

*Original Article***Role of Personality Dimension in Predicting of General Health in Overseas Students: Presenting of Regression Model****Fatemeh Bidi****MS in Psychology, Department of Education, Bojnourd, North Khorasan Province, Iran**Corresponding author's e-mail: bidi.fatemeh@gmail.com**ABSTRACT**

Providing and maintaining of health is one of the great goal of mankind that has approach relation with personality. This research has been done to determine the role of five personality traits in predicting of students general health. It was a description and correlation method. The Population was all of students in overseas university in Dubai city that included Shahid Beheshti, Islamic Azad University and Payam-e-Noor University in 2010. Through Cochran's formula selected 78 students with simple random. The used tools contained short form personality traits questionnaire with 60 questions (NEO-FFI-60) and reliability 0.75 and general health questionnaire (GHQ-28) with reliability 0.82. Data analyzed by stepwise procedure regression analysis. According to β coefficients, from predictor variables, neuroticism had the most correlation with general health (-0.33), then extraversion (0.32), openness (0.28) and agreeableness (0.21); but relation between conscientiousness and general health wasn't significant. Generally four personality traits explained 45 percent from general health variance. Personality traits can be good predictors for general health. This research has effective results in university period that is a sensitive age from decision making aspects in their future.

Key words: personality, personality traits, general Health, overseas students

INTRODUCTION

General health is a complex issue, which is affected from several factors. Heredity, nurture, psychological trauma, nutrition, illness, culture and religious beliefs are of these factors [1]. General health has been defined as follows: compromise of a person with his/ her surrounding world [2], capability to have balanced relationship with the others, alteration and modification of personal and social environment, conflicts and personal trends resolution logically [3], inner sense of well-being and ensuring self-efficacy, self-reliance, competitive capacity, intergenerational dependency and self-actualization of the potential of intellectual and emotional abilities [4].

Human and subsequently manpower, has two dimensions: physical and psychological (personality). In holy religion of Islam and many philosophical schools, these two dimensions have a very close relationship with each other, so that none of them could be emerged without the other [5]. This is important to the point that Psychology field has sought to determine, explain, predict and control the psychological phenomena and numerous psychologists have addressed theorizing in this field. One of the topics of interest and discussion in psychology is personality. The origin of the term of personality in European languages is Latina word of "persona", which means the veil or mask that artists wore in the past commensurate with their role in the play [6]. One of the characteristics of this mask was its stability and persistency during the drama [7]. The personality of a person is a combination of the psychological features such as calm, aggressive, ambitious, faithful or social [8]. McShane and Van Glano recognize personality as the relatively persistent patterns of a person and the consistent internal states, which show the behavioral trends of him/her [9]. The ever-increasing psychological problems due to the horrible social consequences and allocation some of the governmental credits have attracted the consideration of authorities to the psychological health. The World Health Organization (WHO) believes that the extent of the behavioral and psychological problems in developing countries is increasing due to the problems such as widespread families' breakdown, changes in people life style and economic problems [10]. Nowadays, many of

To cite this paper Bidi, F. 2012. Role of Personality Dimension in Predicting of General Health in Overseas Students: Presenting of Regression Model. *J. Life Sci. Biomed.* 2(5): 267-273.

journal homepage <http://jlsb.science-line.com/>

researchers who study the psychological processes reject the naïve theories of specificity and susceptibility of organs to justify the physical symptoms. They observe these signs from an interactive point of view, so that in many of their studies, they concentrate on psychological states and biological and social variables [11]. The researchers have recognized various variables such as age and gender in social and biological fields as effective variables in general health [12]. Thereafter, the researchers addressed increasingly the studying and surveying of personality and its dimensions as affecting factor on general health and it was indicated that the persons' personality could be the most important factor on their consistency and health (13, 14). Recently, research on personality and its relationship with health and psychological damages have attracted attention of many researchers. There are also many empirical evidences about the important role of personality traits on creation, reduction or elimination of the signs of psychological disorders [15, 16]. In recent decades, many researchers believe that five factor model of personality, could increase our knowledge about personality and health [17]. So it can be said that each of five basic factors of neuroticism (N), extraversion (E), Openness (O), Agreeableness (A) and conscientiousness (C) are a set of consistent traits, which can help both the person and group in achieving their fundamental needs.

University students are susceptible to lose their mental health and require education and consultation in view of their special conditions such as distance from family, entrance to a larger and stressful environment, economical problems and not having adequate income, large volume of lessons and compressed competitions [18]. Meanwhile, Iranian emigrant students who have special concerns because of the residence out of their motherland in addition to the common problems and characteristics with other students, require more attention and any disorder in the general health of these young people might have irreparable damage. Of course, this disorder depends on several factors and there are numerous researches conducted by researchers. For example, in their studies on students' health and presence of mental disorders in them, Bagheri Yazdi et al. [18] paid most of their attention to factors like economic, academic and familial problems, housing, career, marriage and relations with other students, and they of course did not ignore the role of internal factors such as persons' personality dimensions in this context.

In the context of personality and its relation with health components, the first research work by McCrae and Costa [19] demonstrated that happiness correlates with high levels of extraversion and low levels of neuroticism in people. Following this work, other researches also confirmed this point such as Chen and Joseph [20], Furnham and Cheng [21], Hills and Argyle [22]. Additionally, McCrae and Costa [19] acknowledged that the personality dimensions of agreeableness and conscientiousness may facilitate more positive experiences in social situations and success, respectively; the result of which is increase in happiness feeling. Nevertheless, the flexibility in experience leads the person to experience the positive and negative emotional states. Therefore, no special relation has been determined between happiness and the personal characteristic of flexibility.

Gustavsson et al. [23] believe that some personality traits have important role on the etiology and progression of disorders and a person's personality could cause indirectly to his/ her illness through unhealthy behaviors such as smoking, drugs abuse, insomnia and malnutrition. The results of regression analysis conducted in Bernards et al [24] also show that the personality (especially through extraversion and neuroticism) is one of the most important correlatives of health and there is a positive correlation between flexibility and positive and negative emotions. In addition, it was revealed in Hayez and Joseph [14] that high scores in each of health measures correlate with higher extraversion, lower neuroticism and higher conscientiousness. These findings showed that personality can predict and justify 32-56% of the variance in mental health scores. The longitudinal studies about persons show that they who had higher scores in agreeableness and conscientiousness dimensions, had more mental health than they who had lower scores in those dimensions [19]. In Iran Mani [25] showed in his study on Tabriz University students that there is a significant and positive correlation between personality dimensions of extraversion, agreeableness and conscientiousness with positive emotions and happiness and a negative and significant correlation with negative emotions. There is also a negative and significant correlation between neuroticism with positive emotions and happiness and a positive and significant correlation with negative emotions.

The relationship between personality traits and depression has been studied in different researches and different age groups, which are accompanied by introduction of some patterns [26]. Rafati, Sharif, Ahmadi and Zeyghami [10] showed in a research that there was a negative and significant correlation between general health, depression and neurosis and academic success of nursing students. The relationship between extraversion-introversion and academic success was not significant. In another research in order to screen the mixed depression and stress in students using 6-factor personality test, the results showed that the average of excitability scores of students with the mixed depression and stress disorder was significantly higher than the other students [27].

In a study conducted in Japan on freshmen using hierarchical regression, it was shown that depression has relationship with the low levels of excitement, agreeableness, self-leadership, sociability, openness and self-superiority [28]. The researchers in Finland studied the personality traits and their power in predicting the bipolar syndrome disorder over 370 persons of freshmen. The results of structural equations model test showed that the bipolar disorder is predictable with neuroticism and agreeableness (negative). In a pattern comprising of two dimensions of mania and depression, the results showed that depression has significant relation with

neurosis and introversion; while mania was related with neurosis, extraversion and agreeableness (negative) [29].

Since, in each society, the students are the superior and more capable group [30], so in this research they were applied in studying and surveying in order to make the results more scientific and superior as well. So this study considered the studying and comparison of the relationship between personality and physical - mental health in Iranian students in Dubai, Emirates and is about to study the following issues:

- 1-There is a reverse relationship between the personality dimension of neuroticism and general health;
- 2-There is a direct relationship between extraversion and general health of students;
- 3-There is a direct relationship between openness and general health of students;
- 4-There is a direct relationship between agreeableness and general health of students.
- 5-There is a direct relationship between conscientiousness and general health of students.

MATERIALS AND METHODS

Research method was of descriptive correlative type, because the researchers were to study relationship between five factors of personality and general health. In the other words, when a researcher has two or more classes of information about a group or a class of two or more groups and he wants to study their relationship, he could use the correlation method; because this method is applied to study the extent of changes in one or more factors in effect of the changes in one or more other factors [31]. In order to measure the extent of these relationships, the hierarchical multi-variable regression analysis test was used, which is a method for studying the contribution of one or more independent variables in predicting a dependent variable. The statistical population of this research consisted of all of the abroad students studying in Iranian universities in 2009-2010 academic year in Dubai, which included three university of Shahid Beheshti, Payam-e-Nour and Azad Islami. By simple sampling method, 78 persons of population were selected. Cochran formula was used to estimate the sample volume. According to this formula:

$$n = \frac{Nt^2S^2}{Nd^2 + t^2S^2} = \frac{400 \times (1.96)^2 \times (0.25 \times 0.25)}{400 \times (0.05)^2 + (1.96)^2 \times (0.25 \times 0.25)} = 78$$

Selection of simple stochastic method was due to the fact that all of population members were available and the population span was limited. In order to gather the required information, two tools were used:

a) **Short form personality traits inventory:** (NEO-FFI-60): This contains 60 questions, which is obtained according to factor analysis scores NEO-PI conducted on 1986. Each of these questions is indicative of one of the personality factors of N (neuroticism), E (extraversion), O (openness), A (agreeableness) and C (conscientiousness), respectively. The results of several studies indicate that subscales of NEO-FFI have a good internal correlation. For example, McCrae and Costa [19] reported Cronbach alpha coefficient of 0.68 (for agreeableness) to 0.86 (for neuroticism). NEO-FFI inventory has been standardized by Garoosi Farshi [32]. Mollazadeh et al. [33] reported the retest reliability coefficients of 0.83, 0.78, 0.73, 0.79, 0.85 for neuroticism, extraversion, openness, agreeableness and conscientiousness, respectively during 37 days in 76 Shahed children. Cronbach alpha was also obtained 0.86 for neurosis, 0.83 for extraversion, 0.74 for openness, 0.76 for agreeableness, 0.87 for conscientiousness and the total alpha was 0.83. Concurrent justifiability of this inventory and indicative inventories of the form of Mayers Breaks, Minnesota multi-dimensional, California revised, Guilford- Zucerman temperament survey and traits list and intra-personal trait scale, was reported to have a high relation [33].

b) **General Health Questionnaire (GHQ-28):** This questionnaire is the most well-known screening tool in psychology and was designed by Goldberg and Hiller in 1972. It consisted of 28 questions and constituted of four subscales of physical signs (A), stress and sleep disorder signs (B), social functionality (C) and depression sign (D), each of which included of seven questions. Reliability of this questionnaire has been justified in numerous researches. [For example Hooman [34], $\alpha=0.85$ and Taghavi [2001], $\alpha=0.93$]. In general health questionnaire, scoring is as follows: for never it gets 0, for normal 1, for more than normal 2 and far more than normal 3. Then these scores are summed. A person whom score is higher, has more mental problems and vice versa. In the present study, the whole scores were coded limitedly to ease their interpretation.

RESULTS

Descriptive: descriptive findings of this research include the statistical indices such as average, standard deviation, spectrum of utilized scales and their subscales which are presented in table 1.

The scores of utilized scales were obtained by summing the scores of each scale. Then, the utilized scale was of minimal distance. According to data of table 1, the average of personality subscales were 20.26 ± 5.08 for neuroticism, 26.41 ± 5.48 for extraversion, 25.35 ± 4.33 for openness, 22.91 ± 4.12 for agreeableness and 27.58 ± 4.36 for conscientiousness. In general health variable, the average was 19.96 ± 7.18 .

The correlation matrix of the variables of the research is shown in table 2. According to data in table 2, the greatest correlation coefficient in personality traits was obtained between openness and conscientiousness

($r=0.39$ and $p<0.01$). The general health as benchmark variable had the highest correlation with neuroticism ($r= - 0.46$ and $p<0.01$). It had the least correlation with conscientiousness ($r= - 0.34$).

Inferential: the multi-dimensional regression analysis based on progressive procedure was used to test assumptions. Before performing regression, it was necessary to survey its assumptions, which are as following: Independency: given data gathering method and type of sampling, it can be said that this hypothesis is established. Normality, Distribution homogeneity and Linearity.

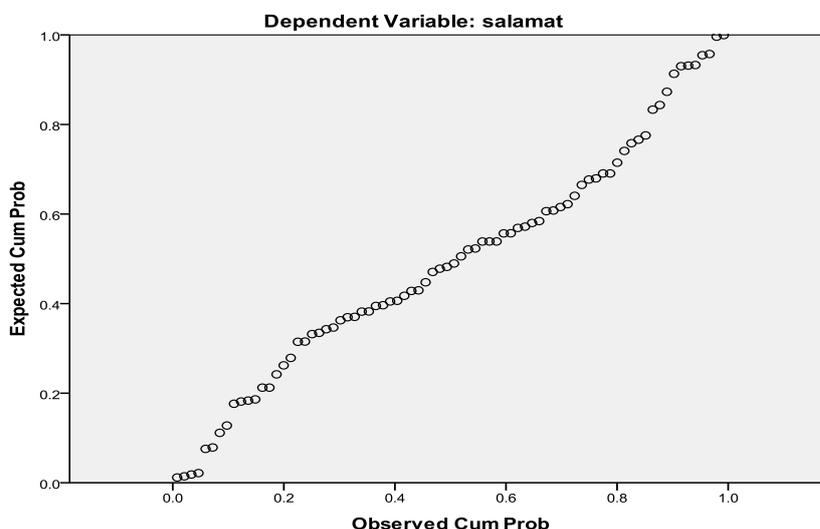
Table 1. Mean and standard deviation of study scales

Variable	Subscales	M	SD	Min.	Max.
Personality Dimensions	Neuroticism	20.26	5.08	12	32
	Extraversion	26.41	5.48	12	36
	Openness	25.35	4.33	13	35
	Agreeableness	22.91	4.12	15	35
	Conscientiousness	27.58	4.36	18	36
General Health		19.96	7.18	10	42

Table 2. Correlation matrix of the variables of the research

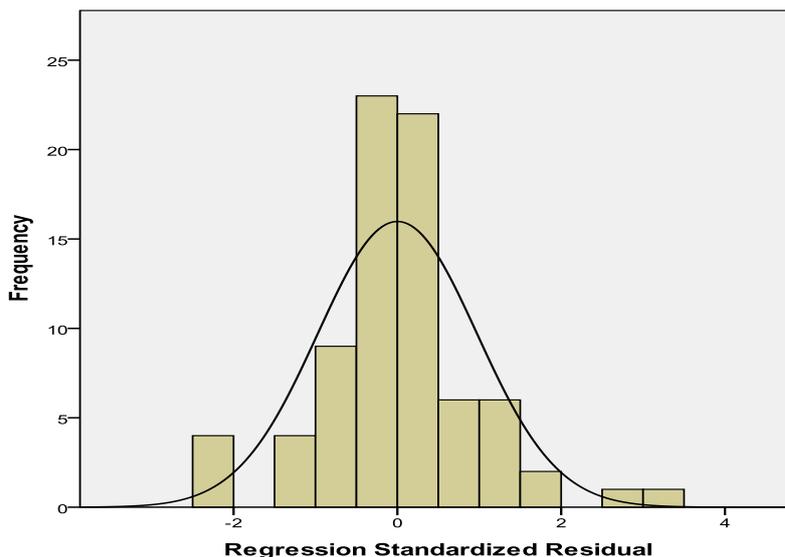
Variables	1	2	3	4	5	6
Neuroticism	1					
Extraversion	-0.09	1				
Openness	*-0.23	-0.06	1			
Agreeableness	-0.17	0.19	0.08	1		
Conscientiousness	*-0.22	0.09	**0.39	0.14	1	
General Health	**0.46	**0.37	**0.35	**0.36	**0.34	1

Diagram 1. Scattering predicted and residuals scores



The assumptions of distribution homogeneity and linearity are evaluable through the predicted scores distribution diagram of Y (\hat{Y}) on horizontal axis and residuals ($Y - \hat{Y}$) on vertical axis. For this purpose, diagram 1 has been drawn. According to the type of point's dispersion on diagram1, it can be said that linearity and homogeneity assumptions are established, because many of the points for each level of the predicted score, are close to the center of diagram and regression line.

Diagram 2. Establish of normality assumption



In order to survey the normality of scores distribution, the visual method was used, which was drawn in diagram 2.

It can be said according to the form of scores distribution that normality assumption has been met. Therefore the regression analysis assumptions are established. The results of regression analysis were shown in tables 3, 4 and 5.

The results of table 3 show that $F=14.72$ is significant in level of $p<0.001$. In the other words, the regression coefficients of predictive

variables show that the personality traits, suggest the variance of general health significantly.

Table 3. Analysis of variance of personality dimensions

Model	SS	DF	MS	F value	P
Regression	1770.14	4	442.53	14.72	0.001
Residuals	2194.75	73	30.06		
Total	3964.88	77			

Table 4. Summary of regression model of personality variables on the general health based on progressive method

Models	R	R ²	Adjusted R ²	SE	Changed statistics		
					R ² changes	F changes	Sig. of changes
A	0.46	0.21	0.20	6.41	0.21	20.56	0.001
B	0.57	0.32	0.30	5.98	0.11	12.16	0.001
C	0.63	0.40	0.38	5.65	0.08	10.06	0.002
D	0.67	0.45	0.42	5.48	0.05	5.62	0.02

a. Neuroticism, b. Neuroticism and Extraversion, c. Neuroticism, Extraversion and Openness, d. Neuroticism, Extraversion, Openness and Agreeableness, Criteria variable: General Health

According to data in table 4, F changes after introduction of neuroticism, extraversion, openness and agreeableness were obtained significant in the level of $p < 0.05$, but it was not significant for conscientiousness variable. In the other words, the aforesaid variables have significant effect on general health and totally suggest 45% of variance of general health.

Table 5. Standard coefficients of personality traits and t values of model

Model index	B	Beta	T value	P	Correlations		
					Zero order	Partial	Semi partial
Constant	33.17	-	11.05	0.001	-	-	-
Neuroticism	-0.65	-0.46	-4.53	0.001	-0.46	-0.46	-0.46
Constant	20.81	-	4.61	0.001	-	-	-
Neuroticism	-0.61	-0.43	-4.52	0.001	-0.46	-0.46	-0.43
Extraversion	0.43	0.33	3.49	0.001	0.37	0.37	0.33
Constant	5.63	-	0.88	0.38	-	-	-
Neuroticism	-0.51	-0.36	-3.91	0.001	-0.46	-0.41	-0.35
Extraversion	0.47	0.36	3.96	0.001	0.37	0.42	0.35
Openness	0.49	0.92	3.17	0.002	0.35	0.35	0.28
Constant	-1.83	-	-0.26	0.79	-	-	-
Neuroticism	-0.47	-0.33	-3.66	0.001	-0.46	-0.39	-0.32
Extraversion	0.42	0.32	3.56	0.001	0.37	0.38	0.31
Openness	0.46	0.28	3.12	0.003	0.35	0.34	0.27
Agreeableness	0.37	0.21	2.37	0.02	0.35	0.27	0.21

In table 5, the standard coefficients of personality variables were shown given t statistic. The personality trait of neuroticism with the value of $t = -3.66$ and $p = 0.001$ has a positive and significant relation with general health. Thus the assumption about relation between them is justified. The assumption of relation between extraversion and public health was justified with the value of $t = 3.56$ and $p = 0.01$. In openness variable, the value of $t = 3.12$ and $p = 0.001$ suggests that this variable has a negative and significant relation. The relation of agreeableness and general health was obtained significant by the value of $t = 2.37$ and $P = 0.02$. Among the personality variables, there is no significant relation between general health and conscientiousness. The calculated tolerance coefficient suggests the low level of overlap of the predictive variables, which is due to the appropriateness of the selected variables. The more this coefficient is near to 1, the better it would be. The obtained distinctive correlation indicates that among the predictive variables, neuroticism has the highest correlation with general health (-0.39) and the variables of extraversion (0.38), openness (0.34) and agreeableness (0.27) are in next ranks and all of these correlations are significant. Regression equation according to table is as follows:

$$-0.33_{\text{Neuroticism}} + 0.32_{\text{Extraversion}} + 0.37_{\text{Openness}} + 0.21_{\text{Agreeableness}} \text{General Health} = -1.83$$

DISCUSSION

The present study was done with the purpose of determining the relationship between five-fold personality traits and general health in Iranian students in Emirates in academic year of 2010-2011. The existing relations were tested by regression analysis method and step by step procedure. The results showed that the relationship between neuroticism and general health is negative and significant. This result justifies the results of Bernard et

al. [24], Heiz and Joseph [14], Mani [25], Raf'atia and Kitamura [28] and et al. [10], Matsodaria and Kitamura [28] and Quilty et al. [29]. It can be said that the neuroticism includes psychological damages such as stress, violence, depression, interpersonal problems and so on. Therefore, these factors are of the underlying and forming factors of psychological illnesses. By elevating neuroticism one could interfere that the general health would be reduced, which the value of obtained coefficient in this research was negative and justifies this assertion.

The assumption about the relationship between extraversion and general health was justified as well. This result was in agreement with the results of Bernard et al, Heize and Joseph and Mani [25]. Some researches such as Raf'ati et al [10] had not achieved to any significant relation between these two variables. In other words, by increment or reduction of extraversion, general health would reduce or increase and vice versa. According to this result, it can be inferred that extroverts try to maintain a strong and positive relation with physical environment because of their strong and positive social relationships. In addition they are trying to maintain the interpersonal relations by passing from interpersonal conflicts and this will lead to psychological and social health improvement directly and physical health indirectly.

The results showed that the level of openness has a positive and significant relation with general health. Chen and Joseph [20], Hills and Argyle [22], Matsodaria and Kitamura [28] and Garoosi Farshi [32] have achieved to such this relation. In the other words, by increment of openness level, the general health level would increase and vice versa. In explaining of this relationship one can infer that the students having openness characteristic, given the internal and external curiosity, empirical richness and aesthetic imaginaries, try to achieve the independence with ideal conditions and if they are confronting with any stress during their life, they can manage themselves and maintain their psychological health. Therefore, openness has a positive and significant relation with general health.

The assumption of the relation between agreeableness and general health was obtained significant too. This result is in good agreement with the results of Matsodaria and Kitamura [28] and Quilty et al [29]. This assumption claims that the more the level of agreeableness, the more public health and vice versa. The persons with agreeableness traits such as altruism, concomitance, tendency to help the others, sympathy and compassion, when confront with conflicts and contradicts in their interpersonal relations, try to solve the problem and resolve the conflicts with their intellectual assets (the components of this trait). Thus it can be said that the more the level of agreeableness, the more general health.

Among the personality variables, the assumption of relation between conscientiousness and general health was not justified. Nevertheless, McCrae and Costa [19], Heiz and Joseph [14] and Mani [25] have reported this relation significant, while in Palahang et al [27] and Raf'ati et al [10] it is not significant. The reason for this absence of significant relation perhaps relates to the different research population, cultural differences and research tools.

Recommendations

It is recommended to researchers that they address evaluation of this relation in casual patterns form and involve some other variables such as academic performance, thought styles and attitudinal factors in their researches. In addition, the above relation can be applied in the other groups such as school students, employees, emigrants and managers and then their results can be compared with each other.

Given the role of personality trait in predicting general health, these tools and researches might be utilized in prevention and planning to enhance the society's health and especially students. It is possible to educate personal and social behavior regarding insight and awareness of students and utilize their personality traits in managing the existing and future conflicts.

REFERENCES

1. Mar'ashi, S. A. 2008. *Mental health and religion*. Tehran, Scientific and Cultural editions.
2. Milani Far, B. 2005. *Psychological health*. Tehran, Ghods editions.
3. World Health Organization. 2001. *Mental health: New understanding, new hope*. The World Health Report.
4. Abbaszadeh et al. 2003. *The global health report of 2011, mental health, a new understanding, a new hope*. Tehran, Great Ibn Sina Cultural institute.
5. Ibrahim Zadeh, I. 2010. *The philosophy of nurture*, Tehran, Payam-e-Nour University edition.
6. Parsa, M. 2004. *The new context in Psychology*. Tehran, Be'asat editions.
7. Ganji, H. 2005. *Labor psychology*. Tehran, Savalan edition.
8. Robbins, S. P. 2003. *Essentials of Organizational Behavior (7th Ed)*. San Diego State University: Prentice Hall.
9. Wilcoxon, L., & Chatham, R. 2006. *Testing the Accuracy of the Stereotype: Profiling IT Managers Personality and Behavioral Characteristics*; *Journal of Information and Management*, vol.43, pp: 697-705.
10. Raf'ati, F., Sharif, F. Ahmadi, J. & Zeighami, B. 2005. *The study on relationship between general health, depression and personality characteristics of student and their success*, *Medicine and Refinement magazine*, 14th yaer, No.3, pp 25-31.
11. Sarason, B. and Sarason, E. 2007. *Morbid Psychology based on DSMIII-R translated by : Asghati Moghaddam, Mohammad Ali, Dehghani, Mohsen and Najjariyan, Bahman (2007)*, Tehran, Roshd.

12. Friedman, H. S. 2000. Long-term relation of personality and health: Dynamisms, mechanisms and tropisms. *Journal of Personality*, 68, pp.: 1089-1108.
13. Myers, D. G., Diener, E. 1995. Who is happy? *Journal of Psychological Science*, 6, pp.: 10-19.
14. Hayes, N. & Joseph, S. 2003. Big 5 correlate of three measures of subjective well-being. *Personality and Individual Differences*, 18, pp.: 663-668.
15. Widiger, T. A. & Seidlits, L. 2002. Personality, psychopathology, and aging. *Research in personality*, 36, pp.: 335-362.
16. Widiger, T. A. 2005. Five factor model of personality disorder: Integrating science and practice. *Journal of Research in Personality*, 39, pp.: 67-83
17. Korotkov, D. & Hanna, E. 2004. The five factor model of personality: strengths and limitations in predicting Health status, sick-role and illness behavior. *Personality and Individual Differences*, 36, pp.: 187-199.
18. Bagheri Yazdi, S. A. Bolhari, J. & Peyrovi, H. 2005. The study of psychological health of students, 2004-2005, Tehran University, quarterly of thought and behavior, course 4, 39, pp. 30-42.
19. McCrae, R. R. & Costa, P. T. 1991. Adding liable underbid: The full five-factor model and well-being. *Personality and Social Psychology Bulletin*, 17, pp.: 227-232.
20. Chan, R. & Joseph, S. 2000. Dimensions of personality, domains of aspiration and subjective well-being. *Personality and Individual Differences*, 28, pp.: 347-354.
21. Furnham, A. & Cheng, H. 1997. Personality and happiness. *Psychological Reports*, 80, pp.: 761 -762.
22. Hills, P. & Argyle, M. 2001. Emotional stability as major dimension of happiness. *Personality and Individual Differences*, 31, pp.: 1357-1364.
23. Gustafson, J. P.; Jonson, G. E.; Linder, J. & Weinryb, M. R. 2003. The HP5 inventory: definition and assessment of five health-relevant personality traits from a five factor model perspective. *Personality and Individual Differences*, 35, pp.: 69-89.
24. Bernardo, M.; Gonzalez, G. J. L.; Garrosa, M. 2005. Personality and subjective well-being: big five correlates and demographic variables. *Personality and Individual Differences*, 38, pp.: 1561-1569.
25. Mani, A. 2004. The study of relationship between interest categories and personality characteristics in Tabriz University Students, MS thesis, Tabriz University.
26. Minelli, A., Pedrini L., Magni, L. S., & Rotondo, A. 2009. Personality traits in an Italian sample: Relationship with anxiety and depression. *Clinical Practice & Epidemiology in Mental Health*, 5, pp.: 26-30.
27. Palahang, H., Nikfarjam, M. & Salahian, A. 2011. Evaluation of the applicability of excitement factor of six factor test of personality in screening mixed depression and stress disorder in students, Shahrkord Medical Sciences University, course 13, No.2, pp. 7-12.
28. Matsudaira, T. & Kitamura, T. 2006. Personality traits as risk factors of depression and anxiety among Japanese students. *Journal of Clinical Psychology*, 62(1), pp.: 97-109.
29. Quilty, L. C., Sellbom, M. Tackett & Bagby, R. M. 2009. Personality trait predictors of bipolar disorder symptoms, *Psychiatry Research* 169, pp.: 159-163.
30. Shamloo, S. 2003. *Psychological health*. 16th edition, Tehran, Roshd.
31. Naderi, E., Seyf-e-Naraghi, M. 2009. *Research methods and how to evaluate them in Humanities*. Tehran, Arasbaran.
32. Garoosi Farshi, M. Soofiyan, H. 1998. The study of relationship between personality dimensions and general health in Tabriz University students. *Educational and psychological studies*, course 9, No.2, pp. 47-63.
33. Mollazadeh, J. Mansoor, M. Ejei, J. & Kiamanesh, A. 2002). The matrimony confrontation and consistency styles in Shahed children. *Psychology magazine*, 6th year, No.3, pp. 255-275.
34. Hooman, A. 1998. *Standardization of general health inventory*, Tehran, Tehran University edition.