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Predicting Social and Psychological Adjustment from the Importance and Restrictiveness of Religion in Late Adolescence

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**PREDICTING SOCIAL AND PSYCHOLOGICAL
ADJUSTMENT FROM THE IMPORTANCE
AND RESTRICTIVENESS OF RELIGION IN
LATE ADOLESCENCE**

By

Lisa Diane Lucas

Thesis submitted in partial fulfillment
of the requirements for the degree

of

DEPARTMENT HONORS

in

Psychology

Approved:

Thesis/project advisor

Department Honors Advisor

Director of Honors Program

UTAH STATE UNIVERSITY
Logan, UT

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In working with Renee Galliher, I had the opportunity to administer a questionnaire to 118 college students. This questionnaire included the Personal and Relationships Profile (Strauss & Mouradian, 1999), as well as questions assessing religious attitudes and activities. From these questionnaires, a data set was compiled and I presented this research at the recent conference of the Society for Research on Child Development.

The Conference

I arrived in Tampa, checked in, and met my roommates. The three of them were all attending the University of Tennessee. Karen and Melinda are graduate students, and Kate, like myself, is graduating with her bachelor's in May. They are involved with research on adolescent dating relationships as well, so we had many interesting and thought-provoking conversations. We had dinner that night with the rest of their research team, and I enjoyed meeting them as well. Peter, a graduate student, is also interested in religiosity and behaviors associated with beliefs. We had several good conversations as well. I enjoyed speaking with them, as their interests are similar to mine.

Thursday morning I attended a pre-conference meeting for those interested in religion and spiritual development. The coordinator of the event, Chris Boyatzis, had invited me to attend because my research is within their field of interest. There were several presentations of research followed by a question and answer period. We enjoyed breakfast while the presenters spoke.

At noon, official registration for the conference began. I picked up my nametag, program, and bag. That afternoon, Friday, and Saturday were spent attending various paper symposiums and poster presentations. It is all very interesting, and I enjoyed hearing about other's research. There was such a wide variety of research conducted!

Sunday morning, I set up my poster presentation and answered a variety of questions and comments to those who stopped by. There were more people than I had anticipated, however it was interesting and fun to speak with people concerning my research. I passed out all of my handouts, and even had people's email addresses given to me so that I can email them my poster presentation and handout. I enjoyed presenting; it was a bit nerve-racking at first, but I relaxed and enjoyed myself. I returned home late Monday night to emails from more people who were interested in my research. I am very flattered that professionals within the field are interested in my research!

In conjunction with this research, I am aiding Renee with her ongoing research.

Significance and Goals

Domestic violence is a well-recognized problem in society today. However, domestic violence is not a new plague. For years, many researchers have delved

into various possibilities of causal factors of the prevalence of abuse in relationships. Renee V. Galliher is one of many who recognize that an important first step in the development of intervention and prevention strategies of abuse is the study of factors related to abuse in early romantic relationships. Her current research, which involves the romantic relationships of adolescents, investigates the prevalence of dating aggression among a rural sample of adolescent couples. This research is important in that it will allow us to better understand and recognize the various risk and protective factors of dating aggression. The overall goal of this project is to gain a better understanding of the personal, contextual, relational, and interactional processes which contribute to dating aggression among rural adolescent couples.

Methods

Galliher's research incorporates a unique methodology of an observational technique. This conceptualizes the couple as the unit of analysis and examines the association between couples' communication and risk for dating aggression. The couples' perceptions of their videotaped interaction will predict aggression in their relationship. It is a correlational design incorporating both observational and self-report data which will examine the association between individual, contextual, and relational variables and dating aggression. The mediator variable will be the couples' communication processes.

Subjects

The sample will include approximately 100 adolescent heterosexual couples from the surrounding rural areas. Data is being collected from Cache Valley, Gunnison and surrounding rural areas in southern Utah, and Pace, Arizona. Couples are eligible if they have been dating exclusively for at least one month and are between the ages of 14 and 18. Parental consent is required for all participants under the age of 18. Each couple is paid \$60, or \$30 each for their participation in the study.

Procedure

The couples will come in at a designated time to participate in the study. They will first engage in three videotaped conversations. They then separate and one goes to a different room to fill out the questionnaire. The other remains in the videotaping room and completes the video-recall portion of the study. Both of these take approximately one hour. Upon completion, they switch places. Their time commitment is approximately three hours, after which they are given the \$60 promised and asked if they would like to participate in future research projects.

Questionnaire Session

The questionnaire portion of the study is comprised of various measures and scales authored by others which we feel explores the desired variables associated with dating aggression. These variables include, but are not limited to, personal, ecological, and relational characteristics. The first portion of the questionnaire covers demographic information, including race, sex, age, education, and religion. The questionnaire then presents the following measures or scales: Conflict Tactic Scale - Parent Version, Quality of Relationships Inventory, Attitudes Toward Women, Silencing the Self, Rosenberg Self-Esteem Scale, Youth Self Report, Romantic Experience: Male or Female Version, Inventory of Parent, Peer, and Partner Attachment, Family Inventory of Life Events, Attitudes about Aggression in Dating Situations Scale, Justification of Jealous and Coercive Tactics Scale, and Conflict Strategies. Other questions have been inserted where appropriate to further explore the areas covered by each scale. The questionnaire was completed in the spring of 2002, and since then has undergone many revisions, most taking place this fall.

Interaction Session

The videotaped portion of the study occurs as the couple first comes in for their appointment. They are instructed to choose an issue from the provided checklist which they would like to discuss. Each partner selects two issues independent of the other. They are then shown into the camera room, where they are instructed to hold three conversations: first, to plan a party. This is to help them feel comfortable in front of the camera. Then they will discuss the selected issues. The computer program switches automatically between the boy and the girl, so that on even couples the boy's issue is discussed first, and on odd couples, the girl's issue is discussed. After all three of the eight-minute conversations, they are separated. Depending on their ID number, one of them stays in the camera room, and the other goes to fill out the questionnaire.

Video-Recall Session

The partner who remains in the camera room is given a short scale to complete, the Global Assessment Scale (GAS). This measures various aspects such as honesty, comfort, and engagement from the previous conversations. Upon completion of the GAS, the partner views each conversation in 20-second intervals. They are asked to rate their own behavior and that of their partner's on a 5-point Likert scale that determines the extent to which their partner is being supportive, conflictual, humorous, sarcastic, giving in, or trying to persuade the other. This is done for all three conversations.

Analysis

Data is currently in the process of being collected, so no analyses have yet been made. This will most likely happen in the spring of 2003, after data collection has

been completed. A two by three analyses of variance will be calculated, as well as many other correlational measures.

My Role

As a member of Renee Galliher's research team, I had the opportunity to gain from hands-on experience. This began with the training of team members on the choreography. The choreography consists of very detailed instructions of what to do in all of our interactions with the subjects. The first of these is recruiting.

Recruiting consists of randomly selecting participants from the provided list of names, calling the adolescents, sending them packets of information, following up to arrange an appointment, and reminding them of their appointments. This step has proven to be fun; the majority of people I have come in contact with are very interested and friendly. However, there is an occasional parent who is extremely suspicious, bordering on rude. These encounters have led me to further understand the study because I explain the study to them and describe the benefits the study will bring to the community as well as the world of research.

Team members are present at each appointment with an adolescent couple. It is our duty to wait for the couple downstairs to ensure they don't get lost. This is especially important on Saturdays because the door could be locked, so one of us needs to be downstairs waiting. The couple is escorted upstairs, where they sit down and one of us introduces the study. This is all choreographed out, so it runs smoothly. The couples are asked for their signed parent consent forms, and upon receiving them, we give the couple the issues checklist. They look over the checklist and independent of each other, choose two issues they would like to discuss in the videotaped portion of the study. Once they have chosen their issues and the study has been fully introduced, we escort them to the camera room.

Once in the camera room, we introduce the next part of the study. They are to have three eight minute conversations. The first conversation they have is to plan a party. The next two are the issues that they have chosen. The computer automatically selects whose issue is to be discussed first, the boy's or the girl's. Once we have ensured that they have no questions and that everything is clear, we leave the room. The couple then has their conversations while we recruit in the other room.

Upon completion of the three conversations, we split up the couple. One partner goes with me. I take them to another room, where a laptop with the questionnaire has been set up. I introduce the questionnaire, answer any questions, and leave. Sometimes I am in charge of the other partner. In that case, I take them back to the camera room, and ask them to fill out a Global Assessment Scale. In a few minutes I check back on that partner, and if they have completed the scale, I take

it from them and sit them at the laptop in the camera room. I introduce the video-recall section, answer any questions and ensure that the instructions are clear, and leave. Both of these take about an hour, so while we wait, we do more recruiting. When both partners have finished with their part of the study, we switch them. The one taking the questionnaire is introduced to the video-recall session, and the one taking the video-recall portion is introduced to the questionnaire. This switch generally runs smoothly as well.

Again, there is an hour wait, in which we continue recruiting more participants. When both partners are finished, they come back to the original room and we ask them if they would like to participate in future studies. If so, they fill out a sheet. After a small thank-you conversation, we pay them each \$30, have them sign a receipt, and ensure they don't get lost on their way out.

This process is choreographed in such a way that it all runs smoothly, despite a few glitches here and there which have since been ironed out. We have done this about 15 times, with different couples, so there still remains a large number of couples still to recruit.

Application

I have learned so much from getting this hands-on experience of administering the questionnaire and helping out with the choreography. This opportunity has taught me how important consistency is - everything we do needs to be consistent from one couple to the next to control for any experimenter bias that could affect the way an adolescent responds to the questions posed either in the questionnaire or in the video-recall session. It could also affect the way a couple interacts, which could bias the responses as well. I have learned the importance of being professional and of ensuring a smooth running operation. If one is not professional, and the study is not at all coordinated, then the couple might not take it seriously, and halfheartedly respond. This too would bias the results.

There are many other psychometric properties that need to be controlled for or measured to ensure a valid study. These are all taken into account. Although I have studied about them, I never really thought about what effect they really have on studies. Working hands-on in a project like this has reinforced the knowledge of these properties, and that they really do play a part in research.

There are many areas in which I can apply this experience. I will better understand the studies presented in class. I will use this as I design my own studies, and use this research for further studies. Further studies would not only replicate our findings but further explore the relations between dating aggression and various factors. This in turn will lead to an increase in a search for solutions that are effective. These solutions will lead to a decrease in dating aggression, which hopefully will lead to a decrease in domestic violence.

I have had the opportunity to apply these experiences as I presented my own research at SRCD. I am including the pamphlet, which I distributed as part of my presentation as well as the power point slides that made up my poster.

Predicting Social and Psychological Adjustment from the Importance and Restrictiveness of
Religion in Late Adolescence

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Poster presented at the Biennial Meeting of the Society for Research in Child Development,
Tampa, FL (2003)

Predicting Social and Psychological Adjustment from the Importance and Restrictiveness of
Religion in Late Adolescence

Research has consistently demonstrated that religiosity is an important predictor of well-being. Frequent religious service attendance and religious investment have been associated with good health behaviors, higher levels of social involvement, and less criminal involvement. In order to further the understanding of the association between religiosity and adjustment, the current study examined the relationships between various aspects of religious attitudes and behaviors and several measures of social and psychological well-being. Based on previous research, it was hypothesized that frequency of attendance at religious services and greater subjective investment in faith would be associated with better outcomes. However, religious involvement that was perceived as restrictive or coerced was predicted to be associated with poorer outcomes.

Participants were 118 undergraduate college students (25.4% male, 74.6% female), ranging in age from 18 to 21. Students were predominantly white (95%), with limited representation from other racial and ethnic groups (2% African American; 3% Asian). Most participants were members of the LDS faith (84%), with some representation from other religions (4% Catholic, 1% Baptist, 4% other, 7% none).

Participants were administered the Personal and Relationships Profile (Strauss & Mouradian, 1999), as well as questions concerning religious attitudes and activities. Items assessing religious attitudes included: "How important is religion to you?" (1= Very Important, 4 = Not Important at all); "In the past twelve months, how often did you attend religious services?" (1 = Never, 5= More than once per week); and "My faith sometimes restricts my actions." (1 = Strongly Disagree, 4 = Strongly Agree)

The following scales were selected from the Personal and Relationships Profile outcome variables; items were answered on a 4 point Likert scale (1 = strongly disagree; 4 =

strongly agree) and were summed to create scale scores. Criminal history consisted of 8 items assessing the extent to which the respondent has committed criminal acts (mean = 10.75, SD = 3.63). Depressive symptoms were measured by 8 items assessing disturbances in mood, dysphoric cognitions, and somatic disturbances (mean = 14.87, SD = 4.95). The 10-item Social Integration scale determined an individual's attachment to society and social norms (mean = 32.78, SD = 4.39). Alcohol abuse was measured by 4 items assessing intensity and frequency of alcohol use (mean = 5.14, SD = 2.56). The Stressful Conditions scale consisted of 9 items measuring stresses or hassles experienced in daily living (mean = 18.10, SD = 3.48).

The results of multiple regression analyses predicting each of the five measures of well-being from religious attitudes are presented in Table 1. For each regression, the importance of religion, frequency of attendance at church services, and the degree of restrictiveness of religion were all entered as independent variables. Importance of Religion was a significant predictor for each of the five measures of well-being, with higher scores on Importance associated with better outcomes for each. Restrictiveness of Religion was associated with both Social Integration and Stressful Conditions. Experiencing religion as more restrictive was associated with poorer outcomes on those two variables. Finally, Frequency of Attendance was positively associated with Social Integration.

These results are consistent with previous research that has demonstrated a protective function of religious involvement. However, these findings also suggest a negative impact of religious involvement that is experienced as restrictive or coercive, particularly for aspects of well-being associated with social and relational functioning. Cultural considerations unique to this predominantly LDS sample may have impacted patterns of association, thus replication with samples from other religious groups is necessary.

Table 1

Regression Analyses Predicting Well-being from Religious Attitudes and Behaviors

Dependent variable	Significant predictor	Adj. R ²	F	p	beta	t	p
Social Integration		.36	22.12	<.001			
	Importance of Religion				.51	5.17	<.001
	Frequency of Attendance				.20	2.09	.039
	Restrictiveness of Religion				-.17	-2.09	.039
Stressful Conditions		.15	7.36	<.001			
	Importance of Religion				-.50	-4.33	<.001
	Restrictiveness of Religion				.25	2.58	.011
Depression		.09	4.67	.004			
	Importance of Religion				-.37	-3.19	.002
Criminal History		.05	3.09	.030			
	Importance of Religion				-.31	-2.54	.013
Alcohol Abuse		.24	12.19	<.001			
	Importance of Religion				-.39	-3.67	<.001

Predicting Social and Psychological
Adjustment from the Importance
and Restrictiveness of Religion in
Late Adolescence

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Utah State University

Abstract

Frequent religious service attendance and religious investment have been associated with more adaptive health-related behaviors, higher levels of social involvement, and less criminal involvement. The current study examined the relationships between various aspects of religious attitudes and behaviors and social and psychological well-being. Religiosity was highly associated with all outcomes, with participants' subjective sense of the importance of religion emerging as the most consistent and strongest predictor of adaptive functioning. Participants' experience of religion as restrictive and limiting, however, was associated with lower levels of integration of societal norms and values and higher ratings of daily stress and hassles. These findings are consistent with previous research, which has characterized religiosity as a protective factor. However, they suggest that religious involvement that is experienced as coerced or restrictive may mitigate this association, particularly for aspects of well-being associated with social and relational functioning. Cultural considerations unique to this predominantly LDS sample may have impacted patterns of association, thus replication with samples from other religious groups is necessary.

Theoretical and Empirical Background

- Religious involvement is typically viewed as a protective factor
 - Associated with:
 - Better health behaviors
 - Higher levels of social involvement
 - Less criminal involvement
- Extrinsic vs. Intrinsic motivation
 - Religious involvement that is experienced as “self-concordant” is expected to be more fulfilling and more predictive of well-being
 - Religious involvement that is experienced as restrictive is not expected to serve the same protective function as intrinsically motivated involvement

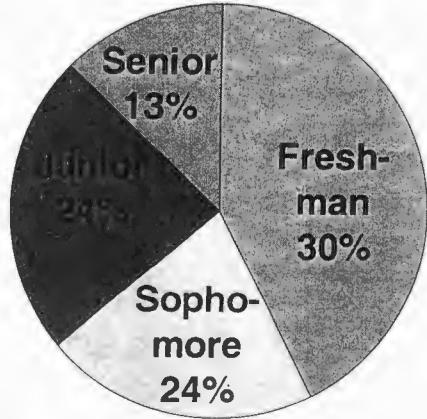
Hypotheses

- Frequency of attendance at religious services and greater subjective investment in religion would be associated with better social and psychological outcomes.
- Religious involvement that was perceived as restrictive or coerced was predicted to be associated with poorer social and psychological outcomes.

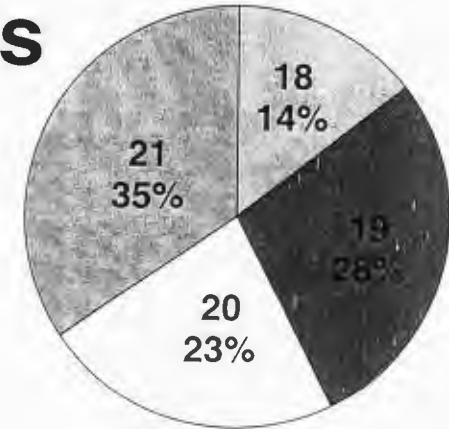
Participants

118 College Students

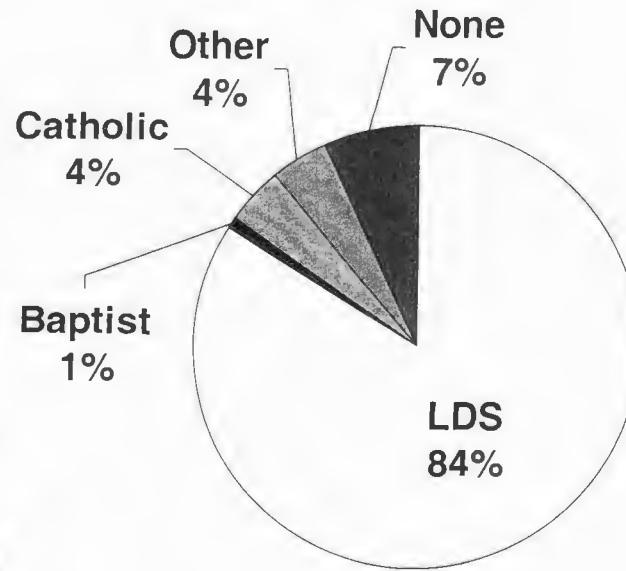
Year in College



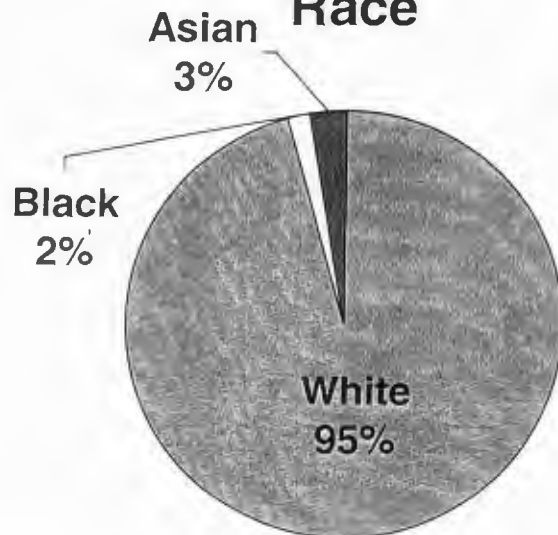
Age



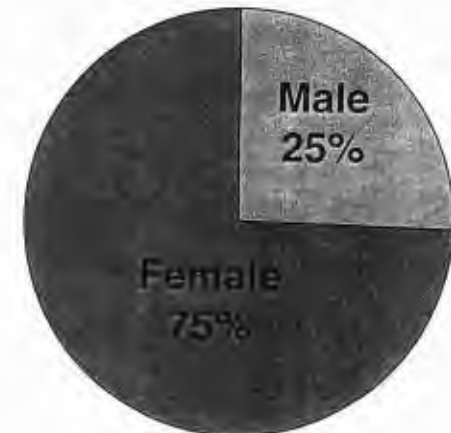
Religion



Race



Gender



Assessing Religious Attitudes

- “How important is religion to you?”
 - 1 = Very Important; 4 = Not Important at all
 - Mean = 3.64; SD = .79
- “In the past twelve months, how often did you attend religious services?”
 - 1 = Never; 5 = More than once per week
 - Mean = 3.92; SD = 1.03
- “My faith sometimes restricts my actions.”
 - 1 = Strongly Disagree; 4 = Strongly Agree
 - Mean = 2.80; SD = 1.08

Personal and Relationships Profile

(Straus & Mouradian 1999)

- **Depression**

- assesses disturbances in mood, dysphoric cognitions, somatic disturbances.
- Sum of 8 items (e.g., I feel sad quite often; I think good things will happen to me in the future – reverse scored)
- Scoring
 - 1 = Strongly Disagree; 4 = Strongly Agree
- Mean = 14.87; SD = 4.95
- Reliability – alpha coefficient = .90

Personal and Relationships Profile

(Straus & Mouradian 1999)

- **Social Integration**

- Measures attachment to society, endorsement of social norms
- 10 items (e.g., I share my thoughts with a family member; I have goals in life that I try to reach)
- Scoring
 - 1 = Strongly Disagree; 4 = Strongly Agree
- Mean = 32.78; SD = 4.39
- Reliability – alpha coefficient = .71

Personal and Relationships Profile

(Straus & Mouradian 1999)

- **Stressful Conditions**

- Assesses stresses and hassles experienced in daily living
- 9 items (e.g., People at work or school don't get along with me; Finding time for meals is hard for me)
- Scoring
 - 1 = Strongly Disagree; 4 = Strongly Agree
- Mean = 18.10; SD = 3.48
- Reliability – alpha coefficient = .67

Personal and Relationships Profile

(Straus & Mouradian 1999)

- **Alcohol Abuse**

- Measures excessive use of alcohol
- Sum of 4 items (e.g., Sometimes I can't remember what happened the night before because of drinking)
- Scoring
 - 1 = Strongly Disagree; 4 = Strongly Agree
- Mean = 5.14; SD = 2.56
- Reliability – alpha coefficient = .93

Personal and Relationships Profile

(Straus & Mouradian 1999)

- **Criminal History**

- Measures the extent to which the respondent has committed criminal acts
- Sum of 8 items (e.g., Before age 15, I physically attacked someone with the idea of seriously hurting them)
- Scoring
 - 1 = Strongly Disagree; 4 = Strongly Agree
- Mean = 10.75; SD = 3.63
- Reliability – alpha coefficient = .81

Table 1

Regression Analyses Predicting Well-being from Religious Attitudes and Behaviors

Dependent variable	Significant predictor	Adj. R ²	F	p	beta	t	p
Social Integration		.36	22.12	<.001			
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Alcohol Abuse		.24	12.19	<.001			
	Importance of Religion				-.39	-3.67	<.001

Summary of Results

- Higher scores on Importance of Religion were associated with better outcomes for each of the five measures of well-being
- Restrictiveness of Religion was associated with both Social Integration and Stressful Conditions
 - Experiencing religion as more restrictive was associated with poorer outcomes
- Frequency of Attendance was positively associated with Social Integration

Conclusions

- Results are consistent with previous research that has demonstrated a protective function of religious involvement.
- Findings also suggest a negative impact of religious involvement that is experienced as restrictive or coercive, particularly for aspects of well-being associated with social and relational functioning.
- Cultural considerations unique to this predominantly LDS sample may have impacted patterns of association, thus replication with samples from other religious groups is necessary.