



University of Hormozgan



Educational and Behavioral
Research Center

Predicting Students' Happiness Based on Their Quality of Life and Religious Orientation

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Article Info

Article type:

Research Article

Article history:

Received 10 May. 2025

Received in revised form 17

Aug. 2025

Accepted 27 Sep. 2025

Published online 01 Jun. 2026

Keywords:

Happiness,

Quality of Life,

Religious Orientation,

Students

ABSTRACT

Objective: This study aimed to examine the role of quality of life and religious orientation in predicting the happiness of female students.

Methods: This research employed a descriptive–correlational design. The study sample consisted of 250 female high school students selected through simple random sampling from three schools in District 4 of Mashhad during the 2025 academic year. Participants completed the Oxford Happiness Questionnaire, the World Health Organization Quality of Life Questionnaire (WHOQOL), and the Allport and Ross Religious Orientation Questionnaire. Data were analyzed using SPSS software through descriptive statistics and regression analysis.

Results: The findings indicated that quality of life and religious orientation significantly predicted students' happiness ($p < 0.01$), with quality of life demonstrating a stronger predictive effect. The physical, psychological, social, and environmental dimensions of quality of life played a significant role in the experience of happiness. Additionally, religious orientation contributed to happiness by providing meaning, a value framework, and social support.

Conclusions: The results suggest that students' happiness is influenced by the interaction of psychological, social, and spiritual resources. Therefore, educational and developmental programs that simultaneously address quality of life and religious orientation may help promote sustainable happiness among students.

Cite this article: Javedani Barouh, G. & Yamini, M. (2026). Predicting students' happiness based on their quality of life and religious orientation. *Iranian Journal of Educational Research*, 5 (2), 1-13.

. DOI: <https://doi.org/10.22034/5.2.1>



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Publisher: University of Hormozgan.

DOI: <https://doi.org/10.22034/5.2.1>

Introduction

Happiness is a psychological concept with various definitions and dimensions. According to Seligman (2002), the feeling of happiness is a positive emotional phenomenon that is essential for human beings and, in addition to giving meaning to life, increases individuals' awareness of their physical and environmental conditions. Argyle et al. (1995) define happiness as a combination of the presence of positive affect, the absence of negative affect, and life satisfaction. As noted, this concept consists of two components: cognitive and affective. The cognitive component refers to an individual's satisfaction with life (one's evaluation of life according to personal standards), while the affective component refers to the balance of pleasure (the balance between positive and negative emotions) and states such as laughter and a sense of humor (Yildirim, 2021).

Schools, as one of the most important educational institutions, play a fundamental role in shaping students' mental health and happiness (Akhlaghi Rasteh Kenari et al., 2022). Research shows that experiencing happiness at school is associated with increased learning, creativity, and academic success (Bend, 2021; Tam, 2021). However, research evidence and recent social developments indicate that the experience of happiness among adolescents has faced several challenges (Noeung & Blanchflower, 2025). Increasing academic pressures, the expansion of virtual spaces, changes in communication patterns, and the emotional sensitivities of adolescence can influence students' life satisfaction and positive emotions (World Happiness Report, 2025). This concern becomes particularly important for female students, who experience more complex emotional and social changes during adolescence. Since a significant portion of students' time is spent in school, paying attention to their emotional well-being, especially during adolescence, is essential (Tam, 2021). Accordingly, examining the factors influencing students' happiness is of particular importance.

Religious orientation has been identified as one of the factors that may enhance happiness. Religion plays a very important role in human life. Allport (1967) defined religious orientation as the perception of religion either as an end in itself or as a means to achieve other goals. In simpler terms, religious orientation refers to an individual's perspective toward religion, which may either be devoted to religion itself or use religion for personal or social benefits. Based on the theory of religious orientation, Allport and Ross (1967) divided religious orientation into two types: intrinsic and extrinsic. In intrinsic orientation, individuals accept religion as a genuine goal in life and regulate their behavior accordingly, whereas in extrinsic orientation religion functions more

instrumentally to obtain social support or personal benefits (Hunsberger & Jackson, 2005; Gundal et al., 2022; Kite et al., 2010).

Most studies have reported a positive relationship between religiosity and happiness (Argyle & Hills, 2000; Francis et al., 2000; Lewis et al., 2005; Shaver et al., 1980; Ellison et al., 1989; McClure & Loden, 1982; Zuckerman et al., 1984; Stavrova et al., 2013). However, some studies have reported non-significant or inconsistent results (Lewis et al., 1997; Lewis et al., 2000). In a review of the literature conducted by Vishkin et al. (2014), religion was identified as an important factor in regulating emotions and experiencing happiness. Similarly, Van Cappellen et al. (2014) showed that positive affect can play a mediating role in the relationship between religion, spirituality, and well-being. Tai et al. (2014), in an international review, concluded that the majority of individuals consider religion an important part of their lives in order to achieve happiness and peace. Nevertheless, it should be noted that most of these studies have been conducted in Western countries and mainly within Christian societies, using different indicators to measure religiosity and happiness. This issue requires caution when generalizing the results to other cultural contexts, including Iranian female students. International reviews suggest that this relationship may be influenced by different cultural and religious contexts (Abdel-Khalek, 2014; Rizvi & Hossain, 2016).

On the other hand, one of the important variables that may explain happiness is quality of life (Cardao-Arango et al., 2021). Quality of life refers to an individual's sense of satisfaction or dissatisfaction with important aspects of life (Carney et al., 2019) and has two essential characteristics: subjectivity and multidimensionality. This means that it relates both to an individual's perception of their level of daily functioning and to physical, emotional, social, and functional dimensions (Lopez-Lopez et al., 2021). In the field of education, attention to students' quality of life is particularly important because their mental health, academic performance, social relationships, and even value orientations are associated with this variable (Niazi et al., 2015; Mirbehbahani et al., 2020; Maroufi & Mohammadi, 2019).

Research findings have also confirmed the positive relationship between quality of life and happiness. Mousavi and Mobasheri (2020) showed that quality of life is significantly related to happiness and psychological well-being. Novianti et al. (2020) reported that optimal psychological and physical functioning leads individuals toward a more satisfying life. Adalia et al. (2020), in

their study on adolescent students, found that individuals with higher quality of life obtain higher scores in happiness. Similarly, Cardao-Arango et al. (2021) identified quality of life as a predictor of happiness. In recent years, broader research has also examined this relationship. Noeung and Blanchflower (2025) reported a decline in the level of happiness among young people in several countries, which was associated with social changes and reduced face-to-face interactions. Moreover, findings from the World Happiness Report (2025) indicate that positive social experiences, including sharing meals and participating in charitable activities, play a significant role in enhancing overall happiness. Panat and Chandra (2025), using macro-analytical models, also showed that quality of life is a function of economic factors, social capital, and environmental sustainability. These findings suggest that quality of life is a multi-level concept that, in interaction with individual and social factors, can influence adolescents' happiness.

Adolescence among girls is accompanied by emotional sensitivities, identity changes, and specific social pressures that may influence their experience of happiness. Adolescent girls often show greater dependence on interpersonal relationships, social acceptance, and academic evaluations, which makes them more vulnerable to emotional fluctuations. Therefore, examining protective factors such as quality of life and religious orientation among female students becomes particularly important. Accordingly, based on the theoretical and empirical foundations discussed above and considering the importance of religious orientation and quality of life in creating and maintaining students' happiness, the main research question of the present study is: what role do quality of life and religious orientation play in predicting students' happiness?

Material and Methods

This study is classified as fundamental research in terms of its nature. In terms of research design and data collection procedure, it falls within the category of descriptive–correlational studies. The statistical population of the present study consisted of all female students in the second grade of high school in District 4 of Mashhad during the 2025 academic year. After identifying the statistical population, and considering the structure of schools and the distribution of students, a multistage cluster sampling method was used to select the sample. In the first stage, three high schools in District 4 were selected as clusters. In the second stage, a complete list of female students from each school was prepared, and the required sample size from each school was

determined based on the Krejcie and Morgan table with a 95% confidence level and a 5% sampling error. Accordingly, the sample size was determined to be 250 students.

To account for possible attrition or non-response, an additional 10 participants were included, resulting in a final sample size of 260 students. A complete list of students in each school was then prepared and each student was assigned a number. Using a simple random sampling method (through an online random number generator), the required number of students was selected from each school so that the sample would adequately represent the population. This method ensured that each member of the statistical population had an equal chance of being selected, thereby increasing the generalizability of the research findings.

Instruments

Oxford Happiness Questionnaire (OHQ): The Oxford Happiness Questionnaire consists of 29 items and was developed in 1989 by Argyle and Lu based on the Beck Depression Inventory (1976). The items are scored on a four-point Likert scale and measure the level of individual happiness. The theoretical basis of this questionnaire is Argyle and Crossland's definition of happiness, which includes three components: the degree of positive affect, the average level of satisfaction over a period of time, and the absence of negative feelings.

The questionnaire was initially developed by reversing the statements of the Beck Depression Inventory with the consultation of Beck, resulting in 21 items. Later, 11 additional items were added, and after further evaluation, the final 29-item Oxford Happiness Questionnaire was produced. The questionnaire contains 29 four-choice statements. The highest possible score on this scale is 87, indicating the highest level of happiness, while the lowest score is 0, indicating dissatisfaction with life and possible depression. The normal score range of this test is between 40 and 42.

Argyle (1989) reported a Cronbach's alpha of 0.90 with a sample of 347 participants, and Furnham and Brewin (1990) obtained an alpha coefficient of 0.87 with 101 participants (cited in Mohammadi Pour, 2012). Francis (1998) reported a Cronbach's alpha of 0.92. In Iran, Keshavarz (2005) reported a reliability coefficient of 0.82 using Cronbach's alpha, while Mohammadi Pour (2012) reported acceptable validity and a reliability coefficient of 0.87 for the questionnaire.

Quality of Life Questionnaire (WHOQOL-BREF): In order to create consistency in research and assess quality of life, the World Health Organization formed a group to develop a

questionnaire. The initial result was a 100-item questionnaire. A few years later, a shorter version was developed for easier application. The WHOQOL-BREF is a 26-item questionnaire that measures an individual's overall quality of life.

This scale was developed in 1996 by a group of experts from the World Health Organization through the modification of the 100-item version. The questionnaire includes four subscales and one overall score. The subscales include: physical health (items 3, 4, 10, 15, 16, 17, 18; score range 7–35), psychological health (items 5, 6, 7, 11, 19, 26; score range 6–30), social relationships (items 20, 21, 22; score range 3–15), and environmental health (items 8, 9, 12, 13, 14, 23, 24, 25; score range 8–40). In addition, an overall quality of life score is calculated from items 1 and 2 (score range 2–10).

Initially, a raw score is calculated for each subscale, which is then converted to a standardized score ranging from 0 to 100 using a specific formula. Higher scores indicate a better quality of life. This scale has been translated into 19 languages and is widely used in different countries to measure individuals' quality of life. The World Health Organization considers this scale a cross-cultural instrument and therefore suitable for use in different cultures (WHO, 1996).

In Iran, Nasiri et al. (2006) translated the scale into Persian and reported its validity and reliability. A Cronbach's alpha coefficient of 0.84 indicates good internal consistency. Factor analysis of the 26 items also confirmed the presence of the four subscales (physical health, psychological health, social relationships, and environmental health), supporting the construct validity of the scale. Furthermore, a study conducted on 1,167 individuals in Tehran assessed the reliability and validity of the questionnaire. Participants were divided into two groups with and without chronic illness. The test–retest reliability coefficients for the subscales were reported as follows: physical health (0.77), psychological health (0.77), social relationships (0.75), and environmental health (0.84) (Jat et al., 2006).

Religious Orientation Questionnaire: The Religious Orientation Scale was developed by Allport and Ross in 1967 to measure intrinsic and extrinsic religious orientations. This questionnaire consists of 21 four-choice items designed to assess individuals' religious orientation. The options “strongly disagree” and “somewhat disagree” represent negative responses, while “somewhat agree” and “strongly agree” represent positive responses.

In this scale, items 1–12 measure extrinsic religious orientation and are scored from strongly disagree to strongly agree. The remaining 9 items (items 13–21), which measure intrinsic religious orientation, are scored in reverse order. The scale is based on a Likert scoring method, and unanswered items receive a score of 3.

Janbozorgi reported the reliability of this scale in a sample of 235 university students in Tehran, with a Cronbach's alpha coefficient of 0.73 (Hajipour, 2011). To examine validity, Shafiei et al. (2012) used principal component analysis with oblimin rotation and obtained a simple two-factor structure, which explained 28.06% and 14.02% of the variance in religious orientation, respectively. In examining the reliability of the scale, Cronbach's alpha coefficients were reported as 0.71 for extrinsic religious orientation and 0.62 for intrinsic religious orientation. Early studies also indicated that the correlation between extrinsic and intrinsic orientations was 0.21 (Askari, 2012; Garavand et al., 2012).

Ethical Considerations

Ethical principles were observed throughout the research process. Participation in the study was voluntary, and the students were informed about the purpose of the research before completing the questionnaires. Informed consent was obtained from participants, and they were assured that their responses would remain confidential and used solely for research purposes. Participants were also informed that they could withdraw from the study at any stage without any consequences. In addition, anonymity of the respondents was preserved and no personal identifying information was collected.

Results

The results of Table 1 indicate that in the best predictive model for happiness (Model 2), the multiple correlation coefficient between the predictor variables and the criterion variable is $R = 0.66$, which represents a moderate relationship between the predictors and happiness.

Table 1. Summary of the Regression Model and Results of Happiness Analysis Based on Quality of Life and Religious Orientation

Model	Predictor Variables	R	R ²	Adjusted R ²	F	P	R ² Change	F Change	Sig. F Change
1	Quality of Life	0.64	0.41	0.41	237.244	0.0001	0.41	237.244	0.0001
2	Quality of Life	0.66	0.43	0.43	129.405	0.0001	0.02	13.025	0.0001
	Extrinsic Religious Orientation								

The coefficient of determination ($R^2 = 0.43$) shows that 43% of the variance in happiness can be explained by the predictor variables included in the model. In other words, quality of life and extrinsic religious orientation together account for a considerable proportion of changes in students' happiness.

The results also indicate that adding the second predictor variable in the final step significantly increased the explained variance in the model (F change = 13.025, $P = 0.0001$). The increase in R^2 (0.02) demonstrates that extrinsic religious orientation contributes additional explanatory power beyond quality of life alone.

Furthermore, the analysis of variance (ANOVA) results confirm that the regression model is statistically significant ($P < 0.01$). This indicates that the linear relationship between the predictor variables and happiness is meaningful, and the explained variance is not due to chance. Therefore, the predictor variables are capable of significantly predicting changes in happiness.

Overall, with more than 99% confidence, the predictor variables contribute to predicting the criterion variable (happiness).

To determine the relative importance of the predictor variables, the regression coefficients should be examined. These coefficients are presented in Table 2.

Table 2. Stepwise Regression Coefficients for Predicting Happiness Based on Quality of Life and Religious Orientation

Model	Predictor Variables	B	Std. Error	Beta	t	P
1	Quality of Life	0.65	0.04	0.64	15.403	0.0001
2	Quality of Life	0.66	0.04	0.65	15.81	0.0001
	Extrinsic Religious Orientation	0.44	0.12	0.14	3.60	0.0001

The regression coefficients presented in Table 2 show that in the best predictive model (Model 2), both quality of life ($\beta = 0.65$) and extrinsic religious orientation ($\beta = 0.14$) significantly predict the criterion variable (happiness).

Among the predictors, quality of life has the strongest predictive power, as indicated by its higher standardized beta coefficient. This suggests that improvements in students' quality of life are strongly associated with higher levels of happiness.

Although the effect size of extrinsic religious orientation is smaller, it still plays a statistically significant role in predicting happiness, indicating that religious orientation also contributes to variations in students' happiness.

Based on these findings, the main research hypothesis is supported, meaning that there is a significant relationship between quality of life, religious orientation, and students' happiness.

Discussion

The results of the present study showed that quality of life and religious orientation significantly predict happiness among female students. Furthermore, quality of life played a stronger predictive role in this relationship, explaining a larger proportion of the variance in happiness. These findings suggest that the physical, psychological, social, and environmental dimensions of quality of life play a key role in the experience of happiness among female students and are of greater importance than religious orientation in this regard.

These findings are consistent with the studies of Mikaeili and Akhtari (2022), Rashidi et al. (2016), Bayat et al. (2024), Lee et al. (2025), Hu et al. (2025), Kim et al. (2023), Fredrickson et al. (2024), and Rossman et al. (2023). The findings are in line with a wide range of domestic studies. For instance, Mikaeili and Akhtari (2022) found that religious orientation and happiness are positively associated with students' mental health. Similarly, the results of Rashidi et al. (2016) emphasized that quality of life and religious orientation can predict university students' happiness. Moreover, Bayat et al. (2024) reported that religious attitudes and quality of life have significant relationships with students' happiness and self-esteem. These findings suggest that quality of life and religious orientation, as important psychological and social resources, play a fundamental role in the experience of happiness.

On the other hand, the results of the present study are also consistent with findings from international research. For example, Lee et al. (2025) found that religious orientation enhances happiness by increasing meaning in life and improving mental health. Hu et al. (2025) demonstrated that quality of life—especially its psychological and social dimensions—is a strong predictor of students' happiness. Kim et al. (2023) also emphasized that religious orientation is directly associated with adolescents' happiness and indirectly related through reducing stress and increasing social support. Furthermore, the findings of Fredrickson et al. (2024) and Rossman et al. (2023) indicate that quality of life and spiritual or religious support are related to higher life satisfaction and the experience of positive emotions. Considering this evidence, it can be concluded that the findings of the present study are consistent not only with domestic research but also with international studies, confirming the role of quality of life and religious orientation in predicting students' happiness.

From a psychological perspective, a higher quality of life reduces academic and social pressures and increases individuals' ability to cope with challenges related to school life and peer relationships. In other words, when a student enjoys good physical and mental health and maintains positive social relationships, their ability to experience positive emotions, life satisfaction, and ultimately happiness increases (Hu et al., 2025). This finding is consistent with the studies of Fredrickson et al. (2024) and Chen et al. (2024), which indicate that quality of life—particularly its psychological and social dimensions—is a strong predictor of individuals' happiness.

Regarding religious orientation, this variable enhances happiness by providing meaning and purpose in life, offering a moral and value framework, and strengthening psychological and social support (Bayat et al., 2024; Kim et al., 2023). For female students, religious orientation not only creates a sense of purpose and meaning in life but also helps them respond to academic pressures and peer relationship challenges with greater calmness and resilience (Lee et al., 2025). In addition, studies by Rossman et al. (2023) and Amiraldin et al. (2021) have shown that higher levels of religiosity and spirituality can have significant positive effects on happiness through reducing stress, increasing social support, and strengthening the sense of meaning in life.

These findings are consistent with positive psychology and mental health theories, which emphasize that happiness results from the effective use of psychological, social, and spiritual resources (Seligman, 2011). From a social perspective, both quality of life and religious orientation

are associated with social empowerment and support from family and school, helping individuals experience more positive interactions within peer groups and the school environment.

Therefore, it can be argued that quality of life and religious orientation interact with each other in shaping happiness. Quality of life provides the tangible and objective resources necessary for experiencing happiness, while religious orientation strengthens these resources at a psychological and meaning-based level and stabilizes their effects on happiness. In other words, quality of life provides the foundation, while religious orientation plays a reinforcing and meaning-enhancing role.

Overall, it can be concluded that the combination of a healthy quality of life and strong religious orientation can create conditions for sustainable happiness and vitality among female students, and it may provide practical approaches for enhancing mental health and life satisfaction.

This study was conducted only among female high school students in District 4 of Mashhad, and therefore the findings may not be generalizable to male students, other educational levels, students from schools in other regions, or populations with different cultural and social characteristics. Finally, it is recommended that educational policymakers consider students' quality of life indicators alongside academic indicators as criteria for evaluating school performance.

Data availability statement

The original contributions presented in the study are included in the article/supplementary material, further inquiries can be directed to the corresponding author.

Ethics statement

The studies involving human participants were reviewed and approved by the ethics committee of Motahhar Kheradgarayan Higher Education Institute. The patients/participants provided their written informed consent to participate in this study.

Author contributions

All authors contributed to the study conception and design, material preparation, data collection, and analysis. All authors contributed to the article and approved the submitted version.

Funding

The authors did (not) receive support from any organization for the submitted work.

Conflict of interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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