



Mystical orientation and psychological health: a study among university students in Turkey

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ABSTRACT

This study examines the association between mystical experience, as captured by the Francis–Louden Mystical Orientation Scale, and psychological health, as captured by the Eysenckian three-dimensional model of personality, among 329 students attending a state university in Turkey. The data reported no significant association between mystical orientation and psychoticism scores, and a small but significant positive association between mystical orientation and neuroticism scores, after controlling for sex differences. This finding suggests that there may be a small inverse association between mystical experience and psychological health among students in Turkey.

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Introduction

Since the pioneering work of William James, mysticism has been a topic of theoretical interest and empirical concern within the psychology of religion (see James, 1982). Attempts to identify the component parts of mysticism and to offer coherent definitions have been made by Stace (1960) and Happold (1963). Psychometric instruments concerned to assess different aspects of mysticism include the classic Hood Mysticism Scale (Hood, 1975), the Mystical Experience Scale developed by Thalbourne (1991), the Mystical Orientation Scale developed by Francis and Louden (2000), the Short Index of Mystical Orientation developed by Francis and Louden (2004), and the most recent Attitudes to Mysticism Scale developed by Edwards and Lewis (2008a).

Throughout the debate on the nature of mysticism, the question arises regarding the extent to which mystical experience is associated with psychopathology, or indeed the opposite, with enhanced psychological health. One convenient way in which the problem can be explored empirically is in connection with the Eysenckian dimensional model of personality. Over five decades and through a developing series of personality measures, including the Maudsley Personality Inventory (Eysenck, 1959), the Eysenck Personality Inventory (Eysenck & Eysenck, 1964), the Eysenck Personality Questionnaire (Eysenck & Eysenck, 1975), the Eysenck Personality Questionnaire Revised (Eysenck, Eysenck, & Barrett, 1985), and the Eysenck Personality Scales (Eysenck & Eysenck, 1991), Eysenck maintained the continuity between normal personality and abnormal personality and defined two of his three

orthogonal dimensions of normal personality by nomenclature borrowed from abnormal psychology. According to Eysenck's conceptualisation, psychological abnormality is continuous with the precursors of abnormality identified within normal personality.

The first of the two dimensions defined by poor psychological health is accessed by the Neuroticism Scale. This continuum moves from emotional stability, through emotional lability, to neurotic disorder. In the test manual, Eysenck and Eysenck (1975) characterise the high scorers on the Neuroticism Scale as anxious, worrying individuals who are moody and frequently depressed, likely to sleep badly and to suffer from psychosomatic disorders. The low scorers on the Neuroticism Scale are characterised by an absence of these traits.

The second of the two dimensions defined by poor psychological health is defined by the Psychoticism Scale. This continuum moves from tendermindedness, through tough-mindedness, to psychotic disorder. In their foundation text on psychoticism, Eysenck and Eysenck (1976) characterise the high scorers on the Psychoticism Scale as not caring for people, lacking in feeling and empathy and altogether insensitive. The low scorers on the Psychoticism Scale are characterised as empathetic, unselfish, altruistic, warm, peaceful and generally pleasant, although possibly socially indecisive individuals.

The third dimension of Eysenck's dimensional model of personality is unrelated to perceptions of psychological health and is defined by the Extraversion Scale. This continuum moves from introversion, through ambiversion, to extraversion. In the test manual, Eysenck and Eysenck (1975) characterise the high scorers on the Extraversion Scale as sociable individuals who like parties, have many friends, need to have people to talk to and prefer meeting people to reading or studying alone. Typical extraverts crave excitement, take chances, act on the spur of the moment, are carefree, easy-going and optimistic. The low scorers on the Extraversion Scale are characterised by the opposite set of traits.

Following a pioneering initiative by Caird (1987) in a paper entitled "Are mystics introverted, neurotic, or psychotic", a series of eight studies have now explored the association between a range of measures of mysticism and various editions of the Eysenckian Scales. First, in Caird's own study, 115 first-year religious studies students completed the Hood Mysticism Scale (Hood, 1975) alongside the Eysenckian Personality Questionnaire (Eysenck & Eysenck, 1975). In the second study by Spanos and Moretti (1988), 124 female university students completed the Hood Mysticism Scale (Hood, 1975) alongside the Neuroticism Scale of the Eysenck Personality Inventory (Eysenck & Eysenck, 1964). In the third study by Francis and Thomas (1996), 222 Anglican clergymen in Wales completed the Short Index of Mystical Orientation (subsequently refined by Francis & Loudon, 2004) alongside the short-form Eysenck Personality Questionnaire Revised (Eysenck et al., 1985). Then in the foundation study developing the Mystical Orientation Scale, by Francis and Loudon (2000), the instrument was completed by 1460 Roman Catholic priests alongside the Eysenck Personality Questionnaire (Eysenck & Eysenck, 1975). In the fifth study by Edwards and Lewis (2008b), 214 adult participants from a range of religious backgrounds completed the Mystical Orientation Scale (Francis & Loudon, 2000) alongside the Psychoticism Scale of the Eysenck Personality Questionnaire Revised (Eysenck et al., 1985) and the Neuroticism Scale of the NEO-PI (Costa & McCrae, 1992). In the sixth study by Francis and Littler (2012), 232 Anglican clergymen in Wales completed the Mystical Orientation Scale (Francis & Loudon, 2000) alongside the short-form Eysenck Personality Questionnaire Revised (Eysenck et al., 1985).

The final two studies reported by Francis and Robbins (2014) and by Francis, Ziebertz, Robbins, and Reindl (2015) both employed a short three-item index of mystical experience

alongside the abbreviated form of the Eysenck Personality Questionnaire Revised (Francis, Brown, & Philipchalk, 1992). In the first of these studies, the participants were young people between the ages of 14 and 18 differentiated on the grounds of self-assigned religious affiliation: 477 Christians, 203 Muslims and 378 unaffiliates. In the second of these studies, the participants were young people between the ages of 15 and 19: 578 Christians, 311 Muslims and 248 unaffiliates.

All eight of these studies failed to find any significant correlations between mysticism and psychological health either positively or negatively. When Caird (1987) first set the challenge for exploring the connection between mysticism and psychological health in the context of Eysenck's dimensional model of personality, he did so as a way of adjudicating between two opposing hypotheses. On the one hand, Caird cited the Group for the Advancement of Psychiatry (1976) as regarding mystical experiences as essentially introvert, with neurotic and psychotic sufferers especially tempted to seek relief in this way. On the other hand, Caird cited Maslow (1964) as identifying mystical experiences with peak experiences, more characteristic of health than of neuroses or psychoses. So far the consensus of empirical enquiry supports neither of these opposing hypotheses. The limitation with the current group of studies, however, concerns the way in which they have been limited either to Christian professionals (Francis & Littler, 2012; Francis & Loudon, 2000; Francis & Thomas, 1996) or to individuals living in Christian or post-Christian cultures including Australia (Caird, 1987), Canada (Spanos & Moretti, 1988), Germany (Francis et al., 2015) and the United Kingdom (Edwards & Lewis, 2008b; Francis & Robbins, 2014).

Research question

Against this background, the aim of the present study was to extend this research tradition within an Islamic culture in Turkey, maintaining continuity with the earlier studies by drawing on a Turkish translation of an Eysenckian measure of personality and by translating the Francis–Louden Mystical Orientation Scale into Turkish.

Method

Sample

A sample of 329 students (112 males and 217 females) attending a state university in Turkey completed the relevant parts of a short questionnaire as part of their coursework, across a range of departments such as philosophy, psychology, sociology and education. They were assured of complete confidentiality and anonymity and given the option not to participate in the project. All students attending the coursework session willingly participated. The majority of the participants were in their late teens, i.e., 17, 18 or 19 (20%) or early twenties, i.e., 20, 21 or 22 (56%) with 18% in their mid-twenties, i.e., 24, 25 or 26, and 6% in their late twenties or early thirties (age range: 17–32 years; mean age, 21.27 years, SD = 2.34).

Measures

The participants completed two measures: mysticism was assessed by the Francis–Louden Mystical Orientation Scale (Francis & Loudon, 2000); and personality was assessed by the

Short-form Eysenck Personality Questionnaire Revised (Eysenck et al., 1985). Both measures were translated into Turkish.

The short form of the Eysenck Personality Questionnaire Revised (Eysenck et al., 1985) is a 48-item instrument composed of four 12-item measures of Extraversion, Neuroticism, Psychoticism and a Lie Scale. Each item is assessed on a two-point scale: yes and no. Example items from the Extraversion Scale include: "Are you a talkative person?" and "Can you easily get some life into a rather dull party?". Example items from the Neuroticism Scale include: "Does your mood often go up and down?" and "Are you a worrier?". Example items from the Psychoticism Scale include: "Do you prefer to go your own way rather than act by the rules?" and "Do you enjoy co-operating with others?". Example items from the Lie Scale include: "Have you ever blamed someone for doing something you knew was really your fault?" and "Have you ever taken advantage of someone?".

The Francis–Louden Mystical Orientation Scale (Francis & Loudon, 2000) is a 21-item measure containing three items to access each of the seven key characteristics of mysticism identified by Happold (1963): ineffability, noesis, transiency, passivity, consciousness of the oneness of everything, sense of timelessness and true ego. Respondents were asked to assess "how important each experience is to your own faith", using a five-point scale anchored by: 1 = low importance, 3 = medium importance and 5 = high importance.

Analysis

The data were analysed by the SPSS statistical package using the frequency, reliability and correlation routines.

Results and discussion

The first step in data analysis was to examine the properties of the Turkish translation of the Francis–Louden Mystical Orientation Scale. These data are presented in Table 1 in terms of the correlations between the individual items and the sum of the other 20 items and the proportion of respondents who endorsed each item as important (4) or very important (5). These data show that only one item correlated lower than .3 with the sum of the other items (experience something I could not put into words). These data also show a good range of discrimination among the 21 items ranging from 16% endorsement (having transient visions of the transcendental) to 72% (sensing meaning in the beauty of nature).

The second step in data analysis was to examine the scale properties of all five instruments employed in the analysis in terms of the alpha coefficient (Cronbach, 1951), the mean scores and standard deviations. The data presented in Table 2 demonstrate that the Francis–Louden Mystical Orientation Scale, the Extraversion Scale and the Neuroticism Scale all recorded good levels of internal consistency reliability. The poorer performance of the Psychoticism Scale (in this case modified slightly by the removal of three items) is consistent with the wider literature on this scale (Francis et al., 1992).

The third step in data analysis was to examine the bivariate correlation coefficients between Mystical Orientation, Extraversion, Neuroticism, Psychoticism, the Lie Scale and sex. Sex is included in the correlation matrix to check for possible contaminating sex differences. The data presented in Table 3 document the expected sex differences in respect of

Table 1. Francis–Louden Mystical Orientation Scale: correlation coefficients for each item with the rest of test and item endorsement.

	<i>r</i>	% High
Ineffability		
Experience something I could not put into words	.26	45
Feeling moved by a power beyond description	.42	51
Being aware of more than I could ever describe	.34	65
Noesis		
Sensing meaning in the beauty of nature	.44	72
Knowing I was surrounded by a presence	.46	68
Hearing an inner voice speak to me	.57	52
Transiency		
Seeing brief glimpses into the heart of things	.44	24
Having transient visions of the transcendental	.53	16
Experiencing passing moments of deep insight	.47	25
Passivity		
Being overwhelmed by a sense of wonder	.45	46
Being in a state of mystery outside my body	.48	25
Being grasped by a power beyond my control	.61	37
Oneness		
Feeling at one with the universe	.48	38
Feeling at one with all living beings	.35	40
Sensing the unity in all things	.46	46
Timelessness		
Losing a sense of time, place and person	.41	20
Being conscious only of timelessness and eternity	.38	32
Sensing the merging of past, present and future	.48	38
True ego		
Being absorbed within a greater being	.61	21
Losing my everyday-self in a greater being	.60	26
Feeling my everyday-self absorbed in the depths of being	.50	21

Notes: *r* = Correlation between individual item and sum of other items.

% High = sum of high importance and quite high importance.

N = 329.

Table 2. Scale properties.

	<i>N</i> items	alpha	Mean	SD
Mystical orientation	21	.88	64.20	13.48
Extraversion	12	.80	7.23	3.13
Neuroticism	12	.76	7.43	2.92
Psychoticism	9	.50	2.25	1.55
Lie Scale	21	.64	5.08	2.49

neuroticism and psychoticism, with females recording higher scores than males on the Neuroticism Scale and with males recording higher scores than females on the Psychoticism Scale. The data also demonstrate higher Lie Scale scores among females than among males, but no significant sex difference in respect of mystical orientation scores or extraversion scores. The findings of key interest for the present study concern the significant positive correlation between mystical orientation scores and neuroticism scores and the independence of mystical orientation scores and psychoticism scores.

The final step in data analysis was to examine the partial correlations between the personality scales and mystical orientation scores controlling for sex differences. The data presented in Table 4 confirm the basic findings from the bivariate correlations, suggesting a small positive correlation between mystical orientation scores and neuroticism scores and the independence of mystical orientation scores and psychoticism scores.

Table 3. Correlation matrix: mystical orientation and personality.

	Sex	Ext	Neu	Psy	Lie
Mystical orientation	.04	.05	.15***	-.10	-.01
Lie Scale	.17**	-.04	-.21***	-.16***	
Psychoticism	-.20***	.02	.13*		
Neuroticism	.15**	-.21***			
Extraversion	.00				

* $p < .05$.** $p < .01$.*** $p < .001$.**Table 4.** Partial correlation matrix: mystical orientation and personality.

	Ext	Neu	Psy	Lie
Mystical orientation	.04	.14**	-.10	-.02
Lie Scale	-.04	-.25***	-.12*	
Psychoticism	.02	.17**		
Neuroticism	-.21***			

* $p < .05$.** $p < .01$.*** $p < .001$.

Conclusion

The present study stands within the research tradition pioneered by Caird (1987) and designed to test two opposing hypotheses regarding the association between mysticism and psychological health, employing the Eysenckian measures of neuroticism and psychoticism as indicators of individual differences in levels of psychological health. One hypothesis proposed a positive association between mysticism and psychological health and the other hypothesis proposed a negative association between mysticism and psychological health. Eight previous studies conducted among Christian professionals (Francis & Littler, 2012; Francis & Loudon, 2000; Francis & Thomas, 1996) or within Christian or post-Christian cultures (Caird, 1987; Edwards & Lewis, 2008b; Francis & Robbins, 2014; Francis et al., 2015; Spanos & Moretti, 1988) had all failed to find evidence to support either of these opposing hypotheses.

The present study set out to extend this body of research into an Islamic cultural context in Turkey among a sample of university students who completed the Eysenck personality measures alongside the Francis–Louden Mystical Orientation Scale. Two main conclusions emerge from the new study. The first conclusion is that the Turkish translation of the Francis–Louden Mystical Orientation Scale recorded good psychometric properties in this context in terms of the alpha coefficient of internal consistency reliability and in terms of a good spread of discrimination among the scale items. Further research, however, is now needed to critique Happold's (1963) conceptualisation of the seven components of mysticism from an Islamic theological perspective and to examine the construct validity of Francis and Loudon's (2000) operationalisation of this conceptualisation within an Islamic context.

The second conclusion is that, as in the previous eight studies, no significant association was found between mystical orientation and scores on the Psychoticism Scale. On the other hand, contrary to the previous eight studies, a small positive significant association was found between mystical orientation and scores on the Neuroticism Scale. This

aberrant finding requires further investigation by means of more studies of this nature being conducted within an Islamic cultural context. Such replication of the present study would clarify whether the personal finding reflects some random effect or whether there are indeed grounds for conceptualising somewhat different associations between mystical orientation and neuroticism within Christian and Islamic cultural contexts. Should this connection between neuroticism scores and mystical orientation within Islamic contexts be supported by replication studies the causal link underlying this connection may require further exploration.

Disclosure statement

No potential conflict of interest was reported by the authors.

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