond the conventional understanding of job resources, there is a growing recognition of the potential role of religiosity in supporting employees' coping mechanisms. Therefore, the purpose of this study is to examine the influence of religiosity on mental health among academicians in a public higher education institution in Malaysia. In addition, this study aims to develop and test an instrument measuring variables related to religiosity and academician mental health at a public higher education institution in Malaysia. This study expands the field of mental health research to the Islamic setting of Malaysia, a country where Muslims predominate, while the bulk of studies on religiosity have been on samples from Western civilizations. By concentrating on one personal resource, religiosity, the current study helps to clarify concepts about personal resources within the JD-R model. It is needed to explore its capacity to act as a personal resource and a buffer against the negative effects of job demands, providing individuals with a source of emotional support, resilience, and a framework for finding purpose and meaning in their work.

Literature Review

Academician Mental Health

In the academic setting, academicians are essential in ensuring that students meet the learning objectives that align with their degree of education and educational policy. However, the incidence of stress among academicians has increased globally, and work-related expectations, poor coping strategies, and attributional behaviours have all been linked to high levels of anxiety and depression as well as low job satisfaction in university staff members (Mohamed et al., 2021). Public universities around the world have experienced tremendous transformation in the last few decades, including massification, increased internationalisation, a greater focus on the application of academic work, and an increase in the power of university administration. These changes have altered both the nature of academic work and workplaces (Mudrak et al., 2018).

Many studies have shown that several factors, including the demands of teaching, heavy administrative workloads, research pressures, and inadequate leadership and management, are particularly harmful to well-being (Barkhuizen et al., 2014; Coulthard & Keller, 2016; Guthrie et al., 2017). Lee et al. (2022) found that academicians in higher education have experienced a rise in occupational stress and in Australia and New Zealand, this trend has been especially pronounced. A study by Tai et al., (2019) found that stress has continuously been identified as a prevalent mental health issue among academicians in Malaysia. Moreover, it is reported that academicians' mental health is negatively impacted by several variables that contribute to their increased workload and stress, including work-family conflict, inadequate training, and increased work overload (Mosleh et al., 2022).

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Numerous elements in the workplace are known to influence employees' mental health. A general study revealed that work-related factors that contribute to the development of depression and/or anxiety include high job demands, low job control, high effort–reward imbalance, low relational justice, low procedural justice, role stress, bullying, and low social support in the workplace. Gray et al. (2019) found that employee's mental health is affected due to high job demand, low job control, low workplace social support, effort-reward imbalance, low organizational procedural justice, low organizational relational justice, organizational change, job insecurity, temporary employment status, typical working hours, bullying, and role stress. Wu et al. (2021) found that workplace stressors have been linked to an elevated risk for many detrimental mental health effects including extended working hours, a lack of social support, and unclear management and job tasks. Crucially, it has been shown that these factors directly affect the health and well-being of employees (Urbina-Garcia, 2020).

Job Demand-Resource Model (JD-R Model)

The JD-R model was developed to address some of the drawbacks of previous work psychology research models, such as the effort-reward imbalance (ERI) model (Siegrist,1996), the job demand-control (JD-C) model (Karasek, 1979), and the job demand-control-support (JD-C-S) model (Johnson & Hall, 1988). In contrast to other theories, the JD-R model does not identify certain characteristics that contribute to motivation or job strain. It makes the notion that each profession might have unique risk factors linked to work-related stress and that these characteristics fall primarily into two categories: job demands and job resources (Bakker & Demerouti, 2007). The job demands-resources model, or JD-R model, weighs job demands against job resources. The premise of the concept is that job demands, and job resources may be applied to any part of a job (Demerouti et al., 2001). Studies demonstrating that high job demands predict burnout and depression, long-term sick leave, and lower job performance lend credence to the idea that high job demands initiate a health-deteriorating process (Bakker et al., 2003; Bakker et al., 2004; Hakanen et al., 2008; Simbula, 2010).

On the other side, job resources are organisational, mental, social, or physical elements that are useful in accomplishing goals at work. It has been demonstrated that job resources can mitigate the negative consequences of high job demands on experienced burdens (Bakker et al., 2010; Xanthopoulou et al., 2007). Numerous studies have been conducted and found that religiosity is a significant personal resource (Abualigah et al., 2021; Weiß & Süß, 2019; Abu Bakar et al., 2018; Koburtay & Abualigah, 2023; Apergis et al., 2023). This study highlights the contextual applicability and possible extension of the JD-R model by extending it to the religiosity and mental well-being of employees in a diverse cultural context in Malaysia.

Religiosity and Academician Mental Health

According to Abu Bakar et al. (2018), researchers are beginning to pay more attention to how religion shapes people's beliefs and behaviours in both life and the workplace. Abbas et al. (2021) found that religion can serve as a source of internal control, while practicing religion as a strong belief system and code of conduct in life is significant in many previous studies such as Dent et al., 2005; Fiori et al., 2006; Furnham, 1982; Gabbard et al., 1986; Jackson & Coursey, 1988). A study by Onyemah et al. (2019) also found the important effects of religiosity as an antecedent to salesperson job satisfaction, proving that religiosity has a significant impact on employees. Moreover, Novitasari et al. (2020) reported that religiosity has a positive and significant effect on academicians' performance. The impact of religiosity on the relationship between work stress and several individual outcomes, such as

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psychosomatic issues, turnover, and job satisfaction, was discovered by Jamal and Badawi (1993). Previous research has also shown a substantial relationship between academicians' effectiveness and their level of religion (Mathew et al., 2018).

There is evidence that religiosity can help shield a person from stress (Weiß & Süß, 2019). Higher levels of religiosity have been linked to reduced levels of psychological strain, according to several studies (e.g. Ellison et al., 2001; Nonnemaker et al., 2003). Religiosity helps the individual deal with stressors, which attenuates the link between psychological strain and professional stress, as has been established for other personal resources like optimism and self-esteem (Mäkikangas & Kinnunen, 2003). A study by Fatima et al. (2018) found that religious practices and religious coping were important indicators of employee well-being. According to studies on stress, personal resources are crucial because they may boost self-esteem and have a favourable impact on how resources are perceived at work (Avey et al., 2010; Xanthopoulou et al., 2007). Individual religiosity is a significant but often underutilized personal resource that is the subject of this investigation. Religion can be a personal resource that has a positive impact on one's mental and overall well-being in several ways. Believing in a supreme being can offer daily direction and assurance in the coherence of the world, which can lessen negative emotions and boost happy ones, improving well-being and health. The hypothesized model of academician mental health is shown in Figure 1 signifying a relationship between religiosity and academician mental health at a public higher education institution in Malaysia.

Data Collection and Methods

A self-administered questionnaire survey was used in this quantitative study to collect data from participants. It was also carried out to assess the items and determine the reliability of each dimension in the instrument. A total of 100 academicians in a public higher education institution in Malaysia participated in this study. A list of potentially validated items from previous studies was used to develop the study's measurement scale (Table 1). To explain the relationship between the variables under investigation, the study used a correlational research design. The list of academicians employed by public higher education institutions in Selangor, Malaysia, served as the basis for the sampling frame. It was also carried out to assess the items and determine the reliability of each dimension in the instrument. A total of 100 sets of questionnaires were distributed to the respective respondents. 100 sets of the questionnaire were returned, yielding a 100% response rate. To obtain the necessary answers to the study questions, the items in the questionnaire were adopted from the established questionnaire, and the items were modified and used to develop the study's measurement scale (Table 1). The 31 items were operationalized using two variables: employees' mental health and religiosity. The seven-point Likert scale (1=never to 7=very often) and five-point Likert scale (1= strongly disagree to 5=strongly agree) were used in this study. The data was analyzed using statistical software SPSS version 29. Hence, a pilot test was carried out to assess the items and determine the reliability of each dimension in the instrument including the Cronbach alpha test and exploratory factor analysis.

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Table 1: Summary Table of Instruments

Constructs	Sources	No. of Items
Employee's Mental Health	Lovibond & Lovibond, 1996	21
Religiosity	Plante et al., 2002	10

Result and Analysis

Demographic Analysis

The result indicated that most of the respondents were female (73%). 73 out of 100 respondents were at the age of 36-40 years old and 41-45 years old (28% and 31%). Almost half of the respondents or 51 (55.7%) respondents possessed a master's degree as their highest academic qualification. The remaining 49 (49%) respondents were the PhD holders. Most of them were in grades 51 and 52 with 69 respondents (69%) holding a designation as senior lecturer (69, 69%), 27 = 27% as a lecturer, and 4 (4%) serving as associate professor. And most of them (98) equally to 98% worked permanently while only 2 of them (2%) worked on a part-time basis. Half of the respondents (50) earned RM7676-10,000 monthly and worked for 11 to 15 years old (33%), while the others worked for 16-20 years (19%) and 21-25 years (14%). The rest have worked for less than 15 years. Majority of the respondents (86) were married (86%) while others were single, and all respondents were Malay (100%).

Validity and Reliability of the Instrument

A preliminary investigation was carried out in January 2024 at the Universiti of Teknologi MARA, Puncak Alam Campus, Selangor, using participants whose backgrounds are comparable to those of the actual respondents. In this pilot study, 100 participants were recruited. The data from the pilot test were subjected to reliability and exploratory factor analyses after collection. The sections that follow provide a detailed description of reliability analysis and exploratory factor analysis.

Reliability is frequently used to gauge the internal consistency of the items. The reliability of the collected data was assessed using Cronbach's Alpha. Test-retest reliability refers to the consistency of a test in measuring the same construct on multiple occasions, resulting in the same outcomes (Salkind, 2017). The instruments underwent reliability analysis, and the resulting data is presented in Table 2. The findings demonstrate that all the items exhibited good reliability ranging from 0.882 to 0.918. As the dependent variable, Mental Health (Stress) recorded an excellent internal consistency with a score of 0.916. This was followed by Mental Health (Depression) with a score of 0.882 and Mental Health (Anxiety) with 0.863. Meanwhile, as the independent variable, religiosity recorded excellent reliability with a score of 0.918. Nunnally (1978) and Hair et al. (2010) state that the alpha level should be 0.7 or higher, which means that a value greater than 0.7 indicates that the variables are internally consistent and suitable measurements for the study. Therefore, to demonstrate the constructs' internal consistency in the present study, a minimum criterion of 0.70 was selected. All the study's variables had results varying from 0.882 to 0.918. Given that every value was greater than 0.7 and was inside the permitted range, it can be concluded that every variable was reliable.

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Table 2: Descriptive Statistics and Reliability Analysis

Variable	Mean	Std. Deviation	Cronbach's Alpha
Dependent Variable:			
Academician's Mental Health (Depression)	1.7619	.76737	0.882
Academician's Mental Health (Anxiety)	1.9307	.97358	0.863
Academician's Mental Health (Stress)	2.1082	1.13335	0.916
Independent Variable:			
Religiosity	4.9091	.27880	0.918

After completing a pilot test to determine the validity of each instrument measuring mental health (stress, anxiety, and depression) and religiosity, Exploratory Factor Analysis (EFA) was used in this investigation. The goal of doing an exploratory factor analysis (EFA) is to identify and summarize data by a factor that indicates a correlation between factors or items. According to Hair et al. (2014), factor loadings with an absolute value of less than ±0.5 are discarded, whereas items with a value more than ±0.55 are deemed necessary for measurement. It is recommended that the Kaiser Meyer-Olkin (KMO) Measure of Sampling Adequacy should be higher than 0.50 (Hair et al., 2010). As stated by Hair et al. (2014), the results of Bartlett's test of sphericity should be significant at $p < 0.001$. Tables 3, 4, 5, and 6 summarize the measures of the appropriate factor analysis.

Table 3: The KMO and Bartlett's Test Score of Mental Health

Kaiser-Meyer-Olkin Measure of Sampling Adequacy		.887
Bartlett's Test of Sphericity	Approx. Chi-Square	962.612
	df.	136
	Sig.	0.000

Table 4: Rotated Component Matrix (Mental Health)

Items	Component			Cronbach's Alpha
Stress	1	2	3	
MHS01	.676			
MHS02	.837			
MHS03	.749			0.916
MHS04	Remove			
MHS05	.702			
MHS06	.813			
MHS07	.644			

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Depression			
MHD01	.748		**0.882**
MHD02	.812		
MHD03	.699		
MHD04	.622		
MHD05	.822		
MHD06	.678		
MHD07	.523		
Anxiety			
MHA01		.665	0.863
MHA02		.788	
MHA03		.713	
MHA04		Remove	
MHA05		Remove	
MHA06		.634	
MHA07		Remove	

The KMO of Mental Health (Depression, Anxiety, and Stress) in Table 4 is 0.887, which is greater than the required minimum of 0.5. The Barlett's Test indicates a significant result of 0.0000 (p-value < 0.001) as well. Table 5 displays the three components that emerge from the EFA technique along with the associated elements. The significance of each item in measuring the construct is shown by its factor loading. Factor loading must have a minimum acceptable value of 0.5. Items with less than this value are eliminated from the investigation. As a result, three items (MHA04, MHA05, and MHA07) measuring anxiety were eliminated, and one item (MHS04) measuring stress was discarded.

Table 5: The KMO and Bartlett's Test Score of Religiosity

Kaiser-Meyer-Olkin Measure of Sampling Adequacy		.907
Bartlett's Test of Sphericity	Approx. Chi-Square	1088.881
	df.	45
	Sig.	0.000

Table 6: Rotated Component Matrix (Religiosity)

Items	**Components**	**Cronbach's Alpha**
Religiosity	1	
REL01	.907	
REL02	.912	
REL03	.885	
REL04	.863	
REL05	.730	0.918
REL06	.856	
REL07	.903	
REL08	.728	
REL09	.866	
REL10	.826	

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Similarly, the KMO of religiosity as represented in Table 5 is 0.907, which is greater than the required minimum of 0.5. Table 6 displays one component that emerges from the EFA technique along with the associated elements. No items were removed from this construct since each item meets the minimum requirement for factor loading of 0.5.

Conclusion and Recommendation

The present pilot study examined the effect of religiosity on academicians' mental health. The data were collected from academicians employed in a public higher education institution in Selangor, Malaysia. The objective of this pilot study is to examine the reliability as well as the face and content validity of the measurement instrument in anticipation of a more extensive examination. As mentioned by In (2017), a pilot study helps to minimize needless effort from both researchers and participants, as well as the waste of research resources. It also gives the information needed to evaluate all other components of the main study, including sample size calculations. As stressed by Arnold et al. (2009) and Thabane et al. (2010), a pilot study, which is typically a smaller-scale investigation aids in the planning and adjustment of the larger study and is crucial in the initial phase of the overall research methodology. This study expands on the knowledge of Malaysian universities regarding job resources and strengthens the personal resources of academicians to assist them in their work and is in line with hundreds of worldwide investigations that have been published in the literature. These studies emphasize the significance of a person's job and personal resources in determining their resilience and capacity to handle a variety of life's challenges. From a theoretical perspective, this study contributed to the JD–R and their relationship with employee's mental health and well-being.

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