

**UNDERSTANDING THE
RELATIONSHIP BETWEEN
RELIGION AND WELL-BEING: A
Mixed Methods Investigation into
Religious Maturity and Psychological
Well-being.**

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**A thesis submitted in part fulfilment of the requirements for the degree of
Professional Doctorate in Counselling Psychology**

London Metropolitan University

March 2013

DOCTORAL THESIS PORTFOLIO

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Professional Doctorate in Counselling Psychology

London Metropolitan University

School of Psychology

Faculty of Life Sciences

March 2013

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PREFACE

This portfolio is composed of the coursework elements pertaining to the final year modules of the Professional Doctorate in Counselling Psychology course I undertook at London Metropolitan University. These elements, in varying degrees, all speak of my journey as an aspiring counselling psychologist and touch upon the main themes that have characterised this journey so far.

Firstly they, directly or indirectly, refer to the development of my personal therapeutic approach. The process report analyses an extract of my therapeutic work in a forensic setting, the theoretical essay reflects my personal perspective on the strengths and pitfalls of cognitive-behavioural and psychodynamic therapeutic work with couples, whilst the reflective essay speaks about my personal aim of developing an integrative approach to psychotherapeutic practice. These three pieces of coursework underscore my disagreement with the mentality that seeks to uphold and prove the primacy of any therapeutic model and my belief in the relative usefulness of each therapeutic model. My personal philosophical preferences of critical realism and a growth-oriented theory of change emerge throughout this coursework as a strong basis behind the development of my personal therapeutic approach.

The formative influence of the scientist-practitioner and reflective-practitioner models throughout this training journey emerges as another commonality present throughout the coursework. These models are referenced directly or indirectly throughout all the components of this portfolio, but more importantly I hope that this selection of coursework covering the empirical, practical and theoretical spheres reflects my striving to apply both models effectively. In this regard I find that this final year of training has taught me that best practice necessitates a constant seeking to integrate knowledge and practice through a critical disposition of reflection, evaluation and learning driven by the desire to offer the best service possible.

Finally, all sections of this portfolio bear testimony to the guiding strength of the counselling psychology (CoP) ethos and philosophy. My experience as a trainee practising in diverse settings and as CoP student conducting research have fostered in me a growing appreciation of what this discipline can offer and an assurance that in the shifting sands of my professional development I can find stable ground in my identity as a counselling psychologist.

Section A: Empirical Research Project

This research project aimed to investigate the relationship between religious maturity (RM) and psychological well-being (PWB) using a mixed methods research orientation. The mixed parallel design adopted by this research was composed of a quantitative strand (Study-1) investigating the extent to which RM predicted PWB and the mediating impact of self-actualisation, meaning in life and self-esteem and a qualitative strand (Study-2) exploring the hypothesized relationship and possible intermediary mechanisms and processes in a more open-ended way. A sample of 138 adult UK residents from a Catholic or Protestant religious background were recruited for Study-1's purposes while, using maximum variation sampling, 4 interviewees were selected from the initial pool of participants for Study-2. Study-1's findings indicated that, although RM was not a significant predictor of PWB, higher levels of master-motive predicted higher levels of PWB mainly through meaning in life, while higher levels of openness predicted lower levels of PWB mainly through self-esteem. Study-2 yielded a theoretical model postulating a set of diverse religiosity facets impacting well-being through a series of intermediary processes involving multiple psychological domains. In conjunction, both studies seemed to point towards affording religiosity a central and pervasive role in life as having a salubrious effect, offered support for the explanatory benefits of employing a humanistic-existential theoretical frame in this inquiry field and placed an emphasis on meaning-making playing a primary intermediary role in the relationship of interest.

Given the importance afforded to the religious sphere of life by a segment of the population a counselling psychologist could certainly benefit from greater knowledge of the potential salutary and deleterious influence of diverse religiosity aspects. This research indicates that a practitioner might be in a better position to support a religious client if they have an idea of the trajectory of their religious development, the extent of the motivational role religion plays in their life, their view and type of relationship with God, the nature of their religious doubts and how comfortable they are with them, and what kind of pursuits their religiosity promotes.

Section B: Process Report, Applied Therapeutic Practice

This section portrays my therapeutic work with Neville (pseudonym), an incarcerated individual suffering from depression and post-traumatic stress. This case serves as an instructive example of the intricacies of providing time-limited psychotherapy within a

forensic setting to a client with a complex presentation. In this case, given the possible influence of the institutional setting on the client's psychological difficulties, I chose to employ a CBT approach with added input from the systemic paradigm so as to give the appropriate prominence to contextual factors in my case conceptualisation and formulation. An evaluation of a therapy session extract outlines the pitfalls I fell into during certain sections of this therapeutic work, i.e. being too didactic, fast paced and narrow-minded in focus. This evaluation also indicates that during the session in question I operated solely within a CBT framework and that I need to learn how to adopt a multi-theoretical mind-set in-session. In conclusion this report speaks about my current strengths and learning needs in light of the analysis of my therapeutic work.

My general experience as a trainee in a forensic setting and this case in particular have helped me appreciate the valuable contribution counselling psychology can give to the provision of care in a custodial environment. CoP can provide a discourse and model of change that contrast with the one-dimensional diagnosis-based approach aiming at clear categorisation and certainty promoted in varying degrees by the clinical, forensic and legal perspectives prevalent in this setting. This discipline's person-centred model of change, idiosyncratic and context-based approach to case conceptualisation and emphasis on reflexivity can help foster a more holistic understanding of prisoner's psychological difficulties that brings about the added benefit of highlighting the contributing role of the prison system. This can be especially valuable in helping the professionals working in this field to remain cognisant about the need to constantly evaluate how the prison system is fulfilling its rehabilitative role.

Section C: Theoretical Essay, Counselling Couples and Groups

This essay strives to provide a comparative analysis of cognitive-behavioural couple therapy (CBCT) and psychodynamic couple therapy (PCT) by exploring the similarities and differences in content and process between these therapeutic modalities. Departing from the premise that these modalities identify and define therapy's object of change in a differing manner, this essay explores the type of content-focused interventions adopted by these modalities with an emphasis on how they compare in terms of method and outcome. After proceeding to contrast these modalities' therapeutic stance, it then provides a synthesis of the two routes these modalities pursue to achieve change. Subsequently this section discusses CBCT and PCT's strengths and limitations in relation to different couple's needs and

preferences and finally two theoretical case examples are used to further elucidate the themes elicited.

The conclusion of this essay is dedicated to my thoughts about how I should position myself as a counselling psychologist in relation to the use of these modalities. In summary, I believe that the pluralistic focus of CoP discourages any unnecessary dualism between therapeutic approaches and instead challenges one to seek the judicious use of both modalities. This seeking can find a strong direction in an adherence to the humanistic values that should underlie every therapeutic encounter and in an emphasis on the therapeutic relationship as a process of change in itself.

Section D: Reflective Essay, Cognitive Behaviour Therapy Level 3

This section speaks of my personal journey as a trainee counselling psychologist as well as the destination I aspire to. It commences with an overview of this journey so far, starting from what attracted me towards CoP, continuing with my experience as a practitioner in training and ending with the reasons why I chose to strive to develop an integrative psychotherapy practice. Subsequently, three case examples illustrate how in the second and third years of my training I have been tentatively trying to use non-CBT models to enrich my case conceptualisation and widen the range of therapeutic interventions I can offer. Attempting to do this in a conceptually coherent manner has made me aware of the complexity of the task and a section of this essay discusses the intricacies implicit in adopting an integrative psychotherapeutic approach in light of the integration-eclecticism debate.

In the conclusion of this piece I discuss my understanding of the overall framework that can best guide the development of my personal psychotherapeutic practice. I believe that, while a broad understanding of evidence, the scientist-practitioner and reflective-practitioner models and certain philosophical preferences such as a critical realist epistemological position all can provide important contributions to this framework, it is ultimately my identity as a counselling psychologist that will serve as the most crucial component.

DECLARATION

I, hereby declare that this thesis is an original piece work carried out and written by myself. It is being presented in part fulfilment of the requirements of the degree of Professional Doctorate in Counselling Psychology at London Metropolitan University and has not been previously submitted for any other academic award.

A handwritten signature in black ink, appearing to be 'J. [unclear]', written over a horizontal line.

Signature

20/10/2013

Date

To my family

ABSTRACT

Despite a recent resurgence of interest in the field of religion and well-being, the psychological understanding of the relationship between these 2 phenomena remains limited. A review of relevant literature indicated that focusing on the potential relationship between religious maturity (RM) as conceptualised by Allport (1950) and a multidimensional conceptualisation of psychological well-being (PWB) might represent a fruitful way forward. The mixed parallel design adopted by this research was composed of a quantitative strand (Study-1) investigating the extent to which RM predicted PWB and the mediating impact of self-actualisation, meaning in life and self-esteem and a qualitative strand (Study-2) exploring the hypothesized relationship and possible intermediary mechanisms and processes in a more open-ended manner. A sample of 138 adult UK residents from a Catholic or Protestant religious background were recruited for Study-1's purposes while, using maximum variation sampling, 4 interviewees were selected for Study-2 from the initial pool of participants. Study-1's findings indicated that, although RM was not a significant predictor of PWB, higher levels of master-motive predicted higher levels of PWB, mainly through meaning in life, while higher levels of openness predicted lower levels of PWB, mainly through self-esteem. Study-2 yielded a theoretical model postulating a set of diverse religiosity facets impacting well-being through a series of intermediary processes involving multiple psychological domains. In conjunction, both studies seemed to point towards affording religiosity a central and pervasive role in life as having a salubrious effect, offered support for the explanatory benefits of employing a humanistic-existential theoretical frame in this inquiry field and placed an emphasis on meaning-making playing a primary intermediary role in the relationship of interest. Finally, suggestions for future research are proposed and implications for both the theory and practice of CoP are explored.

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ACKNOWLEDGEMENTS

I wish to commence by thanking all the individuals who found the time to participate in this research and thus contribute to the further advancement of this field of psychological research. Without your generous input this project would have not been possible. I sincerely hope that the final outcome validates your contribution.

My gratitude also goes to my supervisor, Dr Mark Donati, for his invaluable guidance from when this project was in its infancy till the compilation of the final version. Your insights about the counselling psychology perspective and your input regarding the use of mixed methods approaches have certainly augmented the quality of this piece of work. Thanks also to Dr. Paul Hutchinson for helping me through my statistics related difficulties and providing valuable practical suggestions at crucial junctures in my work.

As I approach the end of a long academic journey, apart from the persons who helped directly in this thesis, I think it is apt to also thank all those people who have helped me along the way. My heartfelt thanks therefore go to my parents for their constant support and encouragement throughout my educational journey. Without you I would certainly not have arrived so far, this piece of work bears testimony to your unwavering support and faith in me. I would also like to thank all those persons that made me experience the joy of learning and fostered in me a love of knowledge; my grandfather, Mrs Ciantar, Fr Marcello, Mr Cardona, Dr Abela you are the people that inspired my educational pursuits, believed in my abilities and helped me arrive at this point.

Finally I would also like to express my profound appreciation to Alexia; a source of constant support, a sounding board for my ideas and a priceless font of guidance, you certainly made the whole endeavour easier and more enjoyable.

LIST OF ABBREVIATIONS

CoP	Counselling Psychology
E	Extrinsic religious orientation
FMS	Faith Maturity Scale
GT	Grounded theory
MM	Mixed methods
PWB	Psychological well-being
Q	Quest religious orientation
RM	Religious maturity
RSI	Religious Status Inventory

PROLOGUE

REFLEXIVE STATEMENT

Reflexivity, defined as a capacity to direct one's awareness on oneself (McLeod, 2001), can augment a study's validity by encouraging self-reflection, promoting transparency and making the researcher's role in the research process explicit. In light of the recommendation in counselling psychology (CoP) literature to clearly state the researcher's perspective (Morrow, 2005) this reflexive statement will aim to make my personal and epistemological position in relation to this research explicit to the reader. Reflecting on and stating my own conception of reality and knowledge and what interests me about this topic served as a useful process that increased my awareness of the interpretative biases I could potentially fall prey to.

I am a white, male psychologist currently completing my CoP training. I have been brought up in a strong Catholic background and hail from a country, Malta, where Catholicism has historically been and still is a major influence on society. I would describe myself as a highly religious person who identifies with Catholicism and in whose life so far religion has played a major guiding role. Since I view myself as a highly rational person, my orientation towards religion values an intellectual approach and I am constantly searching for a synthesis between my religious beliefs, philosophical standpoints and psychological knowledge. Christian values such as charity, justice and service have deeply influenced my life priorities and have been a major motivation behind my choice of a career in the helping professions.

Having experienced that religiosity can be a tremendous force for psychological growth and self-fulfilment as well as for deep-seated distress, with time I developed a profound interest in attempting to elucidate the processes through which these opposing outcomes come to be. Influenced by the scientist-practitioner stance (Belar & Perry, 1992), during my CoP training at the London Metropolitan University (LMU), I became a firm believer in the potential of empirical research in advancing our understanding of the psychological realm. Hence when I had the opportunity to conduct a doctoral thesis in completion of a Doctorate in Counselling Psychology I chose to channel this interest of many years into a research inquiry. I was further encouraged to pursue this line of inquiry by my view that CoP due to its humanistic philosophical

foundations and values is an ideal position to strive to incorporate the religious dimension into current psychological thinking.

My CoP training has also made me grapple with ontological and epistemological issues and through this process I slowly realised that I personally relate mostly with the philosophical movement of critical realism (Bhaskar, 1998). This philosophical approach makes a differentiation between ontological and epistemological considerations. On the one hand, it upholds the realist assertion that reality consists of enduring and stable qualities that exist independently of human conceptualisation. On the other hand, it maintains that the way phenomena are perceived and experienced is dependent on the individual's personal beliefs, experience and knowledge and is hence unavoidably fluid and subjective. Critical realism thus tempers a realist drive to gain more accurate knowledge of reality with an awareness that the evidence within our reach may not directly reflect reality. I find that critical realism fits neatly with CoP's focus on phenomenology and inter-subjectivity as well as its attempt to integrate the scientist-practitioner and reflective-practitioner stances.

In line with a critical realist philosophy, I believe that the self of the researcher is an active ingredient that permeates the research process in a manner that cannot be fully unravelled. Therefore good research requires making the self of the researcher more discernible rather than less evident. Motivated by these considerations, throughout this research report I will use the first-person and active voice to make myself as the researcher as transparent as possible to the reader. Hopefully these reflexive steps will provide the reader with an added perspective that enhances his/her understanding of this research project

1. INTRODUCTION

1.1 Introduction

During its 150-year history, modern psychology's attitude toward the relationship between religion and psychological well-being (PWB) can be described as generally ambivalent. One major source of this ambivalence is the question as to whether religious life promotes pathology or psychological health (Vilchinsky & Kravetz, 2005). Historically psychological theories about the corollaries of religiosity tended to be quite polarised. Some scholars considered religion central to what it means to be a complete human being (Jung, 1938/1969) and a pathway to the highest of human potentials (James, 1902). Others viewed it as a kind of mass neurosis (Freud, 1927/1964), as punitive and exploitative (Skinner, 1953) and damaging to mental health (Ellis, 1986). Towards the end of the 20th century, however, opinions of scholars seemed to converge towards a more balanced middle ground. A chief example is Ellis (2000, p.277) conceding that "religious beliefs...are potentially helpful to some clients. Religious believers embrace some rational, self-helping beliefs as well".

From a research perspective, the field of religion and mental health had been under-researched for several decades (Bergin, 1980; Levin & Schiller, 1987), but recent years have witnessed a well-documented increase in interest in this research area¹ (Zinnbauer & Pargament, 2005).

A number of meta-reviews concerning the religion-psychological health linkage reveal that a generally positive relation has been found between various religiousness measures and different psychosocial well-being criteria (Koenig, 1998; Miller & Kelley, 2005). There is though another side to available evidence that needs to be considered; Bergin's (1983) meta-analysis of studies relating indices of religion and psychopathology found that, although 14 studies indicated a favourable relationship between religion and psychological health, 7 revealed a positive association with pathology. More recent studies have also found certain elements of religiosity, such as an extrinsic or quest orientation, to be related to lower well-being levels (Maltby & Day, 2000; Koenig, McCullough & Larson, 2001).

This snippet of research evidence immediately makes it apparent that there is no straightforward relationship between religiosity and PWB and that it is too simplistic to think of religion

¹ As exemplified by the launch of a new British Journal, 'Mental Health, Religion and Culture' in 1998.

necessarily either promoting or impeding psychological health. Furthermore, while the evidence available provides myriad diverse results and interesting leads, it has scarcely furthered the psychological understanding of the religiosity-PWB relationship due to various challenges. These include: the tendency by researchers interested in this topic to view religion as an undifferentiated and stable construct due to a lack of sophisticated knowledge about the religious domain (Hood, Hill, & Spilka, 2009); secondly, the operationalisation and measurement of religious factors being plagued by imprecise definitions of key concepts like religiousness or spirituality (Slater, Hall & Edwards, 2001); thirdly, the continued use of global indices, such as prayer-frequency and religious affiliation (Hill & Pargament, 2008), that fail to provide a comprehensive picture of religiosity and are poorly theoretically linked to PWB; finally, the multi-dimensional nature of PWB rendering the picture more complex and increasing exponentially the number of potential links between the two constructs.

This review will attempt to tackle these lacunae by critically discussing the definition, nature and operationalisation of religiosity and PWB before subsequently providing a more detailed synopsis of empirical and theoretical literature.

1.2 Defining Religiosity and Psychological Well-being

1.2.1 Defining Religiosity

Religion has been described as an exceedingly complex phenomenon (Hood et al., 2009) encompassing a wide variety of facets including beliefs (e.g. theologies, creeds), private practices (e.g. fasting), communal practices (e.g. mass), feelings (e.g. awe, ecstasy) values (e.g. concern for others) and experience (e.g. of closeness to God). Consequently any single definition runs the danger of unproductively simplifying this phenomenon and psychology has historically struggled to define this construct (Paloutzian, 1996). Hood et al. (2009) went so far as to adopt the stance that the field is not yet in a position to provide a comprehensive definition of religiosity. Whilst fully aware of these pitfalls, I consider a tentative definition of the phenomenon under investigation as a necessary point of departure so as to avoid the even greater danger of implicitly assuming that a general consensus exists about what the term religiosity refers to.

Pargament, (1997, p.32) a prominent researcher in this field, has defined religion as “*a search for significance in ways related to the sacred*”, emphasising the sacred as the defining feature of religiosity. The term sacred is used to refer to those objects or events that are set apart from the

ordinary and thus includes the concepts of God, divine, transcendent and ultimate reality as well as objects associated with these (Pargament, 2002a). This definition is broad enough to encompass all the varying components of religious life and to also take into account the variation within these components between diverse religious traditions. This definition also portrays the dynamic element of this phenomenon and makes concession to how religiosity may evolve over time. Given these strengths this definition of religion will be adopted by this research.

1.2.2 Religiosity and Spirituality

A comprehensive understanding of religiosity necessitates a thorough comparison of this construct with spirituality. Following a rising preference in past decades for using the term spirituality over religion (Bregman, 2006), the distinction between these two constructs has become blurred and a lack of consensus exists in the social sciences about their conceptual differentiation (Slater et al., 2001).

Various definitions² of spirituality can be found in psychology literature; the common denominators of which are a personal relationship with a transcendent being and an emphasis on the experiential aspect of this relationship. Therefore, the defining features of spirituality, as the term is used in contemporary times, seem to be individualistic, experience-oriented and lacking an external organising framework. Conversely, religion, while also being concerned with the personal and experiential dimensions, has historically been understood to encompass both individual and institutional elements (Hill & Pargament, 2008).

Hence Miller & Thoresen (2003) describe religiousness and spirituality as constructs that overlap in their shared focus at the individual level. Other authors have indicated that the common ground between the two concepts lies in the recognition of a transcendent, meta-empirical dimension of reality (Emmons, 1999) and the role of the sacred as a vital, sought-after destination (Hill & Pargament, 2008). In this common-ground view religion and spirituality are regarded as related constructs (Hill et al., 2000) that are both ordered towards a search for the sacred.

However recently, first a schism (Sheldrake, 1992) and then a growing polarisation between the two terms (Koenig et al., 2001) has become apparent³. A basic analysis of the religious field reveals the many shortcomings of conceptualising spirituality and religiosity as distinct and independent.

²These include a subjective experience of the sacred (Vaughan, 1991) and beliefs, experiences and practices involving the individual's relationship with a higher being or power (Rose, Westefeld, & Ansley, 2008).

³Appendix-A1 provides an extended discussion about this issue.

Most spiritual expression is not completely devoid of social context and all religious traditions aim to guide personal dispositions. Viewing the personal and institutional elements in a dualistic manner is conceptually erroneous because even in traditional and highly-organised religions like Roman Catholicism aspects like establishing a personal relationship with the divine and communicating directly through prayer are integral to religious life. Also mystical elements can be found both within and outside established religious traditions⁴. There is a long history of religion being understood as encompassing multiple dimensions that include the personal and experiential aspects and not solely as a public institution or doctrine⁵. Therefore, to now confine religion to institutional norms and practices amounts to reifying religion with only some of its dimensions with scant gain in conceptual or empirical clarity (Hood et al., 2009).

I would argue that when adopting a broader definition of religion as the human search of the sacred, the various current definitions of spirituality automatically find their place within this construct. Within this broader understanding of religion it is helpful to refer to Streib and Hood's (2008) definition tree of religion (see Appendix-A2) that postulated unorganised experience-oriented, charisma-oriented and tradition-oriented as different forms of religion that differ in degrees of organisation and mediation of the sacred. All the aforementioned characteristic marks of spirituality are also the defining features of one of these forms; *unorganized, experience-oriented religiosity*. On the other hand, the individualistic, in sense of personal, and experience-oriented features may also be referring to specific aspects within organised religion, be it charisma-oriented or tradition-oriented religion.

This conceptualisation of spirituality vis-à-vis religion is congruent with the aforementioned common-ground view and offers a more coherent and conceptually clear view of both constructs. While spirituality, as indicated by its popular usage, might have a value as an emic term, from a scholarly perspective I concur with Streib and Hood's (2008) contention that as an etic term religion sufficiently subsumes what the current definitions of spirituality refer to.

⁴Research data has in fact highlighted that both individuals who identify themselves as 'spiritual rather than religious' and those who identify themselves as 'equally religious and spiritual' commonly report mystical experiences (Zinnbauer et al., 1997).

⁵Even back in 1799, Schleiermacher (1958/1799, p.39), an influential theologian and philosopher, was defining religion as a "sense and taste for the Infinite".

1.2.3 Defining Psychological Well-being

Two prevalent PWB conceptions can be distinguished in literature (Ryff, 1995): one viewing PWB as the balance between positive and negative affect and a second emphasizing life satisfaction as the key indicator of this construct. Research on PWB's structure has supported a model comprising all these dimensions, i.e. positive affect, negative affect, and life satisfaction (Diener, Suh, Lucas, & Smith, 1999). In this model PWB is conceptualised as having both an affective and cognitive component. The former consists of how frequently an individual reports experiencing positive and negative affect, while the cognitive component of life satisfaction focuses on the self-assessment of one's quality of life and is based on the respondent's own understanding of what a 'good life' is.

1.2.4 Conclusions

For this research's purposes religion will be broadly defined as a search for significance in ways related to the sacred that is conducted within varying degrees of organisation and mediation and will be regarded as a multidimensional construct composed of cognitive, behavioural, emotive and experiential aspects. Religiosity and religiousness will therefore be understood as the extent of a person's engagement with religion. Spirituality will be understood as an individualistic, unorganised and experience-oriented search for the sacred. This research will therefore not be using the religiosity and spirituality terms interchangeably⁶. PWB will be conceptualised as being composed of the balance between positive and negative affect and the individual's evaluation of global life satisfaction.

1.3 Religiosity and Psychological Well-Being

1.3.1 Broad Review of Research

From a critical perspective it is important to note there has been an over-reliance on positivist-empiricist frameworks and quantitative methods when investigating the psychological impact of religiosity (Mental Health Foundation, 2006; Coyle, 2008) and that there is a dearth of qualitative research focusing specifically on the religiosity-PWB relationship⁷. This review will, therefore,

⁶ As unfortunately has been the practice in some psychology articles (Zinnbauer et al., 1997)

⁷ It has been argued that a possible explanation for this emphasis may be found in psychology of religion's urge to demonstrate 'scientific credibility' in reaction to the historical tensions between psychology and religion (Coyle, 2008).

first attempt to summarise the directions pursued by research based on a positivist-empiricist framework and will subsequently outline the contribution made by qualitative research.

The majority of research reviews investigating the relationship between religiosity and a variety of psychosocial well-being indicators have concluded that available evidence generally points towards a positive relationship between religion and psychological health. Seybold and Hill (2001) found numerous "salutary effects" of religiosity on both physical and mental health. Similarly, Bergin's (1991) review concluded that in terms of the relationship between religiosity and mental health; "average effects are generally positive, although not dramatic" (p.401). Koenig and Larson (2001) systematic review of 850 studies also concluded that a generally positive relation exists between religiosity and mental health. The authors reported that 80% of the studies that correlated religiosity with life satisfaction indicated a positive association between these two factors and that approximately two-thirds of the studies that correlated religiosity with depression found lower depression and/or anxiety rates among the more religious. Finally, an analysis of 200+ studies found that greater religiousness was mildly associated with fewer depressive symptoms (Smith, McCullough & Poll, 2003).

Some meta-reviews on the same subject-matter have provided more ambiguous results. Bergin's (1983) meta-analysis of 30 studies about the effects of religious involvement found that, although 14 studies manifested a positive relationship between religiosity and well-being, 7 displayed a negative relation. Gartner, Larson, and Allen's (1991) review of approximately 200 studies, though demonstrating a salutary relationship between religiousness and psychological functioning in various areas revealed ambiguous relationships with aspects such as anxiety, sexual problems and psychosis. Payne, Bergin, Bielema and Jenkins' (1991) search revealed that, while religiousness was positively related to various PWB indicators, no overall evidence was found for a relationship between religiosity and the prevention of clinical disorders.

It is important to note that the majority of the studies included in these reviews chose to measure specific aspects of religion (e.g. religious affiliation, salience of beliefs) and are therefore open to the criticism that they failed to adequately assess the religiousness construct. In fact a number of the same aforementioned scholars (Payne et al., 1991; Gartner et al., 1991) concluded that the failure to take into account the multifaceted and non-uniform nature of religiosity obscures the relevance of such findings and that psychologists need to be more specific in how they operationalise religiosity (Gartner et al.) and more focused on examining the *manner* a person is religious rather than the *extent* of their religiousness (Payne et al.).

1.3.2 Multi-dimensional Conceptualisations of Religiosity

This review highlighted that the search for the sacred has many components and recent literature has strongly stressed the need to conceptualise religiosity as a multi-dimensional construct (Neff, 2006; Hill & Pargament, 2008). Measures such as frequency of religious practices or content of beliefs therefore need to be understood as indicators of specific religiosity dimensions rather than as general indicators of religiousness.

Amid the several unitary operationalisations of religiosity there is a notable multidimensional conceptualisation; Allport's (1950) intrinsic-extrinsic religious orientation model augmented by the later addition of the quest orientation (Donahue, 1985).

1.3.3 Religious Orientation

In an attempt to elucidate the relationship between religion and prejudice, Allport focused his attention on a particular dimension of religiosity he termed *religious orientation*. This concept refers to the motives associated with religious belief and practice (King & Hunt, 1971) with Allport (1950, 1966) clearly distinguishing between 2 main religious motivations: intrinsic and extrinsic. Allport and Ross (1967) subsequently developed the Religious orientation scale (ROS) to measure these constructs.

The main distinction between these concepts is that the intrinsic person lives his faith, while the extrinsic uses his faith (Allport & Ross, 1967). The extrinsic orientation (E) represents a strictly utilitarian motivation for being religious, while the intrinsic orientation (I) regards religion as valuable in and of itself (Allport & Ross). I is carried over into the totality of life whilst E is compartmentalised and kept separate (Fuller, 1994). Allport considered I and E to equate to mature and immature religiosity respectively and hypothesized that intrinsicness will positively affect PWB and extrinsicness would have the opposite effect. Thus, Allport made a significant breakthrough in the psychological study of religion by introducing a religiosity measure that is theoretically and functionally linked to mental health (Hill & Pargament, 2008).

However a common criticism of Allport's theories and the ROS is that I might fail to measure mature religiosity. Specifically, Batson argued that Allport described features of mature religion—complexity, self-criticism, tentativeness—which he failed to directly measure in the ROS (Batson, Schoenrade, & Ventis, 1993). Therefore, to supplement Allport's I-E model, Batson (1976)

introduced a new religious orientation dimension, Religion as a Quest (Q), assessing a self-critical, doubt-valuing and reflective orientation to religiosity (Batson & Ventis, 1982).

1.3.4 Research on I, E and Psychological Well-Being

Several studies have supported Allport's hypothesis about the relationship between religious orientation and PWB. A review of approximately 80 studies found that E tended to be positively associated and I negatively associated with measures of depression, associations were modest, but tended to be fairly consistent (McCullough & Larson, 1999). Koenig et al.'s (2001) meta-analysis of research regarding the relationship between religiosity and mental health, found that people who are high in I and regularly involved in religious community activity may have lower risk for depression, while those who have an extrinsic orientation appear to be at higher risk for depression. In another meta-analysis concerning the association between religion and depression, Smith et al. (2003) found the same pattern between the I-E concepts and depression, with further analyses indicating that this association was significant across age, gender and ethnicity.

Subsequently studies have reported a positive association between I and happiness (Lewis, Maltby, & Day, 2005) and that I appears to make a unique contribution to the prediction of subjective well-being as measured by life satisfaction, purpose in life, self-efficacy and negative affect (Byrd, Hageman, & Isle, 2007).

1.3.5 Research on Q and Psychological Well-Being

The relationship between Q and PWB is less clear. While some research has indicated that Q generally fails to correlate with measures of psychological health or disturbance (Joules, 2007; Pargament et al., 1987), other studies have found a negative association between Q and PWB. Ventis (1995) found that half the studies examining Quest and its relation to worry and guilt were inconclusive with four displaying significant results; three showed a link between higher Quest and higher existential anxiety, worry and/or guilt and only one reported a healthy link. Genia (1996) also found evidence of a link between Q and lower PWB, with results indicating that high questers reported lower self-esteem and higher depression.

1.3.6 Contemporary Directions in the Psychological Study of Religiosity

Clearly the studies utilising the religious orientation framework uncovered a more finely delineated pattern of relationships between religiosity and PWB. The trends highlighted by reviewing these studies indicate that the religiousness–PWB relationship varies as a function of the operationalisation of religiosity. In this respect this multidimensional model of religiosity provides a conceptual framework that can help in making theoretical sense of the seemingly contradictory results found in this field.

Adding further weight to the hypothesis that a multi-dimensional approach to conceptualising and measuring religiosity provides greater exploratory and explanatory power is a meta-analysis defining religiosity as comprising three dimensions: ideological religion, institutional religion and personal devotion⁸ (Hackney & Sanders, 2003). Using this conceptualisation to group available research in terms of the religiosity dimension measured, the authors uncovered a variegated relationship between religiousness and PWB: institutional religion was associated with higher levels of psychological distress, personal devotion was associated with lower distress levels while ideological religion was not significantly associated with this construct. Contrastingly, all three dimensions were positively associated with life satisfaction.

It is therefore apparent that this line of research about religiosity and PWB would benefit from the adoption of more targeted approaches. I believe that, at this juncture, to further the psychological understanding of this relationship, research must either make greater use of comprehensive multi-dimensional measures of religiosity, or base the choice of considering specific aspect/s of religiosity on theoretically sound grounds. Among the numerous multi-dimensional conceptualisations of religiosity a researcher can decide to focus on, I propose that the RM construct might represent a particularly fruitful avenue.

1.4 Religious Maturity

1.4.1 The Relevance of the Religious Maturity Construct

There is a prominent claim in the psychology of religion put forward by scholars such as James, Allport and Maslow that religiously mature individuals enjoy certain salutary personality

⁸The “ideological religion” dimension emphasizes beliefs involved in religious activity (e.g. attitudes, belief salience), the “institutional religion” dimension captures social and behavioural aspects of religion (e.g. attendance at religious services, ritual prayer) and the “personal devotion” dimension encompasses aspects of internalized, personal devotion (e.g. emotional attachment to God, devotional intensity).

characteristics (Leak & Fish, 1999). These theories are based on a strong developmental tradition in psychology that upholds that life implies growth and maturity and that this maturation process can be experienced to varying extents in numerous aspects of one's life (Feinsilver, 1960).

Mature religious functioning goes beyond mere religious behaviours, beliefs or even motivational style, as it attempts to capture *how* the individual is religious rather than what one believes, practices or experiences. This construct strives to capture the stable tendencies within the person's religious life that underlie these covert indicators and shed light on how well-integrated the individual's religiosity is with his/her general psychological domain and life experiences (Allport 1950). Whilst diverse scholars such as Fromm (1967) and Alder (1989) have speculated about overall mature religiosity, Allport is still regarded as the most influential psychologist to theorise about the features of RM (Leak & Fish, 1999).

1.4.2 Religious Maturity and Religious Orientation

While, as evidenced by the aforementioned body of research, the I, E and Q concepts have certainly represented a fruitful step forward in this field, they have also been the subject of several criticisms. The majority of these criticisms claim that Allport focused on the I-E concepts at the expense of his earlier holistic theories about RM.

A brief analysis of Allport's (1950) original work is sufficient to corroborate this claim. Allport (p.64) defined RM as:

A disposition built over time to respond favourably and in certain habitual ways, to conceptual objects and principles that the individual regards as of ultimate importance in his own life, and as having to do with what he regards as permanent or central in the nature of things.

He spoke of this disposition as a stable unit of mental life composed of diverse attributes that although variable contribute to a single coherent system. His theories speculated about the following attributes of a mature religiosity (see Appendix-A3):

1. Well-differentiated
2. Dynamic in nature
3. Productive of a consistent morality

4. Comprehensive
5. Integral
6. Fundamentally heuristic

However the ROS measures mainly the first component and totally discards the integral, differentiated and heuristic components (Leak, 2002). This forgoing of certain aspects of his earlier work about RM seems to indicate that Allport’s efforts to operationalise and measure such a meaningful and elusive construct were unfortunately made at the expense of the depth and complexity of his theory.

1.4.3 Development of a Religious Maturity Scale

In 1999, Leak and Fish started working on a RM operationalisation covering a broader spectrum of the aforementioned facets than the I, E and Q scales. Using Allport’s theories about the mature religious sentiment as their starting point, they employed first a known-groups approach and then a multi-method, convergent validity strategy to construct and validate a RM measure. Further statistical work, including exploratory factor analysis (Leak 2002), eventually led to the development of a religious maturity scale named CUV-4 composed of 4 factors (Table-1).

Table-1

Factors of the CUV-4 scale

Factor Name	Description
<i>Master-motive</i>	Mainly containing items emphasising the dynamic nature of religiosity and loading on the I and religious orthodoxy dimensions.
<i>Complexity-of-beliefs</i>	Composed of items based on the differentiation and comprehensiveness attributes. This factor is characterised by negative loadings on negative religiosity dimensions such as E and fundamentalism.
<i>Openness</i>	Defined by items representing the differentiation attribute and loading on Q.
<i>Heuristic quality</i>	Based on Allport’s (1950) description of the heuristic character of mature religiosity.

1.4.4 Other Religious Maturity Conceptualisations

While Allport's RM theories have generated substantial research, other scholars have developed RM conceptualisations and measures. These include Fowler's Faith Development Theory, the Faith Maturity Scale (FMS; Benson, Donahue, & Erikson, 1993) and the Religious Status Inventory (RSI; Malony, 1988). (See Appendix-A4 for overview).

Unfortunately due to time constraints and the adequate length of the quantitative survey, I was unable to focus on more than one RM conceptualisation. While the aforementioned RM models certainly carry their relative strengths, in my view Allport's RM conceptualisation pertains to a broader understanding of religion and is more congruent with the definition of religion adopted by this research. Furthermore, the important contribution made by the religious orientation construct to this field provides encouraging evidence in favour of the potential utility of a RM operationalisation that is tightly based on Allportian theories.

1.5 Religious Maturity and Psychological Well-being

The RM construct has not been extensively used in psychological research and few empirical studies have investigated the RM-PWB relationship (Salsman & Carlson, 2005). RM has been found to be related to lower psychological distress in older Christian women (Atkinson & Maloney, 1994) and in a student population (Salsman & Carlson) and to be positively associated with life satisfaction (Miller, 1998). These studies have, however, used measures of RM derived from theoretical models unrelated to Allport's theories; i.e. the FMS and RSI. To my knowledge there has been no empirical investigation to date into the relationship between RM, as conceptualised by Allport and operationalised by Leak and Fish, and PWB.

1.6 Explanatory Mechanisms

Another gap in this field is the relative absence of inquiries into the possible explanations for a hypothetical relationship between religiosity and PWB (Pargament 2002; Greenfield & Marks, 2007). Research now also needs to start addressing the 'how' by identifying the possible mechanisms that may mediate or moderate the impact of being religious on PWB. This is certainly a complex question and it has already been hypothesized that multiple factors are implicated in the religiosity-well-being relationship (Joiner, Perez & Walker, 2002); e.g. Seybold and Hill (2001) proposed a number of putative mechanisms mediating this relationship including

social networks, healthier lifestyles, coping strategies and the generation of positive self-perceptions.

Paloutzian (1996), in a bid to provide a conceptual framework to this line of inquiry, helpfully grouped the theories about the psychological and social processes that have sought to explain how religion influences well-being as follows: 1-unconscious mental processes; 2-behaviours shaped by conditioning; 3-the human need for meaning and growth; 4-social influences, cognitive processes and the interaction between them.

Despite these theoretical endeavours, there has been sparse empirical exploration of these putative mechanisms, with available research mainly focusing on the mediating role of social support; Husaini, Blasi, and Miller (1999) concluded that social support serves to mediate the manner in which religiousness reduces depression, while Salsman, Brown, Brechting and Carlson (2005) found that both social support and optimism were mediators of the relationship between I and life satisfaction. In other research efforts, Vilchinsky and Kravetz (2005) and Steger and Frazier (2005) uncovered evidence congruent with Paloutzian's third group of explanatory processes. The former concluded that meaning in life appears to mediate the positive relation between religious behaviours and beliefs and PWB, while the latter also reached the same conclusion about the mediating role of meaning in life in the relationship between self-rated religiosity and religious behaviours and well-being.

1.7 Humanistic-Existential Theoretical Lens

Although these studies have provided evidence confirming the role of certain factors in the religiosity-PWB relationship, the current knowledge base in this research area amounts to an awareness of the potential influence of a set of scattered mediators. Consequently a sound theoretical understanding of how religion might influence PWB is lacking. This research therefore proposes that an explanatory-focused enquiry into the religiosity-PWB relationship would benefit from a firm theoretical grounding in established psychological theory.

The third group of intermediary processes invoked by Paloutzian and the evidence provided by the last two studies mentioned seem to be congruent with humanistic and existential psychological theories positing that human beings have a need for activities and experiences that produce growth, meaning in life and self-actualization. Frankl (1967) considered the will-to-meaning to be the root of all human motivation and regarded the existential vacuum created by

meaninglessness as the cause behind most psychological problems. Logotherapy and its counterpart existential analysis, hence, address psychological difficulties through the exploration of the fundamentals of one's existence, while supporting the client to identify their individual meaning. Maslow (1943) in his Hierarchy of Needs Theory postulated that after, fulfilling basic biological needs, individuals strive to reach a higher set of needs, including esteem needs and ultimately the motivation for self-actualisation. Rogers (1951) emphasized the importance of the actualising tendency as the driving force innate in every life-form. In this respect, Rogerian (client-centred) therapy aims to provide the client with an opportunity to recognise oneself as the agent of change. This therapy supports the client to be more open to experience, to identify their goals and to become motivated towards personal growth as they become more fully that which they choose to become.

These psychological theories about the human condition argue for the crucial role of factors such as meaning in life, self-esteem and self-actualisation in psychological health. This review will now focus on these factors in turn and outline their possible links with both religiosity and PWB.

1.7.1 Meaning in Life

Meaning in life refers to the self-perceived significance of one's life and definitions of this construct have included descriptors about order and coherence in the individual's existence and goal orientation and purpose (Steger, Frazier, Oishi, & Kaler, 2006; Battista & Almond, 1973). Available research has corroborated Frankl's (1967) claim by providing evidence indicating a positive relationship between this construct and both positive affect (Keyes, Shmotkin, & Ryff, 2002; Steger, Kashdan, & Oishi, 2008) and life satisfaction (Steger & Kashdan, 2006; Steger, Kashdan, & Oishi).

Some authors have claimed that religion is in a strong position to imbue life with meaning, as it has the potential to institute goals and value systems that pertain to all aspects of human life (Emmons, 2005) and the capability, thanks to its comprehensive nature, to subsume other sources of meaning such as personal relationships, work and life values (Park, 2005). Research evidence seems to confirm this hypothetical positive association between religiosity and meaning in life. Recent investigations have revealed a positive association between various aspects of religious conduct like Bible reading and meaning in life (Tomer & Eliason 2000; Francis 2000). In conjunction this evidence further supports the hypothesis that this construct may be an important mediator in the religiosity-PWB relationship.

1.7.2 Self-Esteem

Self-esteem has been defined as the evaluative component of the self-concept that appraises the self in terms of overall worth (Baumeister, 1998) and it is generally assumed that having a positive view of self confers several psychological benefits.

Donahue and Benson (1995) found a significant albeit small positive correlation between religiosity and self-esteem in a study of 30,000 adolescents. Research evidence has also highlighted a positive association between certain aspects of religiosity and self-esteem. It has been found to be positively correlated with self-esteem (Laurencelle, Abell, & Schwartz, 2002; Ryan, Rigby, & King, 1993) and a positive association between religious participation and self-esteem has been reported by Bagley and Mallick (1997) and by Fanni, Narimani, and Ghaffari (2008) in a sample of Iranian students. On a different note, Krause (1995) found a non-linear relationship between religious coping and self-esteem⁹. Nevertheless it has been concluded that the majority of studies appear to point towards a positive association between religiosity and self-esteem (Abdel-Khalek, 2011).

A number of theories aiming to elucidate this hypothetical relationship have been postulated. Hood et al. (2009) have argued that religious attribution might help the individual meet the need for esteem in a more effective manner. Sedikides (2010) put forward the religiosity-as-social-value hypothesis that proposes that, as religiosity is kept in high regard in several societies, religious individuals are consequently highly valued members of these societies and therefore more prone to develop high self-esteem¹⁰.

1.7.3 Self-Actualisation

Maslow (1954) proposed that fulfilment of the postulated hierarchy of needs ultimately leads to self-actualisation, described as "the full use and exploitation of talents, capacities, potentialities, etc." (Maslow 1954,p.150). Batson and Stokes (2004, p.141) proposed that, although Maslow's theories might not represent an exhaustive description of human needs, they provide a "broad heuristic frame on which to stretch our thinking about the psychological functions of religion".

⁹ In this study, self-esteem seemed to be highest among older adults with the most and least levels of religious coping and to be relatively lower among elderly people with minimal engagement in religious coping.

¹⁰ Gebauer, Sedikides and Neberich's (2012) study comprising more than 180,000 participants across 11 countries seems to provide evidence consistent with this hypothesis. Their analysis appeared to indicate that although believers enjoyed higher self-esteem in countries that value religiosity, they did not differ from non-believers in countries that do not tend to value religiosity.

These authors hypothesized that religion in its diverse forms might promote or facilitate attainment of self-actualisation by helping to address the existential concerns raised by each of these needs. Research seems to provide some support for these claims with French and Joseph (1999) reporting a positive association between degree of religiosity¹¹ and self-actualisation and Watson, Morris & Hood (1990) uncovering a significant correlation between I and self-actualisation scores.

1.7.4 Conclusions

Despite these theoretical and empirical leads, there is a conspicuous dearth of research exploring the religiousness-PWB relationship through a humanistic-existential framework. Based on the aforementioned theoretical points of reference, it can be argued that, given its all-encompassing nature and far-reaching aims, religiosity may exert an influence on PWB through a set of processes concerned with growth and existential factors.

1.8 Qualitative Research

There is a relative paucity of qualitative psychological research treating this subject with most studies found in related fields like nursing; examples include Golsworthy and Coyle's (1999) research that portrayed the diverse relationship between spiritual beliefs and meaning-making following the death of a partner and Murray et al.'s (2004) study that drew attention to the significance of spiritual needs such as love and meaning for terminally ill patients. These results seem to lend further support to the hypothesis that religiosity's impact on PWB may depend on its capacity to foster a sense of meaning.

Ardelt and Koenig's (2007) use of objective hermeneutics to investigate the relationship between religiosity and subjective well-being in older adults represents a recent exception to this trend. Their study indicated that I might facilitate well-being in later life stages through the provision of a cosmic sense of purpose. While this study provides some interesting clues about how a specific form of religiosity might impact PWB, it is only the starting point of what might be a very fruitful new direction in this field.

¹¹ As measured by the Francis Scale of Attitude toward Christianity, a Likert type scale that appraises participants' affective response to God, Jesus, bible, prayer and church

I am of the opinion that the under-utilisation of qualitative methods has hampered this field's development as the various potential benefits afforded by this methodology are not being accrued. These include; a proclivity for addressing process issues (Coyle, 2008) and not diluting complex constructs, an opportunity for in-depth focus on context and the possibility of uncovering the participant's idiosyncratic ways of constructing meaning. Not surprisingly several researchers have called for a greater role for qualitative methods in the psychological study of religion (Hood et al., 2009). These methods may enable the development of new insights and understandings in topics that have already been investigated quantitatively by permitting the use of more exploratory research questions. These methods can be especially useful when investigating the question of how religiosity might influence PWB.

1.9 Rationale for Present Study

This review points towards a strong need for a refinement in the questions being asked about the relationship between religiosity and PWB, with the focus needing to shift to questions like: Which aspects of religiosity are most likely to influence PWB? Is there a link between certain aspects of religiosity and certain components of PWB?

It can be argued that these questions may only be answered by employing a more finely delineated understanding of the constructs of interest. This research will therefore base its inquiry on a multi-dimensional conceptualisation of religiosity that is theoretically linked to psychological development and health, i.e. RM. Furthermore this study will also adopt a multifaceted understanding of PWB as composed of affect and life satisfaction. Given the lack of research using RM, as conceptualised by Allport and operationalised by Leak, when exploring the religiosity-PWB link, this study will investigate whether this construct is related to a comprehensive measure of PWB in a religious population of UK adults. This study will also aim to further current work on possible explanatory mechanisms and processes underlying the religiosity-PWB relationship.

These objectives are summarising succinctly by the following research questions:

1. Is religious maturity related to psychological well-being?
2. What is the nature of this relationship?
 - 2a. Are meaning in life, self-esteem and self-actualisation mediators of this relationship?
 - 2b. What other factors and process might help explain this relationship?

2c. How can this relationship be theoretically understood?

I believe that the results of this research can be highly relevant to CoP practice. Recent surveys have indicated that, in Great Britain, 76.8% of the population considers itself affiliated to a particular religion¹² (Office for National Statistics UK, 2011), 29% describes itself as religious (YouGov, 2011) and 49% think that religion still provides critical guidance for the way we live (YouGov, 2012). While these results may be interpreted as confirming a secularisation trend in the UK, they also seem to indicate that religion constitutes a prominent aspect of life for a sizeable segment of the population. Developing greater clarity regarding the potential implications of religiosity for psychological functioning, and the mechanisms through which this effect operates, could help inform CoP practice with these individuals in various ways. Such knowledge might help the counselling psychologist to achieve a more comprehensive understanding of the client's psychological needs, draw on the potential strengths and resources that may exist within this dimension, and ultimately relate to the client in a manner that gives space to what might be a fundamental aspect of his/her life.

It seems apt to conclude this chapter by outlining how the CoP nature of this study complements the foci and objectives of this project. Firstly the humanistic philosophy underpinning CoP (Woolfe, Douglas, Strawbridge & Dryden, 2010) provides a useful background to this research as its emphasis on basing psychological theory on a holistic view of the person underscores the relevance of the religiosity dimension. Therefore a counselling psychologist who strives to understand the person as a whole and be client-led can in no way neglect the relevance of this aspect when working with religiously-oriented clients. This point is reiterated by HCPC, who in their standards of proficiency guide, state explicitly that psychologists in their pursuit of profession-specific knowledge must strive to:

“understand the impact of differences such as gender, sexuality, ethnicity, culture, religion and age on psychological wellbeing or behaviour.” (HCPC, 2012, p.26).

Secondly, CoP has historically not solely been interested in the absence of pathology, but also in personal well-being and growth (Martin & Cheung, 2011). In line with this emphasis, this research will focus on understanding the impact of religiosity on PWB in a general population with the consequent potential benefit of providing evidence that is pertinent to strength-based therapeutic practice.

¹² Refer to Appendix-A5 for the percentage distribution of UK population by religious affiliations.

Finally, CoP's particular understanding of the role of personal values in the therapeutic process highlights the need to take into the consideration the client's religious world. CoP literature argues that for psychologists to strive to be value-free is a misplaced aim (Remer & Oh, 2012) and that values form an intricate part of the therapeutic process (Parrott, 1999). This implies that competent practice is dependent on psychologists' ability to be reflective about their own values as well as sensitive to their client's values, these being non-religious and/or religious.

2. METHODOLOGICAL OVERVIEW & RATIONALE

2.1 Method

2.1.1 Mixed Methods

Mixed methods (MM) research can be defined as: “research in which the investigator collects and analyzes data, integrates the findings, and draws inferences using both qualitative and quantitative approaches or methods in a single study or program of inquiry” (Tashakkori & Creswell, 2007, p.4). This research orientation provides the opportunity of combining the advantages of quantitative and qualitative data, such as the representativeness and generalisability of the former and the in-depth and contextual nature of the latter, as well as employing both inductive and deductive research logic concurrently. These characteristics render MM research a powerful tool well-suited for the investigation of complex phenomena.

2.1.2 Rationale for Quantitative Strand

The rationale for a quantitative strand is to test for the hypothetical presence of a RM-PWB relationship by building on the promising work conducted previously. This work includes Allport’s (1950) conceptualisation of the RM construct and its subsequent operationalisation (Leak & Fish, 1999; Leak, 2002) and research on the composite structure of PWB supporting a model comprising affect and life satisfaction (Diener et al., 1999). The use of a quantitative model, employing well-developed and standardised measures of the constructs under analysis, therefore permits an investigation into the multi-faceted nature of these phenomena that is well-informed by previous advances in this field. This model has the additional aim of testing for the possible mediating role of meaning in life, self-esteem and self-actualisation in the relationship of interest. This represents a theoretically-informed exploratory step into the nature of the relationship under scrutiny.

2.1.3 Rationale for Qualitative Stand

The qualitative strand aims to arrive at a deeper understanding of the nature of the relationship of interest through an open-ended exploration of the individual’s experiences about the role religion plays in his/her life. This approach is suited for shedding light on psychological factors and

processes, that may not be adequately accounted for by the quantitative model and for providing a fuller picture of the relationship that may be more conducive to an understanding on the theoretical plane. The use of a qualitative methodology also supplies the added advantage of bringing into the equation a broader exploration of RM that could then be contrasted with a set definition of this phenomenon.

2.1.4 Rationale for Mixed Methods

A MM research orientation was therefore considered appropriate for balancing the utility of building on the valuable work already conducted on the conceptualisation and operationalisation of RM with the benefit of not restricting the investigation of this complex construct with a narrow and pre-set inquiry lens. Hence, this method plans to combine a quantitative approach employing set definitions of RM, PWB and hypothesized mediators with a more flexible qualitative framework allowing a broader understanding of RM and PWB and an open-ended search for related psychological factors and processes. It is hoped that setting in juxtaposition these two differing inquiry frameworks will, by compensating for each methodology's blind spots, generate a well-rounded search into the relationship of interest.

2.2 Philosophical Basis

Philosophically this study departs from the premise that research needs to be based on a clear philosophical assumptions-methods link. This study is also sceptical of the incompatibility thesis (e.g. Sale, Lohfeld, & Brazil, 2002) that upholds that the integration between quantitative and qualitative methods is impossible due to the incompatibility of the paradigms¹³ underlying these approaches. This extreme position reinforces a long-standing dualism and promotes reasoning in either-or terms; factors that can only constrain psychological research.

Departing from these crucial premises, this study bases itself on dialectical pragmatism (Teddlie & Johnson, 2009; Johnson & Gray, 2010) as the overarching philosophical basis for its use of MM research. Dialectical pragmatism combines philosophical pragmatism with a dialectical mode of reasoning that encourages careful consideration of multiple viewpoints (Johnson, 2009).

¹³ This study will refer to the concept of paradigm as a worldview composed of philosophical assumptions (Mertens, 2003) that include the ontological, epistemological, axiological and methodological components (Denzin & Lincoln, 2011).

Pragmatism rejects the binary, either-or choices suggested by traditional dualism such as subjectivism vs. objectivism and idealism vs. empiricism (Johnson & Onwuegbuzie, 2004). This approach assumes the ontological position of pluralism (Johnson, 2011) viewing knowledge as being both constructed and based on the reality of the world one experiences and therefore encourages a broad conceptualisation of knowledge that emphasises the distinctive relevance of different data forms¹⁴. This philosophical stance views theories through an instrumental perspective that emphasizes their reliability and applicability rather than their relative merits as claims to ‘truth’.

Dialectical thinking encourages tackling two apparently opposing perspectives by searching for super-ordinate concepts that might represent common ground between polarised standpoints. Thus dialectical reasoning responds to theoretical conflict by searching for synthesis and integration rather than binary unidimensional choices. I believe that such a mode of reasoning can be especially useful for human science research that has historically been strained by intense and polarised disputes over epistemological and methodological issues.

Adding ‘dialectical’ to pragmatism therefore emphasises the need for the MM researcher to listen and dialogue with quantitative, qualitative and other relevant perspectives and to engage in the tensions between them in order to reach the best workable solution for a research project. Dialectical pragmatism adopts a dialectic stance towards paradigms that seeks an interactive relationship between multiple paradigms within the same study as a means for garnering a better understanding of the phenomenon under investigation. Described as being most relevant in equal-status MM research (Johnson & Gray, 2010), dialectical pragmatism, in virtue of the tenets described above, provides a philosophical basis suited for making best use of the relative value and merits of qualitative and quantitative methods and reaching a coherent synthesis of the evidence they elicit.

I will hence strive to employ this stance as a guiding compass throughout the research process to ensure that the investigation of this complex psychological topic from multiple angles is grounded in a coherent philosophical framework.

¹⁴ These different data forms, rather than being viewed as competing, are seen as fitting at different points within a multifaceted conception of knowledge that includes aspects such as breath, depth, context-fit etc.

2.3 Research Design

After careful consideration a parallel mixed design (Teddlie & Tashakkori, 2009) was chosen. This design typology presupposes two parallel and relatively independent qualitative and quantitative strands (see Figure-1) with results from each thread then integrated into a meta-inference.

This MM design typology enables full use of the strengths of each research method in investigating the research topic from a different angle. Taking the first research question as an example can help outline this: the quantitative strand enables an investigation into the relationship between RM, as conceptualised by Allport and operationalised by Leak & Fish, and PWB in a sample of UK adults, while the qualitative strand enables a broader investigation of the RM phenomenon that through using wider parameters in defining this construct can answer the research question in a manner that can both challenge and give further context to the other approach. This study maintains that by thus valorising both research methods in their own right and integrating the resultant sets of data at meta-inference, a parallel mixed design can generate rich evidence, rendering more meaningful results.

For clarity, the term research will henceforth be used to refer to the overall project, while Study-1 and Study-2 will refer to the quantitative and qualitative strand respectively.

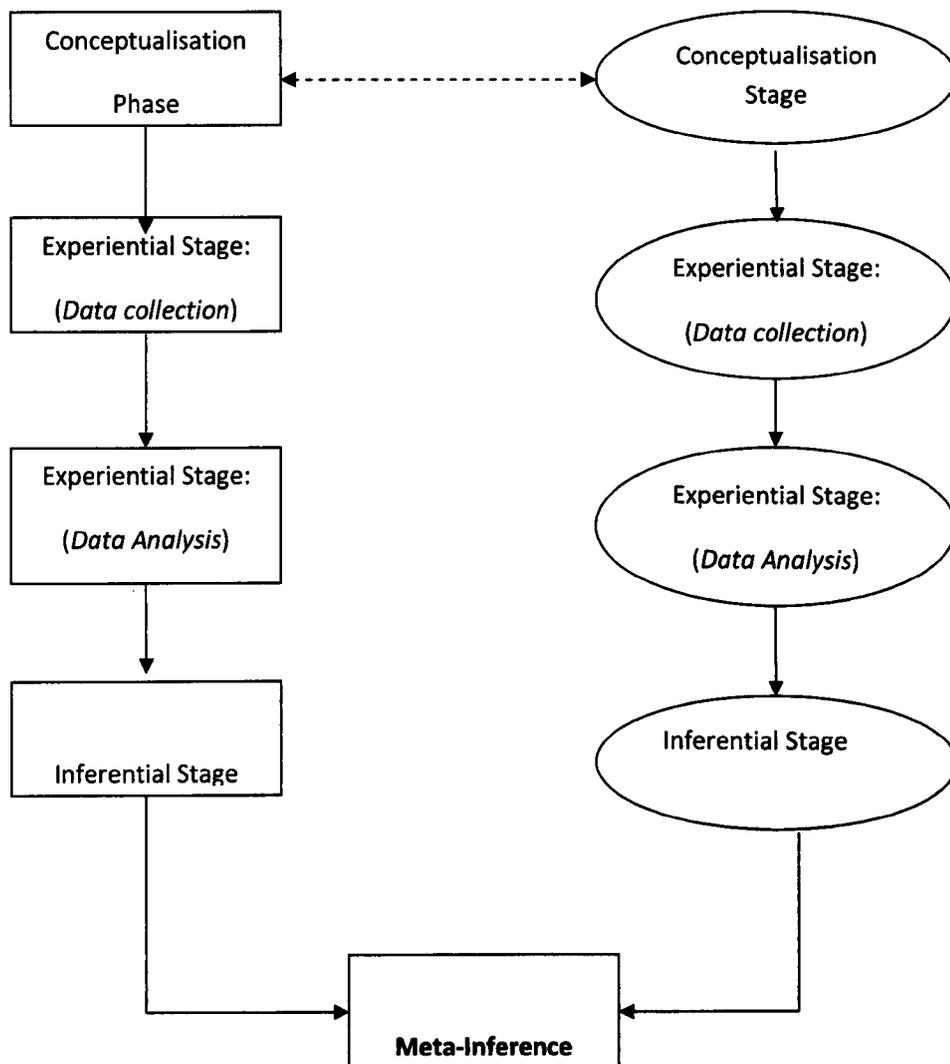


Figure 1. Graphical illustration of parallel mixed design.

2.4 Rationale for Grounded Theory

Grounded theory (GT) was deemed most suitable for the qualitative strand due to the complementarity between its defining characteristics, such as theory development (Hood, 2007) and explanatory focus (Glaser & Strauss, 1967), and this strand’s research goals.

GT is an approach that aims to generate theory from data through the use of systematic procedures. GT’s value “lies in its ability not only to generate theory but to ground that theory in data” (Strauss & Corbin, 1998, p.8) and is therefore considered to be a particularly suitable

approach for theory-building when the topic is scantily researched and no theoretical basis has been developed (Strauss & Corbin). This strength fits neatly with the lack of research into the relationship of interest and the aim of the qualitative strand to search for a theoretical understanding of the nature of this relationship.

Theorising in GT has been defined by Strauss and Corbin (1998, p.25) as “the act of constructing...from data an explanatory scheme that systematically integrates various concepts through statements of relationship”. This focus on specifying relationships between categories has some similarities with the emphasis on searching for associations between variables found in quantitative models. I therefore believe that such a scheme would provide a good basis of comparison against the quantitative mediation model, thus setting the stage adequately for a productive meta-inference stage. Finally, given its strong reliance on inductive logic this approach, by complementing the hypothetico-deductive emphasis in the quantitative strand, augments this inquiry’s pluralistic nature as inspired by the underlying philosophical stance of dialectical pragmatism.

Constructivist GT (Charmaz, 2006) was considered most suited to the aims of the qualitative strand and this research’s philosophical stance. Charmaz’s constructivist approach differentiates itself from traditional postpositivist GT by claiming to offer “an interpretive portrayal of the studied world, not an exact picture of it” (Charmaz, 2006, p.10). Based on a constructivist paradigm this approach contends that: “Data do not provide a window on reality. Rather, the ‘discovered’ reality arises from the interactive process and its temporal, cultural, and structural contexts” (Charmaz, 2000, p.524). This approach emphasizes the shared interactions of researcher and participants who together co-construct culturally and socially-specific meanings. In this regard, this version is congruent with the rationale for the qualitative strand; an open-ended search for information-rich and context-tight data. Furthermore, given this research’s preference towards a dialectical mode of combining inferences, the constructivist paradigm, being based on opposing epistemological and ontological assumptions, is better suited for setting up a dialectic with the positivist quantitative strand.

Given Study-2’s role as a single strand within a parallel mixed design, it was beyond the scope of this study to undertake a full constructivist GT study employing the procedure of theoretical sampling¹⁵. Therefore this study will utilise a GT approach modelled on Charmaz’s (2006)

¹⁵ The selection of cases based on their appropriateness for testing theories emerging from data analysed.

version that does not seek the theoretical saturation¹⁶ of the categories emerging from data, but aims at unravelling what available data suggests, from a theoretical perspective, in response to the research questions.

2.5 Sampling

The population for this study consisted of adult UK residents from a Catholic or Protestant religious background. This research targeted individuals aged 18 years or older, since RM hypothetically has a strong developmental dimension and this study's interests pertain to the phenomenon in an adult population. A Catholic/Protestant religious background was set as another criterion as the RM construct was conceptualised (Allport, 1950) and the CUV-4 scale developed and tested within these traditions (Leak 2002; Leak & Fish, 1999)¹⁷. Finally a UK sample was used to maximise the relevance of this research's inferences for CoP practice in this country.

Given that practical constraints made any form of probability sampling unfeasible, a combination of convenience and volunteer sampling was deemed adequate to recruit participants from the research population for Study-1. To achieve the appropriate statistical power, a sample size of 91¹⁸ participants was the minimum target set for Study-1. Issues of generalisability were also considered and to maximise this strand's external validity attention was given to matching the characteristics of Study-1's sending and receiving contexts (Lincoln and Guba, 1985). Therefore in order to maximise the initial sample's heterogeneity and thus ensure a closer match with the research population, a diversity of participant sources, including various churches, universities and religious organisations, were contacted.

Subsequently purposive sampling was employed for Study-2 with the aim of selecting a set of information-rich cases well-suited to investigating this inquiry's exploratory research questions. To reach this objective, maximum variation sampling was employed to select a sub-set of participants from the quantitative sample. This sampling strategy has been described as the selection of a range of cases that provide a broad variation on dimensions of interest, thus

¹⁶ In theory, the point where further data collection ceases to yield new conceptual insights.

¹⁷ Given that a thorough understanding of the relationship between RM and PWB necessitates research across religious affiliations, it is hoped that this project will serve as a useful starting point that encourages further investigation into the RM phenomenon and its psychological correlates across diverse religious backgrounds.

¹⁸ Based on an a priori sample size test for multiple regression for power=.8, a medium effect size and 5 predictors.

permitting a wide diversity of comparisons (Miles & Huberman, 1994; Patton, 2002). Given that RM and PWB are this research's main dimensions of interest, a range of possible combinations involving these factors were used as a blueprint for selecting the most diverse and meaningful sample (see Table-2).

Table 2

Initial Selection Criteria for Qualitative Strand

- | |
|---|
| <ul style="list-style-type: none">• Case-1:High RM, low PWB• Case-2:Low RM, high PWB• Case-3:High RM, high PWB• Case-4:Low RM, low PWB |
|---|

In the bespoke design employed, while the two strands were kept separate until the meta-inference stage, a point of commonality is found in the qualitative sample being purposively selected from the quantitative sample. This design characteristic permitted the use of Study-1's data to enable the implementation of the described selection procedure. In this regard this research was guided by Teddlie and Yu's (2007) assertion that combining creatively different sampling techniques in answering a study's questions is one of the defining characteristics of MM research.

3. STUDY-1 RESEARCH PROCEDURES

3.1 Overview: Design and Aims

The collection of quantitative data from a large sample using self-report questionnaires and subsequent statistical analysis was utilised to investigate the relationship between RM, PWB and related factors in an adult UK population. For this purpose RM and its sub-components, along with a number of religiosity indicators (i.e. church attendance, religious organisation involvement, religiosity and spirituality self-rating), were treated as this study's independent variables (IVs), happiness-depression and life satisfaction were considered as dependent variables (DVs) and life regard, self-esteem and self-actualisation as mediators.

3.2 Materials

3.2.1 Demographics

A demographic sheet (Appendix-B) designed specifically for this research asked participants to indicate their gender, age, marital status, ethnic background, occupational status, educational level, religious affiliation, church attendance and religious organisation involvement.

3.2.2 Religious Maturity

This IV was measured using the Creighton Religious Attitudes Questionnaire (CUV-4; Leak & Fish, 1999) (Cronbach's alpha for initial version¹⁹=.91) which consists of 30 items utilising a 5-point scale ranging from 1=strongly disagree to 5=strongly agree. Total scores vary from 30-150 with higher scores indicating greater RM. This scale measures four RM factors; master-motive, complexity-of-beliefs, openness and heuristic quality.

3.2.3 Self-actualisation

This construct was measured using the Short Index of Self-Actualization (SISA; Jones & Crandall, 1986) (Cronbach's alpha=.68; McLeod & Vodanovich, 1991). The SISA is a 15-item measure utilising a 6-point Likert scale ranging from 1=strongly disagree to 6=strongly agree.

¹⁹ RM-1 scale (Leak & Fish, 1999).

Total scores range from 15-90 with high scores indicative of greater self-actualization. The SISA was considered ideal for this research's purposes as it's a shortened adaptation of the most widely accepted self-actualisation measure; the Personal Orientation Inventory (POI; Shostrom, 1964). This index correlated significantly with the POI (Jones & Crandall, 1986) and displayed significant associations in the expected directions with boredom proneness, perfectionism and creativity (Prosnick, 1999). Furthermore this measure has reported positive correlations with self-esteem (Prosnick) and purpose in life (Ebersole, 1991).

3.2.4 Self-Esteem

This construct was measured using the Rosenberg Self-Esteem scale (RSE; Rosenberg, 1965) (Cronbach's alpha ranging from .77-.88, see Blascovich & Tomaka, 1993; Rosenberg, 1986). The RSE was designed to provide a one-dimensional assessment of global self-esteem. This 10-item scale utilises a 4-point Likert scale from strongly agree to strongly disagree. The scale's total score ranges from 10-50, with higher scores representing greater self-esteem. The RSE is probably the most widely used self-esteem measure in the social sciences and has demonstrated satisfactory construct validity by correlating negatively with depression (Rosenberg, Schooler, & Schoenbach 1989) and anxiety (Bagley et al., 1979).

3.2.5 Meaning in Life

The Life Regard Index-adjusted version (LRI; Battista & Almond, 1973) (Cronbach's alpha=.86) was employed to measure this construct. This 28-item index was designed to measure the degree of experienced meaningfulness of one's life. The adjusted version follows Debats (1998) recommendation of using a 3-point scale instead of the original 5-point scale and randomising the original sequential presentation of negatively and positively worded items. Total scores vary from 28-84 with higher scores indicating a greater degree of meaning in life. The LRI has demonstrated a significant association with other measures of this construct²⁰ and has been found to be positively related to self-esteem (Battista & Almond, 1973) and positive affect and life satisfaction (Chamberlain & Zika, 1988).

²⁰ The Purpose in Life (PIL; Crumbaugh & Maholick, 1964) and the Sense of Coherence (SOC; Antonovsky, 1979) scales (Chamberlain & Zika, 1988).

3.2.6 Affect

While from a theoretical perspective the relationship between positive and negative affect remains a contentious issue, the use of the Depression-Happiness Scale (D-HS; McGreal & Joseph, 1993) (Cronbach's $\alpha = .93$) to assess both these constructs was considered a valid option. The D-HS is a bipolar scale that purports to be a continuous measure of negative to positive affect. D-HS' convergent validity with both scores on the Beck Depression Inventory (McGreal & Joseph, 1993) and happiness and life satisfaction measures (Lewis & Joseph, 1995), provided empirical support for the parsimonious alternative of employing this scale as a single measure rather than employing two separate inventories.

The D-HS is a 25-item self-report that asks respondents to rate how they have felt over the past week on a 4-point scale. Total scores range from 0-75 with higher scores indicating greater frequency of positive affect and lower frequency of negative affect. For the rest of this report the terms emotional well-being and depression-happiness will both be used to refer to D-HS' output.

3.2.7 Life Satisfaction

The Satisfaction with Life Scale (SWLS; Diener, Emmons, Larsen, & Griffin, 1985) (Cronbach's $\alpha = .87$) was employed to measure life satisfaction. The SWLS is a five item self-report measure that assesses the respondent's global evaluation of satisfaction with life. This scale does not assess satisfaction with specific life domains such as health and finances, but instead allows respondents to integrate these domains in their evaluations. Ratings are made on a 7-point Likert scale. Scores range from 5-35 with higher scores indicating higher satisfaction with life. The SWLS was chosen because of its satisfactory correlations with other measures of subjective well-being ranging from .58 to .75 (Joules, 2007) and its good level of discriminant validity from emotional well-being measures (Pavot & Diener, 1993).

3.3 Recruitment Procedures

Participation took place online; the consent form, information sheet, inventories and debriefing form were uploaded on a specialised website (www.surveymonkey.com) which could be accessed through a link. Questions asking for age and residency were used to ensure all participants were adult UK residents. Responses not meeting these criteria were not included in the final sample. As suggested by Kraut et al. (2003) IP addresses were tracked to guard against multiple

responses. Literature has suggested that the use of internet for participant recruitment is an effective technique for providing a large and diverse sample at low cost (Kraut et al., 2003) and if sampling control is provided, internet-based questionnaires can be a suitable alternative to traditional paper-based measures (Riva, Teruzzi, & Anolli, 2003).

Initially, various participant sources were contacted by email and informed about this study's purpose and procedure in order to ascertain their willingness to collaborate and allow recruitment from their members. These sources consisted of Christian chaplaincies at various London universities, university student unions, Churches within London, lay Christian organisations (e.g. prayer groups), professional associations (e.g. BACIP²¹) and psychology of religion courses at UK universities. Subsequently the contact person for those groups and organisations that agreed to collaborate contacted their members by email informing them of the study's purpose and providing the link for participation.

Through this link potential participants could access the study sequentially commencing from the information sheet ending with the debriefing form. The additional information page had the other purpose of enquiring about the participant's willingness to participate in an interview about the same subject-matter. Participants were free to exit the survey at any stage and then re-enter and complete it at a future date. Following data collection completion the survey was terminated and the link closed.

3.4 Ethical Considerations

Prior to commencing data collection ethical clearance was received from LMU's Research Ethics Review Panel (Appendix-D).

To ensure protection of participants current severe mental health problems was the only exclusion criterion set for Study-1. The information sheet (Appendix-E) explained issues of confidentiality, anonymity as well as the exclusion criterion. Agreeing to the consent form (Appendix-F) enabled participants to access the exclusion criterion question (Appendix-G), while a negative response directed them to the survey's end²². Answering negatively to the exclusion criterion question²³ enabled participants to move to the next stage and complete the inventories, while a positive

²¹ British Association of Christians in Psychology.

²² As the survey could be exited and re-entered at any stage participants were free to take as much time as they required to consider their participation.

²³ "Do you feel that you are currently experiencing severe mental health problems?"

response directed them towards a debriefing sheet (Appendix-H) re-explaining the reason behind their exiting the study.

To ensure right of withdrawal and preserve anonymity, before accessing the inventories, participants were asked to enter an identification code which they could provide via e-mail to withdraw from the study. Upon completion participants automatically accessed a debriefing sheet (Appendix-I) listing potential sources of support in case participation caused distress.

3.5 Sample Characteristics

138 UK residents participated in the study, the characteristics of which are summarised hereunder:

Table3

Summary of Study-1's Sample Characteristics

<i>Demographic Variable</i>	<i>Category</i>	<i>N</i>
Religious Affiliation	Catholic	61
	Church of England	50
	Protestant	25
	Non-denominational	2
Gender	Male	45
	Female	93
Age	<i>Mean =</i>	43 years
Ethnicity	White	132
	Black/Black British	1
	Asian/Asian British	4
Employment Status	Student	23
	Employed	96
	Retired	19

3.6 Statistical Analysis

Following data collection, results were compiled and analysed using SPSS Version 18.0 and the following statistical procedures employed.

Initially, the frequencies of all demographic variables were computed to explore the distribution of these factors across the study's sample. Subsequently, the means and standard deviations of life satisfaction, depression-happiness, RM and its factors across the demographic variables were calculated to elucidate possible interactions between these factors. Inter-correlations between all demographic, religiosity and psychological variables were also calculated.

To investigate the variance contribution of RM and other religiosity variables on PWB indicators, multiple regression analysis was performed to statistically ascertain which predictor variables had the greatest effect on life satisfaction and affect and thus shed light on the religiosity variables that have the strongest association with PWB. Finally, bootstrapping tests were employed to provide estimates of the magnitude and significance of the hypothesised causal connections between the religiosity variables, postulated mediators and PWB indicators.

4. STUDY-1 RESULTS

4.1 Transformation of Raw Data

Certain procedures were required to prepare raw data for statistical analysis. Due to the low response rate for particular categories, certain answers on the demographic sheet were grouped to facilitate statistical analysis. For Marital Status, divorced, widowed and separated categories were grouped under Other. For Ethnicity, Asian/Asian British, Black/Black British and Mixed were grouped under Other. For Church Attendance, “sometimes” and “never” were grouped under “less than once a month”. Answers were scored according to inventories’ instructions to calculate scores for RM and its dimensions, life regard, self-esteem, self-actualisation, depression-happiness and life satisfaction.

Table 4

RM Dimensions

Factor-1 – *Master-motive*

Factor-2 – *Complexity-of-beliefs*

Factor-3 – *Openness*

Factor-4 – *Heuristic quality*

4.2 Descriptive Statistics

Firstly the descriptive statistics for Study 1’s demographic variables were explored. Table-J1 indicates a balanced distribution of characteristics within the study’s sample in terms of age and marital status, but a less satisfactory distribution among gender, educational level and ethnicity, with the female gender, university-level education and white ethnicity categories being over-represented in Study-1’s sample. The total means and standard deviations (SDs) for the religious and psychological measures and the means and SDs for all these variables across the demographic groups were then calculated (see Table-J2).

The average for the D-HS scores (51.28) was higher than the means of 46.2 (SD=12.3) (McGeal & Joseph, 1993) and 47.2 (SD=11.7) (Walsh, Joseph, & Lewis, 1995) obtained previously in a

student and non-student sample respectively. The total mean for life satisfaction scores (25.17) was towards the high end of the range of means of 14.4 to 27.9 obtained by an extensive list of studies using the SLWS (Pavot & Diener, 1993) and slightly higher than the mean of 24.1 reported in an English population (Hayes & Joseph, 2003).

The RM means across gender and marital status indicated no notable variability but, interestingly, the means for this IV across age seemed to indicate a U-shaped relationship between age and RM. The lowest means for the RM factors were always obtained in the 31-45 bracket except for openness. All factors though displayed a different trajectory of scores across the age categories with only heuristic quality exhibiting a linear although slight increase in scores across age. There was also a notable difference in RM scores between college and university educational level categories. This difference is evident to varying degrees in all 4 factors. This result though could be confounded by age as participants who attended university tended to be on average 8 years younger than their counterparts who finished their studies at college. Interestingly in terms of religious affiliation there is a noteworthy difference between the RM scores for Catholic and Church of England categories, with Catholics scoring on average 7.56 points higher. Further analysis reveals that this disparity results from differences in master-motive and openness scores.

Whereas there was a negligible difference in scores on PWB indicators across gender, educational level and religious affiliation, some notable differences were reported for other demographics. The largest variation in depression-happiness means across demographic groups was found in occupation status, with the Retired grouping obtaining higher mean scores than the Student grouping. In terms of age, the emotional well-being means across age categories display a linear progression with the biggest mean difference occurring between the 18-30 and 61+ categories. The largest difference in life satisfaction means across demographic groups was found in marital status with the Other category²⁴ obtaining lower mean scores than the Married grouping. Another difference in life satisfaction scores of note was in Occupation Status with the retired category obtaining higher scores than both employed and student categories. Of note, ANOVA tests comparing depression-happiness and life satisfaction scores between demographic groups only revealed significant differences in life satisfaction scores across Marital Status and Occupation Status. In the former's case, though, these ANOVA results need to be interpreted with caution as the Other category is under-represented (N=11).

²⁴ This category includes the separated, divorced and widowed groupings.

4.3 Correlations

4.3.1 Intercorrelations

The correlations between continuous demographic variables, RM, postulated mediators and PWB indicators were calculated using Pearson correlation. Table-J3 illustrates a 17x17 matrix outlining the resultant correlations.

The intercorrelations between RM factors were all significantly positive, except for complexity-of-beliefs, that failed to show any association with master-motive or heuristic quality. The RM factors that were inter-correlated, i.e. Factor 1, 3 and 4, exhibited a medium level of correlation ($r=0.274-0.309$). RM displayed a strong relationship with other religiosity measures; significant positive correlations were reported between this variable and church attendance, religiosity self-rating, spirituality self-rating and religious organisation. In terms of the RM factors, only complexity-of-beliefs reported non-significant correlations with other religiosity variables (this variable solely reporting a positive association with spirituality self-rating), while master-motive displayed markedly more robust correlations with all these measures.

Correlations indicated no significant association between RM and the two PWB indicators, but revealed some associations of note between its sub-factors and these indices. Master-motive was positively correlated with depression-happiness ($r=0.168$, $p<0.5$), while from an exploratory point of view, openness was negatively correlated to depression-happiness ($r=0.145$, $p<0.10$ two-tailed test, $p<0.05$ one-tailed test). On the other hand, intercorrelations between the other religiosity measures and the PWB indicators revealed that religiosity self-rating ($r=0.201$, $p<0.5$) and church attendance ($r=0.230$, $p<0.1$) were both positively correlated to depression-happiness.

RM showed a positive association with life regard but reported no significant correlations with the other hypothesised mediators. Openness and master-motive were the only factors that correlated with the hypothesised mediators: master-motive being positively related to both life regard and self-actualisation and the former being negatively related to self-esteem. As theoretically expected, depression-happiness and life satisfaction were highly positively correlated ($r=0.59$, $p<0.001$).

In line with the indications offered by the aforementioned analysis of mean differences, the only association reported between gender, age and ethnicity and the PWB indicators was a correlation

between age and depression-happiness ($r=.23$, $p<0.01$). Age was also positively related to master-motive ($r=.17$, $p<0.05$) and heuristic quality ($r=.21$, $p<0.05$), but unexpectedly not significantly correlated to complexity-of-beliefs and negatively correlated to openness ($r=-.21$, $p<0.05$).

4.3.2 Partial Correlations

To test for the potential confounding effect of age, partial correlations controlling for this factor were run between the religiosity and PWB variable pairs that displayed a significant correlation. Both master-motive and openness ceased to be significantly correlated with depression-happiness when controlling for age. Conversely religiosity self-rating and church attendance remained positively correlated to depression-happiness. Given master-motive's and openness' opposing relationship with depression-happiness, partial correlations were conducted between the former and life satisfaction and depression-happiness controlling for latter, and between the latter and the same two indicators controlling for the former. Results revealed significant correlations between both RM factors and both PWB indicators (see Table-5, 6).

Table 5

Partial Correlations controlling for Master-motive

		Depression-happiness	Life Satisfaction
Openness	Pearson Correlation	-.202	-.183
	Significance	.009	.016

Table 6

Partial Correlations controlling for Openness

		Depression-happiness	Life Satisfaction
Master-motive	Pearson Correlation	.219	.181
	Significance	.005	.017

When running the same tests with age as an additional control to test the effect of this confounding variable on the pattern of relationships uncovered, master-motive remained significantly positively correlated to both PWB indicators, whilst openness remained significantly negatively correlated to both PWB indicators.

Table 7

Partial Correlations controlling for Master-motive and Age

		Depression-happiness	Life Satisfaction
Openness	Pearson Correlation	-.158	-.162
	Significance	.033	.030

Table 8

Partial Correlations controlling for Openness and Age

		Depression-happiness	Life Satisfaction
Master-motive	Pearson Correlation	.181	.164
	Significance	.018	.028

When testing the significant correlations uncovered between RM dimensions and hypothesized mediators by running partial correlations controlling for age all associations remained significant. Master-motive remained positively correlated to both life regard and self-actualisation, whilst openness remained negatively correlated to self-esteem.

4.4 Regression Analyses

In order to shed more light on the relationship between RM, religiosity and PWB, a number of multiple regression analyses were conducted. In all these analyses the majority of regression

assumptions²⁵ were met and the ratio of cases to amount of IVs was also adequate, with the maximum of six predictors used for stepwise regression well within Tabacknick and Fidell's (2007) recommendation of 8 cases per predictor+50.

Firstly, separate multiple regression analyses, using the Enter method and employing all RM factors and other religiosity measures as predictors, were conducted on both PWB indices. These tests indicated that openness (Adj.R², 2.10%, p=0.049), church attendance (Adj.R², 4.60%, p=0.007) and religiosity self-rating (Adj.R², 3.30%, p=0.018) were the only significant predictors for depression-happiness, while there were no significant predictors among the religiosity variables for life satisfaction. Multiple regression on both PWB indicators employing Factor 1 and 3 as predictors were also performed using the Enter method. In the case of depression-happiness this model was able to explain 5.4 % of the overall variance (Adj.R², 5.4%), which was found to significantly predict outcome, F (2,135) =4.914, p<0.01. In the case of life satisfaction, this model was able to explain 3.7 % of the overall variance (Adj.R², 3.7%), which was found to significantly predict outcome, F (2,135) =3.626, p<0.05.

Stepwise regression employing all religiosity variables correlated to depression-happiness was carried out to identify the most predictive model for this PWB indicator. This method was utilised as it has the advantage of assessing the predictive power of each variable while statistically controlling the effects of the other predictors (Gardner, 2001). The most significant model for depression-happiness comprised openness and church attendance (8.30%, p=0.001). Openness was significantly associated with lower emotional well-being scores (t=-2.550, p<0.05), while church attendance was significantly associated with higher depression-happiness scores (t=3.351, p=0.001). Power analysis indicated a medium effect size of 0.11 and a high power level of 0.93

Using the Enter method, the most significant regression model for life satisfaction was composed of openness and religiosity self-rating (3.80%, p=0.027). Again higher scores on openness were associated with lower scores (t=-2.058, p<0.05), while scores on religiosity self-rating displayed a positive relationship with life satisfaction (t=-2.187, p<0.05). This test though exhibited a small effect size of 0.05 and was marginally underpowered (.68).

Given age's correlation with depression-happiness, stepwise regressions, including this demographic variable along with the two significant models outlined above, were conducted. In

²⁵ The assumptions for linearity, multicollinearity, homoscedascity, multivariate outliers in predictors and independent errors.

both cases age did not provide any increase in predictive power and was excluded from the test output.

Beta values indicated a positive relationship between master-motive, religiosity self-rating and church attendance and PWB indicators and a negative relationship between openness and PWB indicators.

4.5 Mediation Analyses

Bootstrap tests were conducted to investigate whether self-esteem, life regard and self-actualisation mediate the relationships uncovered between religiosity variables and PWB indicators.

4.5.1 Single Independent Variables

Depression-happiness

Running the bootstrap test using master-motive, religiosity self-rating and church attendance in turn as the IVs, the three mediators and depression-happiness as the DV, provided the same result pattern with a significant positive total effect, a non-significant direct effect and significant total indirect effect, with only life regard emerging as a unique mediator.

Running the bootstrap test, using openness as the IV, the three mediators and depression-happiness as the DVs, indicated no significant total, direct or indirect effect, but self-esteem emerged as a unique mediator.

Life Satisfaction

Running the bootstrap test, using master-motive, religiosity self-rating and church attendance in turn as the IVs, the three mediators and life satisfaction as the DV, all showed the same result pattern: a non-significant total effect, a non-significant direct effect, but a significant indirect effect with life regard emerging as the only unique mediator. Running the test with openness as the IV indicated no significant total, direct or indirect effect, but self-esteem emerged as a unique mediator.

Further bootstrap tests using single mediators confirmed the roles of life regard and self-esteem as mediators.

Table 9

Summary of Bootstrap Tests using Single IVs and Single Mediators

IV	Mediator	DV	Total Effect	Direct Effect	Specific Indirect Effect
Openness	Self-Esteem	Depression-happiness	NS	NS	Sig
Master-motive	Life Regard	Depression-happiness	Sig+	NS	Sig
Church Attendance	Life Regard	Depression-happiness	Sig+	NS	Sig
Religiosity Self-Rating	Life Regard	Depression-happiness	Sig+	NS	Sig
Openness	Self-Esteem	Life Satisfaction	NS	NS	Sig
Master-motive	Life Regard	Life Satisfaction	NS	NS	Sig
Religiosity Self-Rating	Life Regard	Life Satisfaction	NS	NS	Sig
Church Attendance	Life Regard	Life Satisfaction	NS	NS	Sig

4.5.2 Multiple Independent Variables

When including 2 IVs (i.e. openness and church attendance the most significant predictors of depression-happiness) and depression-happiness as the DV:

- With openness as the IV and church attendance as the covariate, results showed a significant negative total effect, a significant direct effect and an non-significant total indirect effect although self-esteem emerged as a unique mediator
- With church attendance as the IV and openness as the covariate, results showed a significant positive total effect, a non-significant direct effect and a significant total indirect effect with only life regard emerging as a unique mediator

Including openness and master-motive/religiosity self-rating as the IVs and life satisfaction as the DV in the bootstrap test yielded a similar pattern of results:

- With openness as the IV and master-motive/religiosity self-rating as the covariate, results showed a significant negative total effect, but a non-significant direct effect and a non-significant total indirect effect with no mediators emerging as significant.
- With master-motive/religiosity self-rating as the IV and openness as the covariate, results showed a significant positive total effect, a non-significant direct effect and a significant total indirect effect with only life regard emerging as a unique mediator.

4.5.3 Master-motive and Openness as Covariates

Given master-motive's and openness' opposing associations with PWB indices, these variables were entered alternatively as a covariate in the bootstrap test. Their inclusion as covariates results in a straightforward picture of the effect of these IVs on the PWB indicators, as well as an increase in the effect size of the indirect effect through life regard or self-esteem (see Table-11). These results seem to indicate that openness acts as a moderator of the positive relationship between master-motive and PWB via life regard and master-motive functions as a moderator of the negative relationship between openness and PWB via self-esteem.

Table 10

Summary of Bootstrap Tests using Master-motive and Openness as Covariates

Covariate	IV	Mediator	DV	Total Effect	Direct Effect	Specific Indirect Effect
Master-motive	Openness	Self-Esteem	Life satisfaction	Sig-	NS	Sig
Master-motive	Openness	Self-Esteem	Depression-happiness	Sig-	NS	Sig
Openness	Master-motive	Life Regard	Life satisfaction	Sig+	NS	Sig
Openness	Master-motive	Life Regard	Depression-happiness	Sig+	NS	Sig

5. STUDY-1 DISCUSSION

5.1 Summary of Statistical Results

The statistical analysis conducted provided a number of noteworthy findings (see Appendix-K for a summary) that warrant deeper analysis.

RM was globally not significantly correlated to PWB indicators. Master-motive was correlated positively and openness was correlated negatively to affect, while no RM factor was significantly associated with life satisfaction. However, partial correlations revealed that master-motive was positively correlated to both PWB indices when controlling for openness, and openness was negatively correlated to both indicators when controlling for master-motive.

Contrary to this inquiry's interpretation of literature, church attendance and religiosity self-rating, despite being measured in a more rudimentary fashion, were more strongly correlated to affect than RM or any of its factors and the latter was the only religiosity measure significantly correlated to life satisfaction. From the religiosity measures, church attendance and openness emerged as the most significant predictors of depression-happiness, while the latter and religiosity self-rating emerged as the most significant predictors of life satisfaction. Mediation analyses indicated that the positive relationship between the religiosity variables of master-motive, church attendance and religiosity self-rating and PWB indices was explained by an indirect effect through life regard. The negative relationship between Factor-3 and PWB indicators was likewise explained by an indirect effect through self-esteem.

5.2 Religious Maturity

5.2.1 Introduction

According to Allport's theories (1950), RM should be the religiosity aspect that is most strongly linked to psychological growth and by implication PWB. However, two out of the four RM factors seemed to be unrelated to PWB, while participants scoring higher on openness displayed relatively lower PWB scores.

These results contrast with the scant available research regarding the RM-PWB relationship that evidenced a positive relationship between these two constructs. To this study's knowledge though, the CUV-4 scale has never been used to investigate the religiosity-PWB relationship. As such, the Study-1's evidence offers an insightful starting point in the employment of a RM construct, based on Allport (1950) influential theories about religiosity, in investigating the relationship of interest and possible underlying psychological mechanisms. Ensuing sections will explicate on the implications of Study-1's findings in the light of existing literature.

5.2.2 Religious Maturity Conceptual Framework

A fruitful initial analytic step consists in a careful investigation of CUV-4's operationalisation of the RM construct and its dimensions. Scrutiny of the scale construction process (Leak & Fish, 1999) highlights the emphasis placed on content validity in the initial scale development phase and therefore points towards a tight bind between the CUV-4 and Allport's RM conceptualisation. Nevertheless, the RM dimensions as described by Allport's rich language (1950) are certainly difficult to operationalise and might even overlap conceptually. In fact none of the RM factors extracted after exploratory factor analysis are a pure measure of any of the original 6 RM dimensions postulated by Allport (Leak, 2002). This might raise doubts about the conceptual rigour of the RM factors postulated by the CUV-4 scale.

However, despite possibly not being a clear reflection of the RM dimensionality Allport had in mind, in Study-1 these factors appeared to relate with other constructs in a fairly consistent way. The intercorrelations reported seem to indicate that master-motive, openness and heuristic quality factors are related but fairly independent religiosity variables that display diverse associations with psychological constructs. On the other hand, complexity-of-beliefs' lack of correlation with several other religiosity measures raises doubts about its validity as a RM factor and as a *religious* measure per se.

Having provided some clarification about the structure of the RM construct employed in Study-1, this discussion will proceed to investigate the relationship uncovered between RM factors and PWB.

5.2.3 Master-motive and Openness

Master-motive's positive relationship with PWB is not surprising given the conceptual overlap between this RM dimension and an intrinsic religious orientation and the wealth of research associating I to PWB (McCullough & Larson, 1992; Lewis et al., 2005; Byrd et al., 2007). Diversely, openness' negative link to affect and life satisfaction runs contrary to the conceptualisation around this factor and RM as a whole. Given this dimension's established relationship with the Quest scale (Leak & Fish, 2002), considering available literature regarding Q may aid in the interpretation of these results.

Researchers (Donahue, 1985; Krojetin, McIntosh, Bridges, & Spilka, 1987) have argued that Q can be better considered as a measure of religious conflict rather than of open-minded religious searching and empirical evidence has associated Q with identity confusion rather than attainment of an integrated identity (Watson, Morris, Hood, Milliron, & Stutz, 1998). It might, therefore, be useful to analyse whether these considerations also apply to openness. Theoretically, Factor-3 should capture the individual's journey along his/her faith and religious-existential issues and the degree of differentiation and complexity of thought achieved in relation to the latter (Leak & Fish, 2002). While these attributes fit neatly within a comprehensive RM conceptualisation, there may be some potential pitfalls in how this factor is measured.

The way some of the questions about Factor-3 are framed (e.g. question 15 and 17 on the CUV-4 scale) seem to assume that there is no progression in this journey; that a religious mature person should by definition be constantly '*struggling*' and '*fighting*' with these issues. This assumption is debatable as, while adopting a constant open and reflective orientation, the individual might arrive at a stage where s/he has reached a relatively satisfactory resolution to religious and existential issues s/he struggled with previously. In its current format this sub-scale does not differentiate between persons who are not '*struggling/fighting*' because they have taken as given certain religious precepts and those whose relative lack of '*struggling/fighting*' is the fruit of intense reflection and discernment. Crucially in Factor-3's operationalisation, there seems to be a lack of precise differentiation between doubt and a reflective stance. While a reflective and open-ended stance is a disposition that might accompany different levels of certainty with religious beliefs and issues, doubt relates to one's relationship with a set of beliefs at a point in time. A number of this scale's questions may be measuring present and historical levels of doubt about

one's religion²⁶ more than a general reflective open-ended stance or critical tendency towards religious beliefs²⁷. The choice of terminology also seems to lean towards simply measuring doubt. Allport (1950) does not actually use words like *struggle* and *fighting* in his explication of the differentiation dimension; he speaks about an ability to doubt and an awareness of the healthy and necessary role of doubting. These terms, and by consequence the questions measuring Factor-3, do not seem to capture this spirit.

To summarise, the measurement of openness seems to make use of questions to assess current or historical presence of doubt, rather than a religious disposition that accepts doubting as inherent and beneficial. Consequently, this scale may be capturing to a greater extent religious doubt or even possibly conflict, than an RM aspect. The negative correlation between openness and age appears to lend weight to the hypothesis that this factor might actually be tapping into a maturation stage characterised by religious doubt, rather than a reflective religious orientation characterised by a coherent and realistic belief system informed by critical tendencies.

5.2.4 Relationship between Master-motive and Openness

The relationship uncovered between RM and PWB was characterised by the opposite associations of master-motive and openness, with partial correlations indicating that these RM factors seem to balance each other in terms of psychological outcomes.

The positive correlation between these two factors indicates that high levels of master-motive and openness can exist concurrently. Following the thesis that openness might be tapping into religious doubt, this statistical association might be indicating that, psychologically speaking, a scenario, in which the adoption of a religious outlook as a motivational framework is concurrent with doubt about this outlook's validity, is not uncommon. It might, therefore, be fruitful for research to examine how master-motive and religious doubt interact to seemingly produce a neutral outcome.

Based on this reasoning, the result pattern involving master-motive, openness and PWB indicators could indicate that setting religion as a central and autonomous motivational force in life, in conjunction with a relative satisfactory outcome around religious-existential issues leads to the strongest psychological benefits.

²⁶ E.g. *I consider myself religious, but I am still struggling with, and working through, certain religious issues.*

²⁷ E.g. *I don't feel much need to reflect on my religious orientation to life; my religious questions have already been answered to my satisfaction.* Note: negatively scored.

5.3 Mediators

The mediation analysis conducted indicates that the relationship between the RM factors and PWB explicated previously is mainly explained by an indirect association through the postulated mediators.

Results linking master-motive to PWB through life regard can be viewed as building on previous literature reporting a mediating role for this factor in the positive relation between various religiosity measures and PWB (Vilchinsky & Kravetz, 2005; Steger & Frazier, 2005) by providing a theoretically-relevant indication of which religiousness aspect promotes meaning in life. Hypothetically, religiosity can act as an autonomous and central motivational force that fosters meaning, purpose and value in life and, consequently, provides salutary benefits. In this process such a disposition is thought to have a salutary impact by helping address existential concerns, such as meaninglessness, with a degree of satisfaction. Statistical results though cannot shed light on whether this potential effect is different from embracing any ideology serving as an overarching philosophy of life; investigating whether a motivational framework of religious character has any distinctive psychological corollaries could be an enlightening research avenue.

Results highlighting self-esteem's mediating role in the negative relation between openness and PWB provide another potentially fruitful area of investigation. In the humanistic-existential theoretical lens adopted, self-esteem was posited as a higher human need that religion might potentially address. Results though provided a different picture, with self-esteem displaying a significant negative correlation with openness and no significant associations with other religiosity measures. In Study-1 self-esteem seemed to be unrelated to general religious adherence and behaviour, and participants with an open, reflective and critical orientation towards religion tended to display lower self-esteem levels. More importantly, this lower self-esteem seems to be the link between openness and lower PWB levels.

When referring back to the openness construct as conceptualised by Leak (2002), it is difficult to reconcile a greater ability to hold a coherent and highly discriminated belief system informed by critical tendencies with a lower esteem of self. Again, the potential overlap discussed beforehand between openness, as measured by the CUV-4, and religious doubt can serve as a plausible explanation for this result pattern. Doubt about religious beliefs/issues/values can be viewed as congruent with a negative evaluation of one's worth and importance. While further investigation is necessary to make any claims about the directionality of a potential 'religious doubt–low self-

esteem–negative psychological health’ relationship, or to eliminate possible third variable explanations, the pattern of results explicated above does offer interesting leads about a religious aspect with potential deleterious mental health effects.

Whereas self-actualisation was highly positively correlated to master-motive, general religiosity factors and PWB, it did not play a mediating role over and above life regard. Participants high in master-motive tended to have high self-actualising tendencies, but this factor does not seem to influence their PWB over and above the positive impact afforded by meaning in life. While there is some conceptual overlap between self-actualisation and meaning in life, the latter is a broader construct encompassing concepts like intrinsic motivation, autonomy and acceptance of others. Interestingly results seem to highlight meaning in life’s role as psychological pathway between religiosity and PWB over and above these qualities. Targeted further research is required to corroborate this interpretation.

5.4 Other Religiosity Variables

While religiosity self-rating and church attendance exhibited a strikingly similar pattern of relationships with religious, humanistic-existential and PWB indices as master-motive, throughout various tests the former displayed a stronger association to life satisfaction and the latter displayed a stronger association to depression-happiness than both master-motive and openness. Results also revealed that, similarly to master-motive, the relationship uncovered between these 2 religiosity variables and PWB was to a great degree mediated by life regard.

These results seem to indicate that at the core these 3 religiosity variables tap into a specific, or at least, similar religiosity aspect. Possibly church attendance and self-rated religiosity to some extent also tap into the religiosity dimension captured by master-motive²⁸. Results though also appear to indicate that these factors capture a feature of religious life linked to PWB through life regard, that master-motive fully or partly does not capture. Further and more targeted investigations are warranted to elucidate the relationship between master-motive and these religiosity measures and to gain a clearer picture of the pathways through which religiousness has a salutary effect. In the meantime, based on previous work some plausible hypothesis can be offered.

²⁸ I.e. The tendency to give a primary role to religion in one’s economy of life.

Several studies link church attendance and other measures of organizational religious involvement to PWB through social support (Levin, Chatters, & Taylor, 1995), but this mediator may be shedding light on only a fraction of the whole picture. Organizational religious involvement probably also comprises the operation of other psychosocial influences such as social identity (Greenfield & Marks, 2007) and the affirmation of a common set of values (Ellison, Gay, & Glass, 1989). Similarly, Ysseldyk, Matheson & Anisman (2010) speak about the salutary effect religious group membership exerts through providing the individual with inclusion in a social group sharing a common ideology and belief system. Membership of such a distinctive social group could, therefore, be influencing PWB through various pathways, including social support and integration, the affirmation of shared beliefs and values, greater existential coherence and the provision of an arena facilitating the development of healthy relationships.

Self-rated religiosity is a broad measure that, while tapping into numerous dimensions of religious life, might be particularly linked to the importance of a religious identity within the individual's self-concept. Therefore, hypothetically this measure could be acting as a proxy indicator for religious identification. Elliot and Hayward (2009), after analysing data from 65 countries, claimed that personal religious identity is generally positively associated with life satisfaction. Such beneficial impacts afforded by religious identification can be offered as a plausible explanation for the relationship between self-rated religiosity and a more positive cognitive evaluation of one's life. Identity comprises both the personal and social aspects and therefore such evidence could be indicating that religious identification has salutary effects through two distinct pathways; by helping the formation of a meaningful social identity (Blaine & Crocker, 1995) and by providing the added context of a relationship with the transcendent for the development of a stable and healthy sense of self.

5.5 Conclusion

This study's findings have painted a slightly confusing, albeit potentially useful picture, of the RM construct. Among the main points of interest are a number of results that seem to discord with the theories behind this construct's development:

- The RM construct's general lack of association and its factors diverging relationships with PWB.
- Complexity-of-beliefs' failure to correlate with two of the RM dimensions and the majority of the other religiosity factors.

- RM's overall lack of association with age, with master-motive and heuristic quality correlating positively and openness correlating negatively with this variable.

These findings hence raise several questions: Does a coherent RM construct exist? Are RM's factors more robust and internally coherent than the overall construct? Are all the postulated factors actually capturing RM dimensions? Further analysis suggested that it might be warranted to investigate the differentiation between openness and religious doubt/conflict and to examine whether complexity-of-beliefs taps into a cognitive disposition or tendency to intellectualise rather than a religiosity aspect per se. This work could constitute a useful step in answering these questions.

The pattern of relationships involving master-motive, openness, proposed mediators and PWB also provides some noteworthy indications. The relationship between religiosity becoming a central and autonomous motivational force in life and the status of the individual's journey along religious-existential issues emerged as a particularly crucial aspect in terms of PWB. Analysis of results also indicates that it might be fruitful to investigate further a master-motive–meaning in life–PWB pathway, an openness–self-esteem–PWB pathway and possibly a religious doubt–self-esteem–PWB pathway. However, results do not highlight a mediating role for actualising tendency, suggesting that it does not impact PWB over and above meaning in life.

Findings hence provide valuable feedback about the utility of employing an existential-humanistic theoretical lens for explaining the RM–PWB relationship. The positive correlations between master-motive and actualising tendency and meaning and the negative correlation between openness and self-esteem depicted a complex relationship between RM and these mediators. These findings therefore seem to indicate that while a relationship between RM and processes postulated by humanistic and existential psychological theory exists, it is far from straightforward. Mediation analyses indicating that self-esteem and meaning in life do serve an intermediary function in the relationship of interest provides further evidence for this explanatory framework's relevance for this field.

In conclusion, this strand provides a preliminary indication that the RM line of inquiry has potential to clarify the interplay between the individual's religious life and his/her psychological state. This line of inquiry may potentially benefit from further analysis of the relationship between RM dimensions and theoretically-related religious and psychological constructs that could help further refine the conceptualisation and operationalisation of RM.

6. STUDY-2 RESEARCH PROCEDURES

6.1 Overview: Design and Aims

Four in-depth interviews were conducted and analysed using constructivist GT (Charmaz, 2006). Following successive levels of coding at progressively higher levels of abstraction, various themes emerged which themselves formed the basis of a theoretical model depicting the religiosity–well-being relationship as captured in participants’ accounts.

6.2 Recruitment Procedure

From 138 survey participants, 52 expressed an interest in taking part in a research interview. This sub-group was contacted by email to re-ascertain their willingness and check the logistics for conducting the interview. Unfortunately, following this procedure it became apparent that the initial selection plan could not be fully implemented due to practical constraints. The low response from participants²⁹ meant there was not enough variability of profiles to select all 4 cases required. Following reflection on the best second preference, I decided to replace the unavailable Case-4 with another Case-3. The rationale being that of retaining a balance between cases that are congruent and cases that are discordant with current RM theory. Since 75% of the potential interviewees were Catholic, selecting a sample of cases balanced in religious affiliation was also not possible. It was, therefore, considered preferable to have sample homogeneity across affiliation rather than a sample with a single non-Catholic participant. Following selection a convenient interview location was set for the participants.

6.3 Sample Composition

Study-2’s sample was composed of four interviewees; three female, one male, aged from 42-60 years (sample mean=51.5 years). Of note, all participants are Catholic and highly involved in organised/institutional aspect of religion³⁰, possibly implying high levels of commonality in religious beliefs and practices.

²⁹ Possibly due, at least in part, to the fact that a year had elapsed since survey completion.

³⁰ An analysis of relevant religiosity variables indicated that two of study’s participants attended church once a week and two several times a week and that 3 participants were involved in a religious organisation.

Table 11

Demographic Information for Study-2's Sample

	Gender	Age	Ethnicity	Affiliation	Marital Status	Occupation Status	Education Level
Participant 1	Male	60	White	Catholic	Married	Employed	University
Participant 2	Female	60	Asian/Asian British	Catholic	Single	Retired	College
Participant 3	Female	44	White	Catholic	Married	Student	University
Participant 4	Female	42	White	Catholic	Married	Retired	University

6.4 Interview

This strand’s aim was to shed light on the nature of the relationship between religiosity and PWB through an open-ended and in-depth exploration of the individual’s experiences about the role of religion in their life. This exploration aimed to establish a fruitful dialectic with Study-1’s findings, which had sought to investigate the religiosity-PWB relationship through a specific examination of the RM construct and its hypothesised relationship to a set of mediators. At the same time this open-ended exploration necessitated a degree of guidance ensuring appropriate focus on the concepts of interest. I found that the use of a semi-structured interview acting as a flexible guide provided the balance required between these needs. This tool, through the use of a few broad questions delineating the topics of interest, provides the researcher with some degree of control, while also enabling him/her to be responsive to emerging information by allowing new questions to be brought up based on the interviewee’s input. This interviewing technique fits well with GT methods because they are both: “open-ended yet directed, shaped yet emergent” (Charmaz, 2006, p.28). Furthermore, the combination of flexibility and control integral to this technique mirrors GT analytic strategies (Charmaz).

The interview schedule (Appendix-L) consisted of five main questions designed to sequentially guide the conversation from a broad introductory exploration of the individual’s religious life to a more targeted investigation of the relationship between religiosity and well-being. In line with Charmaz’s (2006) recommendations, questions were kept to a minimum and aimed to strike a balance between being sufficiently general to elicit a breath of experiences and being narrow enough to target the participant’s unique experience and were kept to a minimum. The first two questions served to introduce the main theme of religiosity and sketch an initial overview of the

individual's religious world. More specifically, the purpose behind asking "*What does being religious mean to you*" was to access the participant's own understanding of the term religiosity. The second question³¹ aimed to uncover salient characteristics of participants' religious life, whilst the third was designed to invite a discussion about the general role of religion in the individual's life. Prompts were used here to encourage thinking on the psychological plane about religiosity's potential effects. Question-4 sought to explore more directly their perspectives regarding the main research questions. The prompts after this question sought to encourage an open-ended investigation of the subject-matter by asking about both the positive and negative potential effects of religiosity. Finally question-5 sought to place the analysis of religiosity as a potential influence on well-being within a wider perspective by enabling a comparison with the potential impact of other factors. Thus this question aimed to shed light on an area the quantitative approach could not tackle due to its reliance on more fixed data-collection strategies.

The interview schedule also comprised a further two questions to be utilised in case the topic regarding the developmental aspect of one's religiosity had not been touched upon sufficiently beforehand. The sixth question strived to elicit a discussion about any changes occurring in the participants' religiosity over their life course, while the last question queried whether these changes had influenced their well-being.

6.5 Interview Procedures and Ethical Considerations

The interviews took place either in a private room at LMU or in a confidential environment of the participant's choice. Interviews were audio-taped and transcribed and lasted between 40-65 minutes.

Before each interview, an information sheet (Appendix-M) and consent form (Appendix-N) were provided, detailing ethical issues and inviting consent, which participants could read through and query. This was followed by a preamble aimed at making participants feel at ease by clarifying the goals and open-ended nature of the interviews. Basic counselling skills such as paraphrasing were utilised throughout to establish good rapport and enable non-intrusive encouragement for further elaboration. At the end of the interview, a debriefing sheet (Appendix-O) was provided suggesting potential sources of support participants could utilise if they felt distressed or negatively affected by the interview.

³¹ In light of participant feedback after the first interview, this question was changed from '*How would you describe your religiosity?*' to '*Can you tell me about any aspects, or parts, of your religious life that are important to you?*'

To safeguard the interviewees' anonymity and confidentiality, each interview was assigned a reference number and the interview recordings and transcripts were only identifiable through this number. Pseudonyms were used throughout the transcriptions and any identity-revealing information was omitted. Participants could withdraw from this study prior to data compilation and analysis by emailing their reference number to the researcher.

6.6 Data Analysis

In line with the constructivist GT method proposed by Charmaz (2006) data was analysed through a series of coding stages. Coding acts as a bridge between the participants' statements and the researcher's analytic interpretations. As the researcher gradually makes his way through data, GT's 'constant comparative method' allows meaning units to be compared within and between data resulting in the categorisation and labelling of similar units as 'codes'. Codes themselves serve as building blocks for the construction of a theory as they allow the researcher to separate and name segments of the data produced by participants. This study's analytic process took place through the following coding stages.

During initial coding, the phenomena occurring in each line of text were described and labelled. Labels were provisional, open-ended and remained very close to data. Afterwards, throughout the focused coding stage, the most significant or frequent initial codes were identified and grouped, leading to the development of lower-order categories. In the same manner, some of the most salient categories were then grouped into higher-order categories. Subsequently, during the axial coding stage, theoretically/thematically similar concepts delineated by the emergent categories were gradually linked, leading to the development of 8 themes. The final stage, involved sorting and diagramming of themes, delineating existing relationships between them. The visual representation produced allowed me to refine relationships highlighted and more comprehensively conceptualise interactions present. This stage led to the development of a model proposing a theoretical understanding of the religiosity-PWB relationship as captured by my sample.

Memo-writing also took place throughout the coding stages. Here, notes pertaining to the analytic procedure or to salient ideas related to emergent codes/categories were made. These memos served the important role of reminding me of key research ideas and keeping me close to the data as the analytic procedure progressed. It also functioned as a tool enabling the participant's voice and meaning to be present in the theoretical outcome (Charmaz, 2001).

7. STUDY-2 RESULTS

7.1 Data analysis

This chapter presents the 8 themes garnered through constructivist GT analysis, the theoretical model developed and its relevance for this inquiry's research questions.

7.1.1 Theme-1: Multi-faceted Nature of Individual's Religiosity

Theme-1 draws attention to the complexity and multi-faceted nature of religiosity thus emphasising that any single facet can only provide a limited picture of this phenomenon.

Table 12

Composition of Theme-1

Theme	Higher Order Category	Lower Order Category	Interviews
Multifaceted nature of individual's religiosity	Religiosity profile	Discernment and doubt in religiosity	1,2,3,4
		Religion's role in life	1,2,3,4
		Understanding of and identification with religiosity and spirituality labels	1,2,3,4
	Having an intimate relationship with God	Conception of the divine: Personal God vs Distant God	1,2,3,4
		Relating to God	1,2,4
		Changes in individual's religiosity: Personal growth and relating with God	1,2,3

7.1.1.1 Category-1: Religiosity Profile

Analysis highlighted the fact that participants differed in their way of being religious in several aspects. These differences appeared to correspond to a number of religious facets³² that were labelled as:

- Degree of discernment
- Degree of religious doubting
- Religion's role in life: pervading influence vs. tool
- Understanding of and identification with religiosity and spirituality labels.

³² The first two facets can be conceptualised as continuums ranging between two poles.

Whilst all interviewees spoke about the importance of discerning religious teachings, data collected displayed a variance in participants' religious beliefs ranging from a clear confidence in the religious path undertaken to a propensity to doubt the whole basis behind one's religion; "In fact a great deal of the time I doubt nearly all of the basis of what my religion is based on" (P.2,L.118-199). Participants can hence be hypothetically placed on a continuum ranging from higher to lower levels of religious doubt. Participants' descriptions of religion's role in their life also appeared to reside on a continuum, ranging from a pervading influence that permeates life to a selectively-used tool. The last facet outlines participants' understanding of the terms religiosity and spirituality and which of these labels they ascribe to themselves.

7.1.1.2 Category-2: Having an Intimate Relationship with God

Forming and enjoying an intimate relationship with God emerged as fundamental for participants 1,2 and 4. The nature of participants' relationship with God appears to be heavily dependent on their conception of the divine. Having an intimate and personal relationship seemed to assume greater importance for participants who view God as non-demanding and actively involved in daily life. Contrastingly views of God as superior and distant appeared to be associated with a scant emphasis on *relating* with the divine. Viewing God in more personal terms appeared to be associated with references to the divine within. Participants described this notion as a divine force within the self which represents humanity's highest potentialities. "I would see myself as definitely as somebody...with a relationship with God, with God living within them" (P1,L.596-598). Interestingly, participants who sought to develop a relationship with the divine emphasised prayer's purpose as a means of relating with God. Whilst the existence of myriad conceptualisations of prayer was commonly mentioned, these participants spoke about understanding prayer as a form of dialogue with and a disposition of openness towards God.

7.1.1.3 Category-3: Changes in Individual's Religiosity: Personal Growth and Relating with God

This category outlines participants' rendition of the changes occurring in their religiousness over the years that appear to centre on their degree of concern with personal growth and relating with God. Changes described seem to point towards the development of a religiosity that views the transcendent in a more personal and positive way, places less emphasis on religious prescriptions and greater emphasis on relating with God and sets personal growth as a primary aim. "I think it's become more experiential more about personal growth...more about relationship...and less about institutions, less about rules" (P.2,L.326-327).

Participant-3's description though does not appear to correspond with this trajectory. While this participant spoke about prescriptions becoming non-essential, she described her understanding of God as shifting from a close presence to a superior being and placed no emphasis on relating with the divine or personal growth in religiosity.

7.1.2 Theme-2: Interpersonal Life being enriched through Religiosity

Theme-2 captures the impact religiosity seems to exert over the interpersonal domain, seemingly acting as a positive tool in participants' efforts to establish and maintain relatedness to others and to the environment.

Table 13

Composition of Theme-2

Theme	Higher Order Category	Lower Order Category	Interviews
Interpersonal life being enriched through religiosity		Greater ability to develop and maintain healthy relationships	1,2,3,4
		Sense of connection and belonging	2,3,4

7.1.2.1 Category-1: Greater Ability to Develop and Maintain Healthy Relationships

Participants spoke about how certain religious principles and values promote a way of life that benefits interpersonal relating. Narratives highlighted the role of principles (e.g. respect) and values (e.g. politeness) in promoting tolerance and understanding of others and in facilitating functional responses to interpersonal conflict. Participants felt that these principles and values helped them deal effectively with the normative stress and strain of intimate and non-intimate relationships. In general they viewed religiosity as providing guidance about how to act with others and manage interpersonal stress:

Relationships within families can sometimes be strained...But, through belief in trying to put the other person first that sort of influences the way that I would try and respond to situations, the way that I would act and speak in a way that is hopefully not self-motivated, but motivated by either the happiness of the other person or to establish a good relationship within the family (P.1,L.407-417).

7.1.2.2 Category-2: Sense of Connection and Belonging

This category encompasses codes that deal with psychological phenomena that appear to underlie the interpersonal domain. Interviews clearly indicated that participants seem to perceive an association between religiosity and sense of connection. They spoke about being religious providing both a sense of connection on a vertical dimension (i.e.with God) and horizontal dimension (i.e.with a community/the world). References to the Church as a communion and community life as one of God's gifts seem to indicate that the communitarian emphasis found in particular Christian teachings plays a crucial role in this regard. Praying also seems to play a contributing role in fostering this sense of connection by acting as a means through which to connect to God and the wider universe.

Participants also spoke about community life being a fundamental religiosity aspect. In this respect religion can provide the individual with membership in a defined social group as well as a framework that upholds the unity and cohesion of this community. That a common religious framework provides a shared discourse and a common ground in relationships also emerged. Participant-2 in particular repeatedly stressed that her religious community has a salubrious influence by providing her with a sense of belonging and opportunities for *meaningful* friendships. Participant-3 expressed the opinion that in contemporary society religion plays a greater role in fostering a sense of belonging, as social and family structures, due to increasing fragmentation, are less able to provide this sense.

7.1.3 Theme-3: Seeking to Connect with the Inner Dimension of Life

Table 14

Composition of Theme-3

Theme	Higher Order Category	Lower Order Category	Interviews
Seeking to connect with the inner dimension of life		Fruitful inner life	2,3,4
		Religion and the self	1,2,3,4
		Sense of appreciation	1,2,3,4

Participants spoke frequently about an 'inner self' and emphasized that religion's spiritual focus and promotion of reflection and introspection helps them connect with this internal reality. Their narratives appeared to point towards a fruitful inner life that is relatively resilient to external disruption and promotes higher well-being.

Participants frequently referred to an inward focus inherent in their religious life. They spoke about dedicating time and energy to frequent reflection and introspection about self and heeding religion's counsel to look inwards to find fulfilment. These efforts appear to foster a fruitful inner life that confers benefits, such as being grounded in the present moment and feeling at peace and in touch with self. Participant-4 stressed that this inner life helps fulfil an internal yearning³³ that she believes stems from our intrinsic spiritual nature. According to her, religion is adept at fulfilling this internal yearning by encouraging and enabling the individual to identify and pursue sources of spiritual sustenance instead of resorting to attempts to numb this need.

Data also emphasised that high levels of reflection and introspection help promote self-understanding, especially concerning an awareness of personal strengths and weaknesses.

I think I definitely have developed a greater self-knowledge because I think an important part of any religious life is that one examines one's...motives; conscious; behaviour, so yes you tend to be able to identify your weaknesses and failures more easily (P.1,L.218-222).

Specific examples of how this process may operate were provided; e.g. religion by imparting the value of reflecting on one's negative reactions and refraining from externalising blame can help the individual in acknowledging personal difficulties in relating. Narratives proposed that this greater self-awareness facilitates self-acceptance and confers salutary benefits.

Whereas a common thread was present among participants' discussions about religiosity and self-understanding, there was a clear divergence in their thoughts about this phenomenon's impact on self-concept. Participant-1 felt that a positive view of God is associated with a positive view of self, while participant-3 claimed that religion can contribute to a strong personal identity through providing membership in a defined social group. Conversely, other participants either ascribed a minor role to religiosity in identity formation or did not mention this aspect.

Finally, narratives seemed to indicate that this inward-looking disposition coupled with a religious worldview that views life as a gift enhances participants' ability to appreciate the world and life and consequently, has a salutary effect on emotional well-being.

³³ Also described by the same participant as a 'hunger within myself'.

7.1.4 Theme-4: Accessing a Framework of Relevance to Higher-order Pursuits and Existential Fulfilment

Theme-4 describes religiosity’s potential in providing a framework that gives structure and direction to the way individuals deal with existential issues like suffering and meaning in life and to the pursuits they choose to ascribe a higher-order importance to.

Table 15

Composition of Theme-4

Theme	Higher Order Category	Lower Order Category	Interviews
Accessing a framework of relevance to higher-order goals and existential fulfilment	Higher pursuits inspired and nurtured by religiosity	Striving to transcend self-centeredness	1,2,3,4
		Orientation towards personal growth	1,2,3,4
	Religiosity's influence on existential strivings	Fulfilling God’s will as an ultimate goal	1,4
		Living a purposeful life	1,3,4
		Dealing with adversity	1,2,3
		Ability to derive meaning from religiosity	2

7.1.4.1 Category-1: Higher Pursuits Inspired and Nurtured by Religiosity

Participants spoke about a number of pursuits of potentially high psychological relevance that can be inspired, motivated, as well as facilitated by religiosity. One of these pursuits is the quest to be less self-centred, with participants talking about striving to outgrow and rise above one’s default mode of being solely self-concerned. This quest seems to be inspired by Christian values such as service and love³⁴. A related pursuit emphasised by participants was the quest to help others, varyingly cited as generating positive affect and as sometimes eliciting negative emotions when one is unable to help.

I always feel that I have to help people...which is sometimes a handicap as well. You can’t always help everybody. But I do feel terrible if I can’t help someone (P.3,L.214-216).

7.1.4.2 Category-2: Religiosity's Influence on Existential Strivings

This category captures how religion impacts participants’ confrontation with certain givens of human existence, with a particular focus on suffering, death and the desire for meaning. Data indicated that religiosity has the potential to provide a valuable framework to the individual’s search for purpose and meaning. Participants highlighted religious notions, such as God’s will

³⁴ Participants mentioning that Christians are called to serve the marginalised and needy and that the individual should always aim to be guided by love.

and vocation, which might be of particular relevance for this search. Interviews portrayed striving to become aware of and to fulfil God's will as an ultimate goal that provides hope and a definite sense of purpose. Given the notion of God's will presupposes a design behind life, an association between this belief and a view of life as meaningful in itself makes intuitive sense. The notion of vocation was also emphasized in some interviews; e.g. participant-4 recounted how discovering and accepting her calling helped instil a sense of direction and inner peace.

I think it gives meaning, especially to events that seem to lack meaning...perhaps more to see beyond that event and realise that there may be some meaning. God may have some meaning in that, I may not know it. So yeah...it gives a structure of meaning (P.2,L.179-185).

Religion's ability to address existential concerns about meaning, though, seems to be dependent on the individual's confidence in his/her religious beliefs. Here participant-2 highlighted the presence of an association between doubts about basic religious tenets and existential anxiety in her personal experience.

Participants also spoke about how religious beliefs help them make sense of adverse experiences, such as redundancy, and possibly even derive meaning from them. Religious beliefs seemed to emerge as a source of strength in adversity that help the individual appraise setbacks more positively (e.g. viewing problems as a stepping stone towards God). Religiosity thus seems to help participants cope with adversity and suffering by helping them ascribe a purpose to it. Contrastingly participant-3 mentioned not deriving any comfort from religion in adversity as she believes God is uninvolved in and detached from the intricacies of daily life.

7.1.5 Theme-5: Religion's Potential as a Beacon

Theme-5 encapsulates participants' portrayal of religiosity's potential role as a source of guidance and inspiration that impacts behavioural choices, aims and decision-making.

Table 16

Composition of Theme-5

Theme	Higher Order Category	Lower Order Category	Interviews
Religion's potential as a beacon		Religion as a source of guidance	1,2,3,4
		Striving to live a Christian life	1,2,3
		Determining role of religious principles and values	1,2,4

7.1.5.1 Category-1: Religion as a Source of Guidance

Narratives portray religion acting as a framework through which individuals structure and make sense of their experiences, providing their lives with a point of reference to compare with and progress towards. Participants used terms like code of conduct and benchmark and spoke about concepts, such as God's standards, and saints as role models, when describing these qualities, with some claiming that the absence of the structure provided by religion would render life more confusing. Participants appeared to understand Jesus' teachings and life and, to varying extents, the Church's teachings to be the foundation for this guidance. The divine was also understood as a source of guidance that can be accessed by prayer.

You can compare it with a road, with a traffic signs, with traffic lights and all. And if you are going in one direction, you know that this is the road that will take you, so, you will reach your destination (P.4,L.345-349).

7.1.5.2 Category-2: Determining Role of Religious Principles and Values

Within religion's role as a source of guidance and inspiration certain religious principles and values seem to act as guidelines. Participants placed special emphasis on the inherent dignity endowed by being created in the image of God, the principle of treating others as one would treat self and the Christian values of love and service. Throughout the interviews, values were described as ideals to aspire to and principles as the basis informing the individual's choice of values. Participants reported these guidelines as having benefitted their interpersonal relating and personal development. "It influences the way I deal with other people or try to deal with other people-often fail, but there's an underlying principles of respect and concern for other people in everything I do" (P.1,L.79-82).

7.1.5.3 Category-3: Striving to Live a Christian Life

Participants described striving to live what they understand to be a Christian life, in line with their religion's principles and values. This striving seemed to be composed of 2 main strands. One can be described as pertaining to behavioural control. Data highlighted how the concepts of conscience (described as internalised guidelines) and sin impact behavioural choices. The second seems to be related to behavioural motivation. Here participants spoke about wanting to translate faith into action and aligning themselves with God's creative purpose giving concrete examples such as intercession³⁵ and volunteering.

³⁵ Praying for others' needs.

Data also indicated this striving's possible downside, especially in connection with an understanding of God as demanding perfection. For Participant-1 this conceptualisation of the divine used to impel him to avoid ever transgressing, leading to a view of self as a failure with resultant adverse psychological effects.

7.1.6 Theme-6: Salutory Benefits of Religious Practices

Theme-6 depicts participants' focus on the varying beneficial effects of religious practices.

Table 17

Composition of Theme-6

Theme	Higher Order Category	Lower Order Category	Interviews
Salutory benefits of religious practices		Praying having intrinsic benefits	1,2,3,4
		Benefits of Christian liturgy	2,3,4

7.1.6.1 Category-1: Praying having Intrinsic Benefits

Participants outlined the different forms of prayer they employ (e.g. contemplation, intercession) highlighting the strong positive impact this practice has on their lives. Effects mentioned include; creating space for reflection, reassurance, allowing the individual to be in touch with his/her inner dimension and aiding in coping with adversity. Some participants stressed that praying has no preventive effects and may not always lead to a change in one's external situations. Thus throughout the interviews praying seems to emerge mainly as a means of internal support "I think on occasions it gives me a sense of peace and wholeness...I also use it within a decision making process if I have to make major decisions in my life" (P.2,L.219-221).

7.1.6.2 Category-2: Benefits of Christian Liturgy

Interviews also highlighted the value ascribed to mass³⁶. With varying degrees of emphasis this religious practice was described as a time between self, God and the community, conducive to reflection and introspection. More specifically, participants cited the gospel³⁷ and sermon as providing food for thought and encouraging patience and kindness, and the Eucharist³⁸ as

36 The term 'mass' is colloquially used to refer to a formalised period of communal worship that normally encompasses readings from Christian scriptures and the Eucharistic liturgy.

37 A reading from Christian scriptures giving an account of Jesus' life and mission.

38 The Eucharist are the elements of the communion supper in Christian Churches where the bread and wine are consumed as a representation of the sacrifice of Christ (Dictionary of Theology).

offering spiritual nourishment. Mass seems to have an overall salutary impact described as a soothing and energising effect.

I go to Church I find it extremely helpful, very soothing...then you listen to what the priest says in his sermon and sometimes it's interesting other times it's not. But it's just the beginning of extra reflections (P.3,L.79-84).

7.1.7 Theme-7: The Complex Role of Religiosity in the Individual's Economy of Well-being

Table 18

Composition of Theme-7

Theme	Higher Order Category	Lower Order Category	Interviews
The complex role of religiosity in the individual's economy of well-being	Relationship between religiosity and well-being	Definite relationship between religiosity and well-being	1,2,3,4
		Potential deleterious effects of religiosity	1,2,3,4
		Experience of religiosity's salutary influence on well-being	1,2,3,4
		Other contributors to well-being	2,3,4

This theme captures the complexity and two-sided nature of the religiosity-well-being relationship as portrayed by narratives.

Three participants described religiosity as a major factor influencing well-being. Contrastingly in participant-2's experience religion's influence on her psychological health was less prominent than other more influential factors (e.g. access to opportunities like travelling). All participants spoke about experiencing religiosity, or at least some aspects of it, as positively impacting their well-being. Most participants cited religion as enhancing emotional well-being. Participant-4 spoke about following a religion wholeheartedly providing inner peace, while participant-1 claimed that religiosity provides an atypical experience of joy³⁹. Participant-2 singled out two religiosity aspects as having salutary benefits: belonging to a religious community and praying.

Participants 1 and 3 spoke about previously experiencing deleterious effects of religiosity on well-being. The former talked about a previous form of religiosity leading to thoughts about being a failure and consequently causing feelings of anger and frustration, "I would feel frustrated I suppose very depressed, sometimes negative because I knew that I was falling short of what I'd been taught as God's ideal" (P.1,L.602-605). The latter mentioned religiosity instigating excessive guilt during adolescence. On the other hand, participant-4 voiced the opinion that a

³⁹ An emotion that he thought is best described as a sense of contentment throughout life's ups and downs.

fundamentalist approach towards religion has adverse psychological effects, whilst participant-2 noted instances where religiosity had led to sexual repression and self-hatred in others.

7.1.8 Theme-8: Religiosity Change: Process and Consequence

Theme-8 summarises participants’ narratives about religiosity change and the seemingly similar consequences of this phenomenon in terms of well-being.

Table 19

Composition of Theme-8

Theme	Higher Order Category	Lower Order Category	Interviews
Change in Religiosity: Process and Consequence	Idiosyncratic nature of the religiosity change process	Historical context and factors	1,3
		Process of change in individual's religiosity	1,2,3,4
	Salutary benefits of change in religiosity	Effects of change in religiosity	1,2,3,4
		Potentially problematic aspects of Catholicism	2,3

7.2.8.1 Category-1: Idiosyncratic Nature of the Religiosity Change Process

Although some trends can be gleaned from narratives about how participants’ religiosity changed over time, ultimately data seems to indicate that the four individual processes described are dissimilar.

Participants’ experiences of change in their religiosity can hypothetically be divided according to whether they resemble a stage-like or a continuous process. Participant-2 described her engagement with religiosity as an on-going journey with no concrete conclusions, while participant-4 conceptualised her experience of change as a progression running parallel with the development of other domains⁴⁰. These participants used terms like ‘growth’ and ‘maturation’ to describe this change: “So it’s much more complicated than it was. I think my faith has matured. That’s how I interpret it...But I think it’s grown up” (P.2,L.320,321).

Conversely, participants 1 and 3 emphasised taking an active decision to change their religious life at some point in adulthood. These participants also spoke of how the historical context determined the religiosity path they undertook in childhood/adolescence and indirectly influenced their later decisions. They specifically discussed the diverse impacts of a Catholic upbringing and mentioned factors such as the social pressure to attend Church and the emphasis placed on

⁴⁰ Examples given include the cognitive and emotional domains.

prescriptions in the religion they were exposed to in childhood. These participants also placed greater emphasis on specific incidents where others seemed to act as an external trigger in the change process; e.g. brother sharing experience of faith renewal. Pertinently, participant-3 placed particular emphasis on the active role she herself played in this process of change and spoke explicitly about distilling Catholicism and modifying her approach to suit self.

Interestingly, interviews also highlighted the heterogeneous routes undertaken by these processes of change. Participants spoke varyingly about going through a period of questioning and choosing to remain within the Catholic Church, deciding to remain religious despite its drawbacks, and shifting from a period where religion had no relevance to a process of re-including it in daily life.

7.1.8.2 Category-2: Salutory Benefits of Change in Religiosity

All participants seemingly conceptualised changes in their religiosity as having an overall salutory effect. This change influenced emotional well-being and internal characteristics such as increasing generosity and tolerance. Secondly, the change served to address religious aspects previously having a negative psychological impact. Participants spoke about moving beyond problematic aspects stemming from the Catholic teachings/beliefs in childhood: e.g. a misguided sense of responsibility that elicits guilt when comparing the individual's relative good fortune with others' suffering, "I try to elaborate. Only sense of guilt which is terrible. I still have it sometimes of course, because it follows you...but it doesn't affect me negatively any longer" (P.3,L.414-416).

7.2 Theoretical Model

Constructivist GT analysis led to the development of a three-tier model (Model-1A) that provides a hypothetical theoretical depiction of the dynamics linking religiosity to PWB.

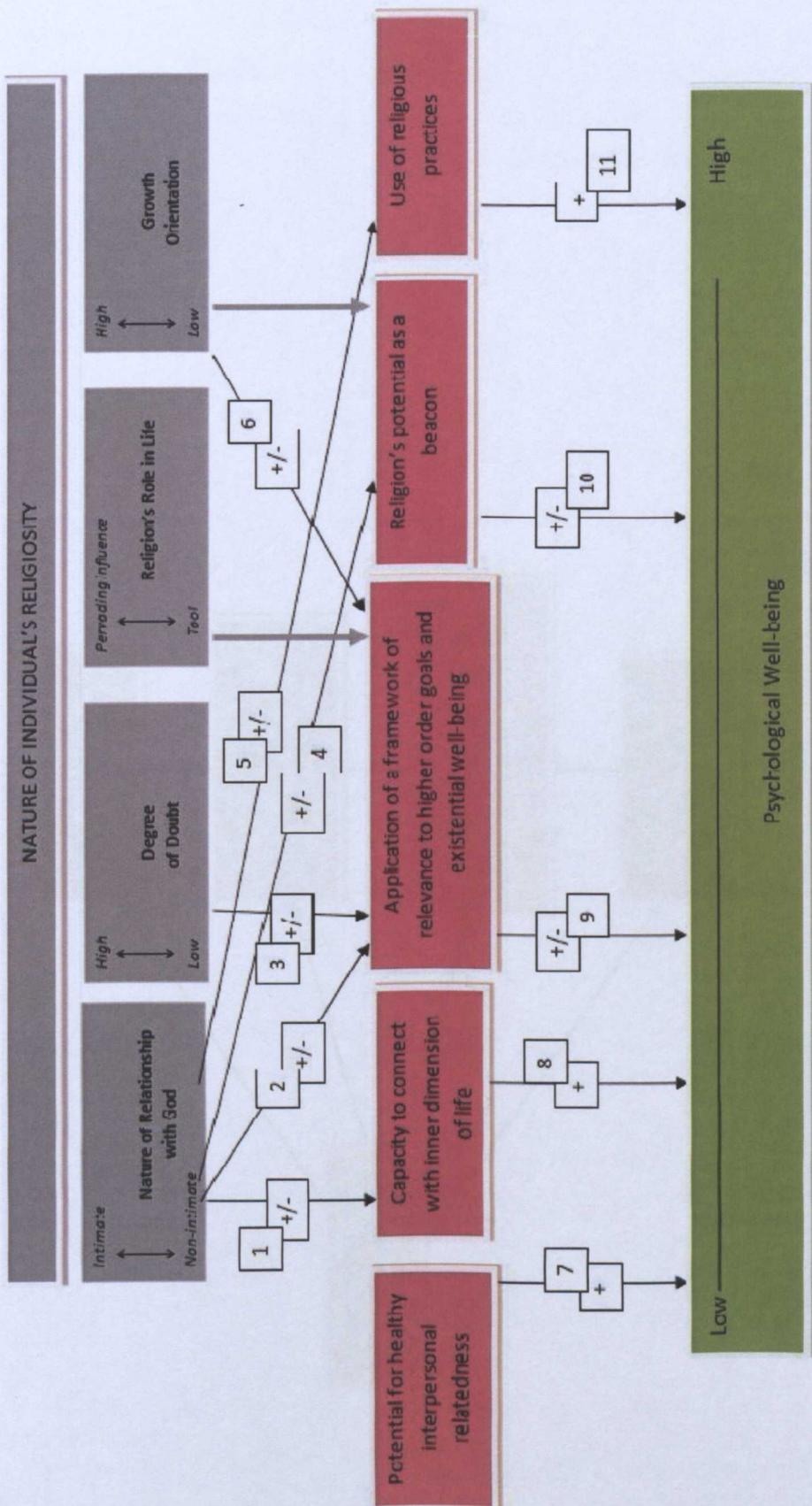


Figure 2. Theoretical model-1A.

The model's top level highlights four aspects of authentic religiosity that seem to exert some influence on well-being. These aspects were expanded in Thoma's description and can be conceptualised as bipolar opposites. Authentic religiosity can therefore be broken down into a set of items, along each of these 4 continua, that in conjunction provide a comprehensive and psychologically relevant profile of the individual's religious world.

The middle level portrays the internalisation processes through which religiosity may exert an influence on ZWB:

1. The individual's internalisation of healthy interpersonal relationships.
2. The individual's capacity to identify with the higher-order goals of life.
3. The application of a religious framework in the individual's pursuit toward higher-order goals and existence.

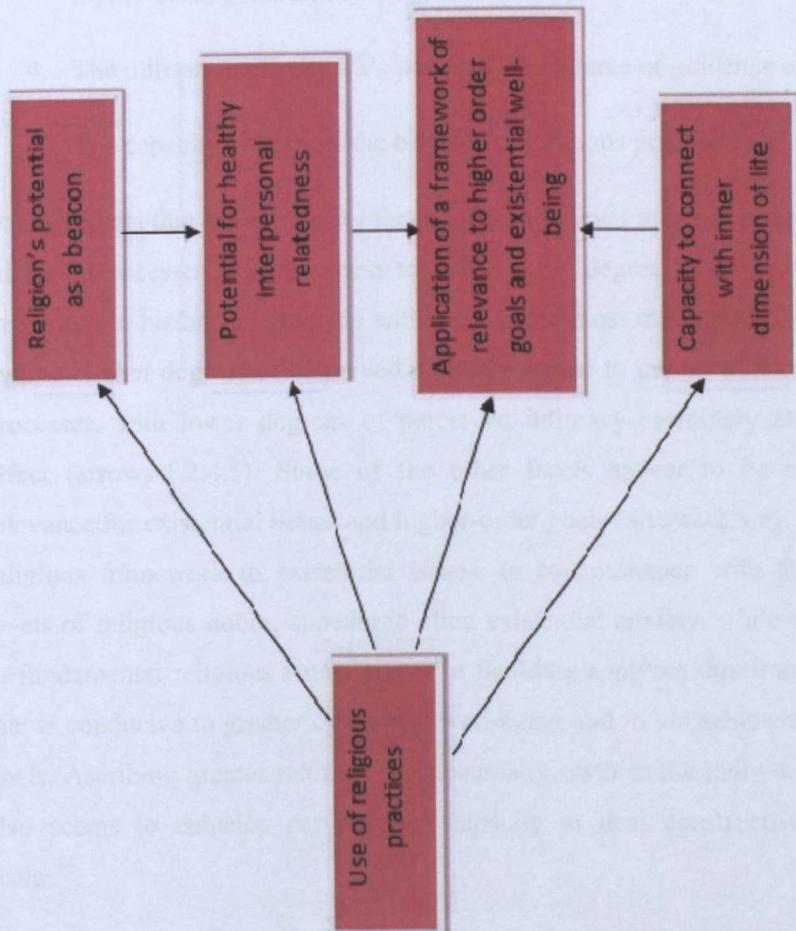


Figure 3. Theoretical model-1B.

The model's top level highlights four aspects of participants' religiosity that seem to exert some influence on well-being. These aspects were explicated in Theme-1's description and can be conceptualised as bipolar continua. Theoretically, each participants' religiosity can therefore be broken down into a set of points, along each of these 4 continua, that in conjunction provide a comprehensive and psychologically relevant profile of the individual's religious world.

The middle level portrays the intermediary processes through which religiosity may exert an influence on PWB:

1. The individual's potential for healthy interpersonal relatedness.
2. The individual's capacity to connect with the inner dimension of life.
3. The application of a religious framework in the individual's striving towards higher-order goals and existential fulfilment.
4. The utilisation of religion's potential as a source of guidance and inspiration
5. The capacity to harness the benefits of religious practices.

Data suggests that the religiosity facets in the top level to some extent exert an influence on these processes. Results seem to indicate the degree of intimacy perceived by the individual in his/her relationship with God as the most influential religiosity facet in this regard. Higher degrees of perceived intimacy appear to impact positively the first 4 listed processes, with lower degrees of perceived intimacy seemingly exerting the opposite effect (arrows-1,2,4,5). Some of the other facets appear to be related to religion's relevance for existential issues and higher-order goals (arrows-2,3,6). The application of a religious framework to existential issues, in concomitance with the presence of high levels of religious doubt, appears to elicit existential anxiety, while a greater confidence in fundamental religious tenets seems to facilitate applying this framework in a manner that is conducive to greater existential well-being and to the achievement of higher-order goals. Ascribing greater relevance to personal growth in the individual's religious world also seems to enhance participants' capacity to deal constructively with existential issues⁴¹.

⁴¹ For example participants spoke about being more able to deal with suffering by viewing it as an opportunity for personal betterment.

Study-2 can also propose some observations hinting at other possible associations (*grey arrows*). Firstly, the arguments participants put forward seem to hint towards a greater understanding of Christian life as a growth process being related to utilising the guidance provided by religion in a constructive and self-affirming manner. Secondly, some excerpts appear to shed light on a possible relationship between the role ascribed to religion in life and its ability to act as an existentially-relevant framework. Hereof, participants drew connections between religiosity acting as an underlying foundation to life or as interweaving and permeating life and the ability to live a purposeful life, but there was no evidence indicating that a more utilitarian understanding of religion's role in life was associated with lower levels of sense of purpose.

In turn the intermediary processes postulated appear to impact well-being in a multitude of ways. As outlined in previous sections, processes 1,2 and 5 appear to have a salutary effect on psychological health (arrows-7,8,11), while participants' experiences suggests that processes 3 and 4 have the potential to exert both a salutary or deleterious effect on well-being (arrows-9,10). These two stages in conjunction hypothetically suggest that religiosity facets in the top level exert an influence on PWB through single or multiple pathways involving the intermediary processes. The third tier depicts a continuum of PWB, indicating that the multiple effects exerted by religiosity may influence a movement in both directions.

Model-1B highlights the inter-associations between the second tier processes. Narratives appeared to indicate that a greater capacity to harness the benefits of religious practices impacts all other processes: e.g., participants elaborated about prayer functioning as a means for reflecting about one's purpose in life and obtaining guidance from God and spoke about praying together enhancing their sense of community. Furthermore narratives highlight the role of particular religious values and principles in providing guidance that enhances one's ability to develop and maintain healthy interpersonal relationships. Data also suggested that the self-analysis and introspection encouraged by religious life appears to facilitate the pursuit of personal growth and that an inward focus generally helps participants keep in touch with existential issues. Finally, certain participants stressed that religion's communitarian emphasis aided their efforts to lessen self-centredness. These associations suggest that the proposed intermediary processes do not operate in isolation and that a single religiosity facet may impact well-being by involving these processes cumulatively.

8. STUDY-2 DISCUSSION

8.1 Complex Relationship between Religiosity and Well-being

It is crucial to note that results denoted a two-sided relationship between the two phenomena of interest. As illustrated by Study-2's model, data indicated both positive and negative associations between specific religiosity characteristics and well-being. The determining religiosity facets in this regard seemed to be the perceived nature of the individual's relationship with the divine, the emphasis on personal growth within the individual's religious approach, and the degree of religious doubt experienced. Higher levels of perceived intimacy, greater emphasis on personal growth and lower degree of doubt appeared to have salutary benefits, while the opposite characteristics seemed to exert a deleterious impact.

On the other hand, data regarding the 'religion's role in life' facet was more ambiguous. While participants drew a connection between religiosity acting as a pervasive influence in life and sense of purpose, there was no evidence associating a more utilitarian understanding of religion's role in life with lower well-being. On the contrary, viewing religion as a tool may have its benefits: e.g. a participant's narrative links this approach to employing religious practices for psychological benefit. Therefore, Study-2 can only propose that this facet's role in the economy of well-being requires further investigation.

These described associations can only be considered tentative suggestions that, when placed within the context of existing empirical and theoretical literature, might highlight some lacunae and fruitful directions to pursue in this field. Ensuing sections will draw on available psychological theories and research evidence to offer an informed interpretation of the implications of Study-2's findings.

8.2 Attachment Theory and the Individual's Relationship with God

Theme-1 highlighted the psychological relevance of two related religiosity facets: the participants' conception of God and the perceived nature of their relationship with the divine, with the latter seemingly exerting the greatest influence on the intermediary processes postulated by Study-2's model. The relationship between these two facets has

been evidenced by previous research outlining an association between views of God as benevolent or rejecting and perceived proximity with the divine (Wong-McDonald & Gorsuch, 2004). Also, the association between the person's perceived relationship with God and well-being appears to echo earlier findings that revealed a positive association between secure God attachment, or self-reported loving relationship with God and well-being (Levin, 2002; Kirkpatrick & Shaver, 1992), and a negative relationship between insecure God attachment and well-being (Rowatt & Kirkpatrick, 2002). Given the relational aspect inherent within these religiosity facets, attachment theory seems well-positioned to provide a theoretical link between these factors and well-being as well as intriguing insight into the psychological dynamics involved in the individual's relationship with God.

Kirkpatrick (1992) and Kirkpatrick and Shaver (1990) proposed two theories about how childhood attachment can impact religiosity: the compensation⁴² and correspondence hypotheses⁴³. Interestingly there appears to be some form of research evidence in favour of both these apparently contradictory hypotheses. Support for the correspondence hypothesis can be found in the evidence affirming that college students' views of God are directly related to their attachment style with primary caregiver (Dickie, Ajega, Kobylak, & Nixon, 2006; Reinert, 2005). For example, Dickie et al. found that experiencing caregivers as authoritarian was related to viewing God as more punitive and distant. Conversely, studies (Deutsch, 1975; Kirkpatrick, 1997; Kirkpatrick & Shaver, 1990) indicating that persons reporting major difficulties in parental relationships or insecure attachments are more likely to be religious converts seem to lend support to the compensation hypothesis. To render the picture even more complex, studies (Byrd & Boe, 2001; Granqvist & Hagekull, 2000) concluding that adults in secure relationships tend to display higher religiosity levels seem to indicate that adult attachment models are also associated with religiosity.

A possible explanation for these disparate findings is that a number of the aforementioned studies took into account general indicators of religiosity, rather than the participants' type of relationship with God. As Study-2 indicates a person might ascribe to the

⁴² The compensation hypothesis proposes that the individual's relationship with God fulfils the affective needs stemming from an inadequate or insecure parental attachment by providing a substitute attachment figure that offers the security and comfort the individual craves.

⁴³ The correspondence hypothesis suggests that the person's early parent-child attachment internal working models (IWMs) will be mirrored in the nature of his/her future attachment with the divine, i.e. if parental attachments are secure, attachment with God will also be secure and vice versa.

religious label, attend church regularly and have a non-intimate relationship with God. Therefore, taking into consideration the nature of the individual's relationship with the divine as the religiosity facet of interest, would probably serve to elucidate whether and how the manner the individual conceptualises and relates with the divine is a function of IWMs of childhood and/or adult attachment figures.

This study's results also indicated that three participants' views of God changed since their adolescence/young adulthood years. In light of the aforementioned theoretical and empirical reference points, this finding raises some interesting questions: If participants' initial conception of the divine was based on how they viewed their primary caregivers, what contributed to a later shift? Was this later shift due to a transformation of their mental mode of attachment in adulthood? Or were childhood IWMs never involved in how they conceived God?

Given the aforementioned grey areas, available literature offers scant guidance in answering these questions. While the application of attachment theory to the inquiry into how a person's concept of and relationship with God develops holds theoretical promise, further targeted research, considering the individual's relationships with significant others and God throughout the lifespan, may be required to make full use of its potential as an explanatory framework.

8.3 Religious Doubt

Results seemed to indicate that a discerning approach, which can be equated with open-mindedness, and religious doubt are two related yet distinct phenomena. It might, therefore, be plausible to argue that high levels of discernment need not necessarily be always related to high levels of religious doubt. This seemed to emerge clearly in interview data: while all participants spoke about the importance of adopting an open-minded approach towards religious teachings, only one spoke in detail about religious doubts and drew a link between this doubting and negative affect. Whilst data analysis highlighted frequency of doubting as the distinguishing aspect between participants, a look at existing literature suggests an insightful alternative explanation.

In literature the term religious doubt is employed to refer to uncertainties about religious beliefs and teaching (Krause & Wulff, 2004). While it has been theoretically proposed

that doubt can play a generative role in both religious and psychological growth⁴⁴, apart from a few exceptions⁴⁵, the majority of evidence outlines a negative association between religious doubt and well-being indicators (Krause & Wulff, 2004; Galek et al., 2007). It is important to note though that the latter studies focus primarily on frequency of religious doubts and therefore seem to tap mainly into degree of doubt.

A fruitful line of research that has been under-utilised to date involves focusing on the nature of religious doubt. In a rare study adopting this approach, Hunsberger, Alisat, Pancer and Pratt (1996) suggested that intrinsic religious doubting might have different mental health implications than institutional religious doubting. Interestingly their description of the intrinsic doubting type seems to correspond with participant-3's portrayal of her religious doubts, querying whether the deleterious effect on well-being stems from a high degree of doubt, the specific nature of her doubting or both. In light of Hunsberger et al.'s hypotheses, Study-2's data could suggest that intrinsic religious doubting may disrupt religiosity's function as a meaning-making system and possibly elicit existential anxiety.

In conclusion, one can interpret available research evidence as indicating that religious doubt is a complex and probably composite phenomenon. Whilst there is substantial evidence about the psychological correlates of degree of religious doubt, to gain a fuller picture of the relationship between this phenomenon and well-being psychological inquiry should take into account the nature of religious doubt.

8.4 Self-knowledge and Self-acceptance

Concepts of self-understanding, self-acceptance and being true to self were mentioned regularly in participants' discussions about how religion puts them in contact with an inner dimension of life and seemed to be linked to higher levels of well-being. Roger's (1951) conception of the self as composed of the real, ideal and perceived self constructs might provide a sound theoretical explanation about how these concepts might impact psychological health. Drawing from Roger's theories, self-knowledge and self-acceptance can be respectively understood as the processes of bridging the gaps between the perceived and real self and the ideal and real self. These theories also provide a

⁴⁴ E.g. Tillich (1957) spoke about the beneficial effect of doubting on religious development and Piaget (1975) on its role as a driving force in cognitive development.

⁴⁵ E.g. Hunsberger, Pratt and Pancer (2001) reporting that religious doubt may generate positive outcomes, such as strengthening personal identity and a disposition towards helping others.

theoretical link between participants' discussions about self-understanding and being true to self. Participants' descriptions of the true self appear to mirror Roger's conceptualisation of the real self, indicating that being true to self can be understood as acting in a way that is congruent with our real self, i.e. striving to act in a manner that is informed by the process of self-understanding. According to Rogers, a healthy state of being necessitates congruence between all three components.

While results highlighted religion's promotion of the practices of reflection and introspection and the value of assuming personal responsibility as the aspects that promote self-understanding and self-acceptance, further work is required to clarify religion's influence on these processes. According to Reisner and Lawson (1992), religion's capacity to either foster self-acceptance or self-alienation hinges on the balance reached between the shame generated by awareness of sin vs. the assurance of ultimate acceptance/grace. In his analysis of the salutary effects of religiosity, Ellis (2000) outlined the role of the religious philosophy of unconditional self-acceptance⁴⁶. These theoretical proposals seem to highlight the notion of God's unconditional acceptance as a religious belief that might play a crucial role in this pathway.

Finally, the results of Schlegel, Hicks, Arndt and King's (2009) studies, based on Frankl's (1959) theories, seems to indicate a link between two of the pathways postulated by Study-2. Using Bargh, Kenna & Fitzsimmons' (2002) operationalisation of the true and actual self-concept measures over five empirical studies, these authors found that true self-concept accessibility was positively related to perceptions of meaning in life, even after controlling for various predictors of meaning. They propose that the true self serves as source of meaning by imbuing other life domains (relationships, goals etc.) with legitimacy and value.

8.5 Meaning and Purpose in Life

Results appeared to confirm the relationship between religiosity and meaning in life evidenced by the literature review as well as to highlight this phenomenon's capacity to inspire pursuits and foster purpose. A number of theoretical constructs might help clarify the relationship between religiosity and higher-orders goals, purpose and meaning.

⁴⁶ According to Ellis (2000) this philosophy translates into the following line of reasoning: "*Since God accepts the sinner, though not his or her sins, I can accept myself no matter how badly I behave*" (p.32).

Data indicated that religion functions as a meaning-making framework through which participants make sense of their life and personal experiences. Narratives indirectly seemed to suggest that religion's meaning-making capacity is at least partly due to its ability to provide a worldview: an inter-related set of ideas and beliefs through which an individual interprets and interacts with the world⁴⁷. An analysis of the scant literature discussing religion's ability to provide a worldview provides some interesting leads. In the seminal book, "Religion as a cultural system", anthropologist Geertz claimed that religion offers both a model for and a model of reality. He proposed that religion attempts to connect an ethos with a comprehensive worldview⁴⁸, thus providing a metaphysical grounding for the values it purports. According to Geertz, in religion these two aspects are closely entwined in a circular relationship. More recently, Johnson, Hill and Cohen (2011) proposed a broader conceptualisation of the worldview construct that includes both metaphysics and values. In their analysis of cultural and religious worldviews, they proposed a multidimensional conceptualisation of this construct that encompasses the following components: ontology, epistemology, semiotics, axiology, teleology and praxeology⁴⁹. Despite adopting differing definitions of worldview, these theories both propose that religion provides a comprehensive and all-inclusive model about human existence that can have a powerful impact on the individual.

Investigating Johnson et al. (2011)'s conceptualisation of a religious worldview and its possible psychological correlates, might be a fruitful line of inquiry that could shed some light on questions like: Is the provision of a comprehensive worldview a sound theoretical explanation for the association between religiosity and meaning-making evidenced by the current and previous studies? Does a tighter synthesis between ontological and epistemological understandings and values confer any psychological benefits?

Finally, although it was not mentioned in every interview, results suggested that the concept of vocation might constitute a useful building block in our understanding of the relationship between religiosity and purpose in life. Feenstra and Brouwer (2008) defined vocation as finding identity and calling in relation to God's will and found a positive

⁴⁷ Worldview is a philosophical construct that is being increasingly employed in psychology, although Koltko-Rivera (2004) claimed that the theoretical analysis of the psychology of worldview has been limited and disjointed.

⁴⁸ I.e. a way of life with metaphysics.

⁴⁹ Description of worldview components: Ontology – beliefs about the nature of being, reality; Epistemology - what can be known and how knowledge can be acquired; Semiotics – use of language and symbols to describe the world; Axiology - proximate goals, values, and morals; Teleology - ultimate goals and the afterlife; Praxeology – behavioural proscriptions and prescriptions (Johnson, Hill, & Cohen, 2011).

correlation between a greater understanding of Christian vocation and achieved identity statuses. However, currently there is a dearth of research on the religious notion of vocation and its psychological impact, especially in relation to purpose in life.

8.6 Salutory Benefits of Religious Practices

8.6.1 Prayer

A multitude of prayer types have been postulated in psychological literature and recent research efforts have been dedicated to developing parsimonious prayer typologies (see Table-20).

Table 20

Prayer Typologies

Laird, Snyder, Rapoff, & Green's (2004) prayer typology
<ul style="list-style-type: none"> • Adoration - pure worship of God without reference to specific events or needs • Confession - admission of negative behaviours, and a request for forgiveness • Thanksgiving- expressions of gratitude towards God, made in reference to specific positive life experiences. • Supplication - requests for God's intervention in specific life events for oneself or others • Reception - prayers focused on opening oneself up to closeness with God
Poloma and Pendleton's (1991) prayer typology
<ul style="list-style-type: none"> • Ritual – recitation of formulaic prayers • Colloquial – conversational style of praying • Contemplative-meditative – prayers focused on establishing an intimate relationship with God and being in his presence • Petitionary – asking for God's help for self or others

Participants referred to different prayer types such as contemplating God's creation and praying for other people's need, but the majority placed emphasis on praying to get to know God and to develop a relationship with him. Adopting Laird et al.'s (2004) typology indicates that Study-2's participants mainly employ the thanksgiving, supplication and possibly adoration prayer types, with their main focus though being on the reception type. While data only revealed salutary effects of praying, given that the time afforded to delving into this religious practice during interviews was limited, this conclusion is best understood in reference to the general act of praying and the reception prayer type rather than in reference to all specific types.

A literature search yielded three studies examining how different prayer types affect psychological health⁵⁰. Poloma and Pendleton's (1989) research found that contemplative-meditative prayer predicted higher levels of existential well-being, colloquial prayer predicted higher levels of happiness and ritual prayer predicted higher levels of negative affect. Ai, Tice, Huang, Rodgers and Bolling's (2008) study of post-operative coping indicated that petitionary prayers predicted optimism and consequently well-being, while colloquial prayers predicted higher stress levels. Whittington and Scher (2010) concluded that adoration, thanksgiving and prayers of reception have salutary benefits, while confession and supplication seemed to negatively affect PWB. Analysing this study's results in conjunction with previous findings suggests some theoretical hypothesis about the relationship between prayer type and well-being (i.e. impact on well-being being dependent on whether prayers are self-focused or God-focused or supplication/petitionary prayers serving a salubrious function only in adversity) and indicates that further targeted research is required in order to elucidate the potential psychological impact of diverse prayer types.

8.7 Religious Development

While Chapter-7 employed the neutral term 'change' used in the interviews, participants' portrayal of their change in religiosity seems to warrant a discussion about religious development. I believe though that a note of caution needs to be sounded before commencing this discussion. Whilst participants did interpret their religiosity as progressing or maturing and the changes described seem to be parallel developmental processes, it would be a mistake to automatically equate any form of change to a

⁵⁰ It is relevant to note that these studies employed different typologies of prayer.

maturation of religiosity. To do so such changes would need to fit within a trajectory proposed by a coherent theoretical framework. Therefore, the following comments should be considered as pertaining to religious changes that are suggestive of religious development.

Results indicated that participants' narratives about religiosity change appeared to embody developmental processes of either a stage-like or continuous nature. Participants 2 and 4's discourse mainly hinted at a continuous change that parallels the overall development process and offered the opinion that growth in different domains occurs in conjunction. On the other hand, participants 1 and 3 spoke of specific shifts in their religious life that were to some extent directly influenced by external factors and/or specific events. Viewing these results in light of available research and theory regarding religious development helps clarify the possible implications of these findings.

Research on this topic has mainly focused on investigating which factors might be implicated in religious development. Family cohesion (Ozarak, 1989), educational level (Tamminem, 1991), parents' religious practices and beliefs (Myers, 1996), influence of peers and exposure to religious education (King et al., 2002) have all been linked to the course religious development takes in adolescence. The psychological theories that have been applied to the analysis of religious development stem from the social, i.e. modelling and social learning theories (Regnerus, Smith, & Smith, 2004) and cognitive paradigms, i.e. Piagetian theory (Elkind, 1997; Fleck, Ballard, & Reilly, 1975). The application of these theories has though focused on religious change in childhood and adolescence and has failed to take account of this phenomenon in adulthood. A notable exception is Cartwright's (2001) application of theories of post-formal thinking to the development of a relationship with a higher power throughout adulthood, although to this study's knowledge the mechanisms suggested by this article have not been tested empirically. The design of theories of religious and spiritual development/change has mainly adopted a stage-theory approach, producing a number of stage-based models such as the faith development (Fowler, 1981) and religious judgment (Oser & Gmunder, 1991) examples. These theories view religious development as sequential, with the individual progressing through discrete stages that are identifiable and qualitatively different.

Since the theoretical possibility of a continuous religious development style has been generally overlooked, Benson, Roehlkepartain and Rude (2003) have argued that our

theoretical understanding of religious/spiritual development would benefit from moving beyond an over-reliance on stage theory. Also, as argued by Dowling and Scarlett (2006) in their encyclopaedia of religious and spiritual development, another gap in this area is the lack of research and theoretical interest in religious development from emerging adulthood onwards.

Against this theoretical background it is interesting to note that Study-2's results seem to indicate that:

- Participants' religious development all followed different trajectories that in some instances seemed to follow a continuous and gradual progression whereas in other instances were characterised by identifiable and influential shifts.
- Adolescence did not feature as the determining period in the trajectories described by participants, with the major shifts described occurring in middle adulthood.

These results highlight the importance of taking into consideration the development of the individual's religiosity following adolescence and of being aware of the possibility that religious development might follow a multitude of diverse trajectories and that the psychological factors and processes implicated in these different trajectories might differ.

8.8 Theoretical Model

The theoretical model may provide a useful analytic framework for understanding the complex relationship between religiosity and PWB. This model proposes that it might be theoretically insightful to conceptualise this relationship through a framework that postulates: 1-individualised religiosity profiles composed of a set of facets that might influence well-being both in conjunction and separately, 2-the existence of a multitude of specific pathways linking religiosity to well-being, 3-a series of intermediary processes involving multiple psychological domains and 4-the possibility of certain pathways having the potential for both a salutatory and deleterious influence on well-being. By denoting religiosity's potential to influence several aspects of the individual's life (i.e. interpersonal, intrapersonal, existential and behavioural) this model suggests that this phenomenon's overall psychological impact on well-being is best understood as the cumulative result of its influence on a variety of psychological processes.

Hence the main contributions of this theoretical model can be understood to be the provision of a template within which a comprehensive theoretical understanding of the relationship of interest can be constructed, and of a set of suggested associations between religiosity facets, psychological processes and well-being. This model can be viewed as a theoretical starting point that future research can build on by testing the suggested associations and the framework's utility in bringing greater synthesis and coherence between the different strands of inquiry into the religiosity–well-being relationship.

On a more cautionary note, it is important to keep in mind that this model is unidirectional due to the focus of the interviews and that connections in the opposite direction are entirely plausible. In this regard, further progress in this field necessitates research investigating these possible connections and a potential circular element in the RM-PWB relationship.

8.9 Concluding Thoughts

Analysis of Study-2's findings within the context of existing literature and theory brought to the fore a number of avenues that may lead to greater theoretical integration among the various disparate hypothesis present in this field.

Results indicated that a meaning-system approach could potentially serve such an integrative function. That religion can serve as a meaning system is a common claim in literature, e.g. Simpson (2002), Silberman (2005), with some theorists speculating that religion can be considered as a unique meaning system (Pargament, 2002b). These claims suggest that heeding religion's call to position the sacred as life's focal point lends greater significance to all aspects of human existence. Epstein (1985) proposed that meaning systems develop in order to fulfil four basic motives: to maintain (1) a stable and coherent personal conceptual system, (2) favourable balances of emotional well-being and (3) self-esteem and (4) a positive relationship with significant others. Furthermore, literature has suggested that religion has the capacity to provide a collective meaning system that helps bond a community through a shared reality (Silberman, 2005). These theoretical proposals point towards an understanding of religion as a meaning system serving as an overarching theoretical explanation for a number of the pathways postulated by Study-2.

On the other hand, while attachment theory probably can't serve as a comprehensive

theoretical explanation for the religiosity–well-being relationship, it can illuminate the role of certain religiosity aspects, especially the individual’s relationship with the divine and the use of prayer. A current weakness of this approach is its failure to take into account theological differences about how the divine is understood across religious affiliations. This study proposes that attachment theory might be especially useful in the psychological investigation of religious affiliations that emphasise, or at least uphold, the possibility of a relational knowing of God.

Finally, taken as a whole, this study’s results seem to point towards the integrative power of religion in the person’s life; a capacity to instil connection and harmony among the individual’s diverse life domains, goals, personal strivings etc. This position echoes the view of the existential philosopher and theologian Paul Tillich (1957) about religion being able to give unity to all other concerns. Furthermore, based on Study-2’s results, one might argue that the social aspect inherent in religion enhances this integrative power. The notion of religion as an integrative force providing a sense of unity and coherence in the individual’s life might also serve as a useful theoretical framework for investigating religiosity’s influence on psychological processes on a macro-level.

Another noteworthy implication of this study is the evidence highlighting the impact of religious development on well-being. Study-2 depicts religiosity as a dynamic phenomenon whose influence on well-being is far from static across time. This is evidenced by the fact that all participants indicated that the manner their religiosity evolved had a salutary impact. Therefore these results can be understood as providing evidence that the investigation of the religiosity-well-being relationship can’t prescind from taking into consideration the individual’s religious development across the lifespan.

In conclusion, Study-2 indicates that this field’s advancement necessitates further application of fine-grained approaches (e.g. analysing the psychological correlates of diverse prayer types) to elucidate the diverse psychological impact of specific religiosity facets and of broad approaches that seek to theoretically integrate the multiple intermediary processes that appear to characterise the religiosity–well-being relationship. In conjunction, these approaches can progressively build a solid theoretical understanding of this relationship that can be utilised to inform psychological practice.

9. META-DISCUSSION & CONCLUSION

9.1 Overview

I will strive to compare, contrast and integrate the main inferences and implications of this inquiry's two strands and outline its overall limitations. Finally, this chapter will outline some future research directions and its relevance for CoP.

9.2 Is Religious Maturity as conceptualised by the Psychology of Religion related to Psychological Well-being?

9.2.1 *RM construct*

Based on the premise that MM parallel designs aim to combine research strands in an attempt to obtain a fuller understanding of the phenomenon/a under study, I will now consider what Study-2 can tell us about RM as conceptualised by Study-1 and its relationship to PWB.

Study-2 seems to highlight the development of a religiosity that is less reliant on religious prescriptions and more concerned with personal growth and relating with God. Based on this evidence, and the degree of reliance on religious prescriptions and the degree of concern with personal growth and relating with God can be understood as religious development criteria and therefore also as RM indicators. Hence one may hypothesise that a higher level of religious development seems to be characterised by higher degrees of perceived intimacy with the divine and concern with personal growth and less reliance on prescriptions.

Whilst notable differences appear between Study-2's indicators of religious development and the maturation changes postulated by the RM construct, some parallels also exist. Participant-1 refers to religion becoming a more central and overarching motivational force, less reliance on religious prescriptions seems to be related with higher levels of openness and complexity-of-beliefs, and participants 2 and 3 speak about their religiosity becoming more open, thought-out and informed by critical perspectives. These findings can hence provide some support for the conceptualisation of certain RM dimensions and indicate that it might be useful to consider broadening the RM construct by adding dimensions concerning the individual's mode of relating with the divine and the importance afforded to personal growth in his/her religious approach.

Comparing both studies' results helps shed further light on the RM–PWB relationship. Study-2 indicated that for all participants current religiosity had a more positive influence on well-being than past religiosity. Additionally, two of the religiosity facets proposed by Study-2 as exerting some influence on well-being are directly linked to the religious development process described by participants. This can be interpreted as confirming that higher levels of religious development/maturation are related to increased well-being. Furthermore, contrasting the religiosity facets postulated by Study-2 as having an influence on well-being with the RM dimensions can be particularly insightful. While there seems to be an extent of overlap between religion's role in life and master-motive, there appears to be no parallel between the perceived nature of the individual's relationship with the divine and the degree of emphasis on personal growth and the RM dimensions. Also, degree of doubt can be considered no more than a related factor to openness⁵¹. Interestingly, both studies seemingly concur that affording religiosity a central and pervasive role in life appears to influence PWB positively and hint, directly or indirectly, at a role for religious doubt in the religiosity–PWB relationship.

9.2.2 RM, Religiosity and PWB

Study-1 helped contrast the relationship of interest with the relationships between other religiosity aspects and PWB. These results seem to indicate that, in terms of religiosity–PWB relationship, these unidimensional indicators provide stronger explanatory power than degree of RM. In light of available literature, it was hypothesized that these factors possibly tap into features not captured by the RM construct, such as membership in a distinctive, well-defined social group and religious identification, themselves linked to various psychological benefits.

Study-2 provided scant evidence supporting an association between the aforementioned features and PWB. It highlighted the importance of belonging to a community for some participants, but emphasised religion's positive impact on relatedness in general rather than the advantages of membership in a distinctive social group. Furthermore, only one participant mentioned religiosity as contributing to the formation of a meaningful social and personal identity.

Significantly, in Study-2 the salutary influence of religious development was portrayed as subsuming the salubrious influence of most of the specific religiosity facets, possibly

⁵¹ As explicated in Chapter-5.

indicating that the broader RM conceptualisation mentioned previously could elicit clearer links to PWB.

9.2.3 Emotional Well-being and Life Satisfaction

Both studies seemingly indicate that RM and religiosity are more strongly related to affect than life satisfaction. While Study-1's statistics revealed the aforementioned pattern, Study-2's participants discussed religiosity's influence on affect⁵², providing no direct references to the life satisfaction construct. Given that this trend is not unique to RM, but also seemingly pertains to religiosity in general, a sound basis for inferring that degree of RM has a stronger relationship with emotional well-being than with life satisfaction does not seem present. Moreover, the interviews conducted could not devote much space to examining PWB components in turn. In conclusion, especially since past research has only investigated the relationship between RM and affect, the question of whether this construct has a different relationship with PWB components remains one for further research.

9.3 Are Meaning in life, Self-esteem and Self-actualisation Mediators of this Relationship?

Both studies seemingly concur about meaning in life acting as a mediator/intermediary process in the RM-PWB relationship. In Study-1, life regard emerged as a mediator in the relationship between master-motive and PWB. In Study-2, sense of meaning appeared to be implicated in an intermediary pathway linking religiosity and well-being, with narratives also suggesting that higher levels of religious development have a greater capacity to act as a meaning-making framework. A parallel also appears between the inferences made by these studies about this factor's role. Study-1 indicated that when paired with high openness levels, master-motive seems to stop exerting a salutary influence through meaning in life, while Study-2 hinted that religious doubting may disrupt religiosity's function as a meaning-making system. Of note, study-2 portrayed religiosity's impact on existential well-being in general; highlighting its capacity to addresses other existential issues apart from meaninglessness, like suffering and death.

Study-1 offered some intriguing results about openness, self-esteem and PWB that probably defy a single explanation. An overlap between religious doubt and openness as measured by the CUV-4 and a possible religious doubt–self-esteem–PWB pathway were

⁵² Participants cited a variety of feelings such as peacefulness and guilt.

offered as plausible explanations. Other alternative explanations include lower self-esteem fuelling religious doubts and a common psychological factor accounting for both doubts about self and personal beliefs. Unfortunately Study-2 provided no evidence that can help evaluate the merits of these explanations, but offered some interesting pointers about the relationship between RM and the self. It pointed towards religiosity, especially higher levels of religious development, facilitating self-understanding and self-acceptance, but provided no direct indications regarding its influence on self-esteem. As indicated by Chapter-8's brief literature review, religiosity's impact on self might depend on the balance in the individual of the effects exerted by beliefs about divine acceptance and sin. In this regard, it is relevant to note that all participants had arrived at a position where they either felt accepted by God or had distanced themselves from beliefs causing guilt. This could explain the non-mention of esteem issues in interviews. Interestingly one participant, echoing Greenway, Milne and Clark's (2003) hypothesis, proposed that a positive view of God is associated with a positive view of self. One could, therefore, suggest that esteem issues are more prevalent in religious individuals that hold negative views of God and experience a non-intimate relationship with the divine.

Both studies seemingly provided evidence indicating that level of religious development/maturity is positively related to actualising tendency. In Study-2, the pursuit of personal betterment was strongly associated to higher religious development levels, with participants 1 and 2 expressing how religion aids their striving to fulfil personal potential. Regarding PWB, Study-1 indicated that self-actualisation does not seem to explain the positive relationship between master-motive and this construct over and above meaning in life. Study-2 did not highlight specific links between self-actualisation and well-being, but depicted pursuit of personal betterment as providing satisfaction.

9.4 What other Factors and Process might help explain this Relationship?

Study-2 provided fruitful evidence that shed light on a multitude of factors and processes that, apart from postulated mediators, might possibly be implicated in the relationship of interest. This study's model indicated that the following factors/processes⁵³ might be involved in the religiosity-PWB relationship:

⁵³ Grouped according to proposed pathways.

The individual's potential for healthy interpersonal relatedness-encompasses religiosity's influence on the individual's capacity for relatedness and suggests a potential intermediary role for the constructs of sense of connection and belonging.

The individual's ability to connect with the inner dimension of life-proposes that self-understanding, self-acceptance and sense of appreciation might all be involved in the relationship of interest.

The application of a religious framework in the individual's striving towards higher-order goals and existential fulfilment-highlights religiosity's impact on existential well-being, and ascribes an intermediary role to pursuits like personal betterment and striving to transcend self-centeredness.

The utilisation of religion's potential as a source of guidance and inspiration-portrays religion's guiding role and proposes that religiosity might influence well-being through the processes of behavioural control and motivation.

Narratives indicated that higher degrees of perceived intimacy with God and a greater emphasis on personal growth within participants' religious approach had a positive influence on the latter three processes and a consequent salutary impact on well-being. Conversely, no direct evidence was found associating level of religious development with the first process.

9.5 How can this Relationship be Theoretically understood?

This inquiry's strands provided mixed evidence regarding the intermediary role of the three postulated mediators, proposed an intermediary pathway linking religiosity to well-being that is directly relevant to existential theory and seemed to provide some support for the applicability of hierarchy of needs (Maslow, 1943), actualising tendency (Rogers, 1951) and will-to-meaning (Frankl, 1967) theories.

Whereas both studies seemed to indicate that a mature religiosity is positively related to the individual's drive for self-actualisation, indications about self-esteem were more ambiguous. On the one hand, openness was negatively related to fulfilment of esteem needs, and on the other hand, it was suggested that perceived intimacy with and positive view of God are related to higher self-esteem. Notably the Hierarchy of Needs theory can, in an explanatory sense, subsume Study-2's suggestion that religiosity can influence well-

being through the promotion of sense of belonging and connection. In light of the sequential nature of this theory's typology of needs, this research's inferences can be interpreted as questioning whether religiosity has the same degree of influence in the fulfilment of every need level. It might be fruitful to explore which facets determine religiosity's pertinence for different need levels and whether religious development/maturity plays a crucial role in this regard.

Both studies underlined religion's potential as a meaning-making framework, indicating that it can both help and hinder the generation of meaning. Results seem to paint a picture of religiosity being, by its very nature, applicable to the inherent striving for meaning described by Frankl (1959). In line with the will-to-meaning concept, this research's emphasis on meaning-making as a mediator/intermediary process in the relationship of interest can be interpreted as suggesting that a significant portion of religiosity's overall effect on PWB depends on its efficacy as a meaning-making framework in one's life. Findings also hint at religious development/maturity playing a valuable role in enhancing the effectiveness of this framework. Finally, the apparent congruence between Frankl's theories and the meaning-system approach endorsed by Study-2 provides further support for the relevance of these theories for this field.

9.6 Conclusion

The utilisation of a MM research orientation made possible the juxtaposition of the fruits of testing the relationship between well-developed measures of RM and various pertinent psychological variables, with insights garnered from a qualitative inquiry about religiosity, religious development and well-being. This juxtaposition enabled an incisive exploration of the potential relationship between religious maturation and well-being that bore the following fruit.

I believe this research can be viewed as providing some interesting clues about the religiosity phenomenon, i.e. that religiosity is probably best understood as a dynamic phenomenon, with positive and negative potentials for individual well-being, which is prone to change throughout the lifespan. In conjunction with this support for the theoretical basis behind RM, it offered insightful hints about this construct's conceptualisation and its potential relationship with PWB.

RM served as a useful starting point with findings seemingly providing support for the conceptualisation of master-motive and mixed findings for the other dimensions. In terms of influence on PWB, both studies seemed to point towards affording religiosity a central and pervasive role in life as having a salubrious effect. Furthermore, this research proposes that religiosity facets concerning the nature of the individual's relationship with the divine, and the importance afforded to personal growth in one's religious approach be taken into consideration as potential RM dimensions. Results also appear to indicate that a broader RM conceptualisation encompassing these facets could serve to explain the multitude of salutary and deleterious pathways through which religiosity might influence PWB.

Both strands seemed to offer tentative support for the explanatory benefits of a humanistic-existential theoretical frame and place special emphasis on meaning-making playing a primary intermediary role. Moreover, Study-2 suggested that a set of factors/processes extrinsic to this theoretical frame may be implicated in the RM-PWB relationship. This may indicate the need to apply broader theoretical approaches within this field. A line of inquiry exploring religion's capacity as integrative force serving to unify life's disparate concerns could be one such an approach.

9.7 Limitations and Interpretative Guidance

I believe that a comprehensive understanding of the aforementioned inferences and implications cannot prescind from an awareness of each study's limitations and the shortcomings of the overall design.

9.7.1 Study-1

The skewed distribution of ethnicity and educational level means that the associations uncovered between religiosity and PWB variables may pertain to a white and highly-educated population and therefore limits the potential generalisability of the findings. Also, religiosity variables such as church attendance were assessed using non-validated measures, meaning that the extent of these measures' reliability and validity is questionable.

9.7.2 Study-2

Given that the maximum variation sampling strategy adopted could not be fully implemented for pragmatic reasons, a low RM-low PWB profile was missing in Study-2's sample. This may have restricted this study's investigative lens and its ability to shed light on existing intermediary pathways, particularly deleterious ones. The nature of the qualitative method employed means that the emergent themes and model do not represent theoretical completeness, but are best understood as suggestive of data, offering a basis for future development.

9.7.3 Overall limitations

Utilising MM meant that I had to use the limited resources at my disposal to implement two studies; this translated to a smaller quantitative sample and fewer initial interviews/reduced possibility of re-interviewing, to the possible detriment of the rigour of both studies. Hopefully, the benefits afforded by this method outweighed this shortcoming.

Another possible limitation is tied to the implementation of this research's parallel mixed design. The fact that the data collection stages were carried out a few months apart meant that there was a significant time-gap between analytic stages that might have caused added difficulties in carrying out a parallel analysis of data sources. I had to make a particular effort to bracket the inferences and implications of the results of Study-1 when analysing the data of Study-2.

While I realise that it can be argued that this bracketing is only possible to a certain degree, I feel that the guidance provided by the constructivist GT analytic strategies, peer debriefing and the use of memos helped to augment Study-2's credibility. The latter were particularly useful in helping me remain grounded in the interview data and to this end I strove to include interview excerpts in memos so as to always keep the original data in sight (refer to Appendix-P for illustration of a memo). To give a specific example; throughout the process of relating the categories and properties pertaining to Theme-4 to each other, I made a particular effort to utilise memos to ensure that the emergent theme was reflective of participants' experiences, rather than the knowledge that Study-1 had highlighted meaning in life's potential mediating role in the religiosity-PWB relationship.

Finally, I believe that this research's ability to elucidate the relationship of interest was restricted by RM's dynamic nature. On one hand, Study-1's cross-sectional nature implied that it could investigate the relationship between variables at a fixed point in time, but was unable to clarify the impact of RM changes on PWB. On the other hand, whilst Study-2 was able to capture participants' experiences of religious development and its influence on well-being, there are limits to the incisiveness of a retrospective analysis. Hence, exploring the relationship of interest at different points in time would capture the impact of RM on well-being more precisely.

9.8 Future Research Directions

A number of suggestions for potentially highly generative analytic work can be elicited from this research's conclusions.

9.8.1 Religiosity

On a general note, I think there are areas regarding the conceptualisation and measurement of religiosity deserving further attention. The nature of religious doubt and the relationship between different types of doubts and well-being is one such area. Study-2 indicated that religious doubt can differ by source and subject-matter: for example highlighting the presence of doubts stemming from adverse experiences, such as suffering, and perceived conflict between science and religion. In this regard, the development of topologies of doubt could serve as a useful analytic tool (Krause & Ellison, 2009).

I believe that research into religiosity's psychological correlates could benefit from attempting to capture this complex phenomenon by constructing case-by-case profiles composed of diverse religiosity facets. These could, for example, include RM and other facets of psychological relevance such as degree and type of religious doubts. Given the exploratory nature of such work, qualitative and MM research methods could be particularly useful in generating evidence leading to the development of religiosity typologies.

9.8.2 The RM Construct

To further our understanding of the RM construct and consequentially clarify the relationship of interest, it might be fruitful to take into consideration a theoretical

understanding of religious maturation that, in conjunction with Allport's theories, encompasses facets concerning the individual's mode of relating with the divine and the relevance afforded to personal growth in one's religious approach.

An over-reliance on student samples is one of this field's current lacunae. If, as this research indicates, religious development is a process unfolding beyond adolescence, a better understanding of RM necessitates studies exploring this construct from emerging adulthood onwards. Moreover, the relationship between religious and normative development has not been afforded its due importance by research (DeHaan, Yonker, & Affholter, 2011). In this regard, there are numerous questions that would be insightful to explore: Does normative development influence religious development? Or is this relationship bidirectional? Does religiosity exert some influence on normative development? There appear to be sound arguments for proposing that religious maturation is concurrent with the development of other domains. Suffice to say that the Allportian theories forming the basis of RM are themselves a derivative of general personality theory. This position could imply that the factors that comprise religious and normative development are essentially the same and that psychological maturity could serve as a strong third variable explanation for RM's relationship with PWB. However, one might argue that, despite being subject to universal maturation processes, religiosity's specificity as a search for the sacred renders it a unique construct with a potential for distinctive effects on psychological functioning. It would be fruitful for research to investigate these hypotheses and analyse the extent of overlap between RM's and psychological maturity's influences on PWB. Finally, research investigating the applicability of current RM conceptualisations across religious affiliations is definitely a necessary prerequisite for the advancement of this construct.

9.8.3 RM and Well-being

In line with Chapter-8's arguments, these suggestions will be divided into narrow-focused and broad-focused, theory-based approaches.

9.8.3.1 Narrow-focused Approaches

Confirmatory and exploratory investigation of the pathways proposed by Study-2 could translate into a number of fruitful research directions. Suggestions for under-studied areas include:

- Research on the religious notion of vocation⁵⁴ and its influence on psychological functioning, especially in respect to sense of purpose.
- Research investigating the interplay between the perceived nature of the individual's relationship with God, his/her use of diverse prayer types and PWB.

9.8.3.2 Broad-focused Approaches

Investigations into religion's function as a meaning-making system and an integrative force could help generate overarching theoretical frameworks that subsume the intermediary processes operating between RM and PWB. Regarding the former, comparing religious worldviews and non-theistic worldviews in terms of their impact on the individual's life could constitute a useful starting point. Hypothetically, being centred on the sacred rather than the self, a religious worldview might have different psychological correlates. Regarding the latter, this hypothesis could be examined by exploring sense of coherence and/or sense of conflict/fragmentation across varying levels of religious development.

9.9 Relevance for Counselling Psychology

9.9.1 Praxis

The importance of the religious dimension of life to the counselling psychologist is highlighted by research outlining religious clients' preference for discussing spiritual and religious issues in counselling (Misumi, 1993) and highlighting a desire for religious and/or spiritual topics to be addressed among a general sample of psychotherapy clients (Knox, Catlin, Casper, & Schlosser, 2005; Rose, Westefeld, & Ansley, 2008).

Study-2 highlights how religion constitutes a major and pervasive influence in certain individuals' lives. As this research indicates, for such religious individuals this dimension of life has the potential to have a deep and far-reaching influence on the psychological domain. Hence I believe that, in therapy, a holistic understanding of these persons' difficulties and resources cannot prescind from adequate attention to this dimension. Furthermore, existing research has indicated that addressing religious or spiritual needs in psychotherapy might facilitate the healing process (Post & Wade, 2009; Koenig, George, & Peterson, 1998; Azhart, Varma, & Dharap, 1994).

⁵⁴ Possibly utilising the recently developed 'Calling and Vocation Questionnaire', a validated measure (Brandy, 2011) based on Dik and Duffy's (2009) theoretical conceptualization of calling.

Hereof, this research provides a contribution to CoP practice by enhancing the awareness of the diverse religious aspects and issues that may be relevant for psychological health. It indicates that a practitioner seeing a religious client will be in a stronger position if they have an idea of the trajectory of their religious development, the extent of religion's motivational role, type of relationship with God, the nature of their religious doubts and how comfortable they are with them, and what kind of pursuits their religiosity promotes.

Such an assessment of the individual's religiosity coupled with knowledge of the potential salutary and deleterious influence of different religiosity aspects would enhance the practitioner's ability to meet such a client's needs. Firstly, such sensitivity to an important area of the client's life could help foster a stronger therapeutic relationship, and secondly, the practitioner would be better able to take an informed decision about the direction to pursue. In certain situations they might choose to adopt a strength-based focus and emphasize aspects of religious life that are salutary and/or can act as a resource e.g. the role of certain religious beliefs and practices in fostering self-acceptance. In others they might choose to target aspects that directly or indirectly contribute to the presenting problem (e.g. the relationship between a view of God as demanding and a negative view of self) and, in line with the therapeutic model adopted, sensitively bring them to client's attention. In this respect, as this research suggests, the practitioner needs to be mindful that religion may serve as a source of guidance and a meaning-making framework and that religious notions, such as God's will, vocation etc., might be integral to how a person perceives and understand the world. Hence a psychologist's job is not to challenge the adequacy of these notions or frameworks, but to help the client understand how they impact the psychological domain and to collaboratively and sensitively strive to develop ways they can contribute to growth and healing.

Whilst I certainly appreciate that this approach is a challenging endeavour that has its perils, I firmly believe that this type of challenge is part and parcel of what a counselling psychologist's work should be about.

9.9.2 Training

HCPC's standards of proficiency guide explicitly states that psychologists in their pursuit of profession-specific knowledge must strive to understand the impact of differences in religion on PWB or behaviour. This research indicates that the attainment of this competency requires an understanding of the diverse facets of religiosity, the multitude of pathways through which religiosity might influence psychological functioning and the

developmental trajectories religiosity might follow. In this regard, the incorporation of this subject-matter in CoP training programmes could serve in enhancing trainees' ability to competently help a wider client-spectrum.

9.10 Personal Reflections and Concluding Thoughts

I experienced this research process as a stimulating, time-consuming and intellectually demanding endeavour that presented diverse challenges. Employing a MM research orientation was definitely one such challenge and, although at times the demands of this orientation left me feeling disoriented, I feel it helped put me in touch with the essence of what research is about. I found the meta-inference stage particularly demanding as sometimes the incorporation of a constructivist and positivist paradigm in the same inquiry space seemed unfeasible and fruitless. In this respect, adopting a dialectical mode of reasoning as the interpretative key helped guide me through the demands of this stage.

The danger of my personal experience of religion as a major guiding and inspirational force acting as a potential bias constituted another major challenge. Moreover, during data analysis I realised that comprehending fully participant's discourse about prayer, afterlife and other religious notions necessitated a bracketing of my personal understanding of these concepts. I therefore sought to remain cognisant about potential assumptions deriving from personal experiences throughout the process and to focus on remaining true to original data and adopting faithfully the analytic skills provided by a parallel mixed design.

In this respect I viewed my role in the research process as akin to a detective using the analytic tools at his disposal to piece together available evidence and clues into a coherent and veritable response to the questions at hand. This task demanded a lengthy process composed of cycles of data scrutiny, reflection, deconstruction of constructs, compilation of process notes and the listing and debating of the merits of alternative inferences. Regular peer-debriefing was especially helpful in this process as it provided the input of an external party who from a detached position could shed light on areas/aspects that were escaping my attention. I also endeavoured to make the research process as transparent as possible by explaining clearly the rationale behind the decisions taken at each stage and making the person of the researcher discernable throughout this piece. Ultimately I hope I managed to put the reader in a position where s/he can be the judge of the credibility of this research's conclusions.

I end this CoP thesis by highlighting this discipline's potential for contributing to the psychology-religion interface. I believe that the humanistic value system underpinning this discipline and its seeking to "elucidate, interpret and negotiate between perceptions and worldviews but not to assume the automatic superiority of any one way of experiencing, feeling, valuing and knowing" (British Psychological Society, 2008,p.1-2) renders it adept to act as a bridge between the world of psychology and religion. Hence I hope that CoP will strive to give further prominence to this very human search for the sacred and to take a lead in advancing an interface that can be of great benefit to the care of the individual.

REFERENCES

- Abdel-Khalek, A. M. (2011). Religiosity, subjective well-being, self-esteem, and anxiety among Kuwaiti Muslim adolescents. *Mental Health, Religion & Culture, 14*(2), 129-140.
- Ai, A. L., Tice, T. N., Huang, B., Rodgers, W., & Bolling, S. F. (2008). Types of prayer, optimism, and well-being of middle-aged and older patients undergoing open-heart surgery. *Mental Health, Religion, and Culture, 11*, 131–150.
- Alder, M. G. (1989). An empirical study of Christian religious maturity. *Pastoral Psychology, 37*(3), 153-160.
- Allport, G. W. (1950). *The individual and his religion*. New York: Macmillan.
- Allport, G. W. (1966). The religious context of prejudice. *Journal for the Scientific Study of Religion, 5*, 447-457.
- Allport, G. W., & Ross, M. M. (1967). Personal religious orientation and prejudice. *Journal of Personality and Social Psychology, 5*, 432-443.
- Antonovsky, A. (1979). *Health, stress and coping*. San Francisco: Jossey-Bass.
- Ardelt, M., & Koenig, C. S. (2007). The importance of religious orientation and purpose in life for dying well: Evidence from three case studies. *Journal of Religion, Spirituality & Aging, 19*(4), 61-79.
- Atkinson, B. E., & Maloney, N. H. (1994). Religious maturity and psychological distress among older Christian women. *The International Journal for the Psychology of Religion, 4*(3), 165-179.
- Azhar, M. A., Varma, S. L., & Dharap, A. S. (1994). Religious psychotherapy in anxiety disorder patients. *Acta Psychiatrica Scandinavica, 90*, 1-3.

- Bagley, C., & Mallick, K. (1997). Self-esteem and religiosity: Comparison of 13- to 15-year old students in Catholic and public junior high schools. *Canadian Journal of Education, 22*, 89–92.
- Bagley, C., Verma G., Mallick, K., & Young, L. (1979). *Personality, Self-esteem and Prejudice*. Farnborough: Saxon House.
- Bargh, J. A., McKenna, K. Y., & Fitzsimmons, G. M. (2002). Can you see the real me? Activation and expression of the “true self” on the internet. *Journal of Social Issues, 58*, 34–58.
- Batson, C. D. (1976). Religion as prosocial: Agent or double agent? *Journal for the Scientific Study of Religion, 15*, 29-45.
- Batson, C. D., Schoenrade, P. A., & Ventis, W. L. (1993). *Religion and the Individual*. New York: Oxford.
- Batson, C. D., & Stocks, E. L. (2004). Religion: Its core psychological functions. In J. Greenberg, S. L. Koole, & T. Pyszczynski (Eds.), *Handbook of experimental existential psychology* (pp.141-155). New York: Guilford Press.
- Batson, C. D., & Ventis, W. L. (1982). *The religious experience: A social-psychological perspective*. New York: Oxford University Press.
- Battista, J., & Almond, R. (1973). The development of meaning in life. *Psychiatry, 36*, 409–427.
- Baumeister, R. F. (1998). The self. In D. Gilbert, S. Fiske, & G. Lindzey (Eds.), *The handbook of social psychology* (pp. 680–740). New York: Random House.
- Beit-Hallahmi, B., & Argyle, M. (1997). *The psychology of religious behavior, belief and experience*. New York: Routledge.

- Belar, C. D., & Perry, N. W. (1992). National conference on scientist-practitioner education and training for professional practice of psychology. *American Psychologist*, 47, 71-75
- Benson, P. L., Donahue, M. J., & Erickson, J. A. (1993). The Faith Maturity Scale: Conceptualisation, measurement and empirical validity. *Research on the Social Scientific Study of Religion*, 5, 1-26.
- Bergin, A. E. (1980). Psychotherapy and religious values. *Journal of Consulting and Clinical Psychology*, 48, 95-105.
- Bergin, A. E. (1983). Religiosity and mental health: A critical re-evaluation and meta-analysis. *Issues in Religion and Psychotherapy*, 9(3), 5-22.
- Bergin, A. E. (1991). Values and religious issues in psychotherapy and mental health. *American Psychologist*, 46, 394-403.
- Bhaskar, R. (1998). Philosophy and scientific realism. In M. Archer, R. Bhaskar, A. Collier, T. Lawson & A. Norrie (Eds.), *Critical realism: Essential readings* (pp. 16-47). London: Routledge.
- Blaine, B., & Crocker, J. (1995). Religiousness, race, and psychological well-being: Exploring social-psychological mediators. *Personality and Social Psychology Bulletin*, 21, 1031-1041.
- Bregman, L. (2006). Spirituality: A glowing and useful term in search of a meaning. *Omega*, 53(1-2), 5-26.
- British Psychological Society (BPS, 2008). *Division of counselling psychology professional practice guidelines*. Leicester, UK: British Psychological Society.
- Bryant, A., & Charmaz, K. (2007). Grounded theory research: Methods and practices. In A. Bryant & K. Charmaz (Eds.), *The Sage handbook of grounded theory* (pp. 1-28). Thousand Oaks, CA: Sage.

- Burris, C. (1999). Faith development interview guide. In P. Hill & R. Hood (Eds.), *Measures of religiosity*. Birmingham, AL: Religious Education Press.
- Byrd, K. R., & Boe, A. (2001). The correspondence between attachment dimensions and prayer in college students. *International Journal for the Psychology of Religion, 11*, 9-24.
- Byrd, K. R., Hageman, A., & Isle, D. B. (2007). Intrinsic motivation and subjective well-being: The unique contribution of intrinsic religious motivation. *International Journal for the Psychology of Religion, 17*, 141-156.
- Cartwright K. B. (2001). Cognitive developmental theory and spiritual development. *Journal of Adult Development, 8*(4), 213-220.
- Chamberlain, K., & Zika, S. (1988). Measuring meaning in life: An examination of three scales. *Personality and Individual Differences, 9*, 589-596.
- Charmaz, K. (2000). Grounded theory. objectivist and constructivist methods. In N. K. Lincoln & Y. S. Denzin (Eds.), *Handbook of qualitative research* (pp. 509-535). Thousand Oaks: Sage.
- Charmaz, K. (2001). Qualitative interviewing and grounded theory analysis. In J. Gubrium & J. Holstein (Eds.), *Handbook of interview research: Context and method* (pp. 675-694). Thousand Oaks, CA: Sage.
- Charmaz, K. (2006). *Constructing grounded theory: A practical guide through qualitative analysis*. London: Sage.
- Chiriboga, D. A. (1982). Consistency in adult functioning: The influence of social stress. *Aging and Society, 2*, 7-29.
- Coyle, A. (2008). Qualitative methods and 'the (partly) ineffable' in psychological research on religion and spirituality. *Qualitative Research in Psychology, 5* (1), 56-67.

- Contrada, R. J., Goyal, T. M., Cather, C., Rafalson, L., Idler, E. L., & Krause, T. J. (2003). Psychosocial factors in outcomes of heart surgery: The impact of religious involvement and depressive symptoms. *Health Psychology, 23*, 227–238.
- Crandall, R. (1986). Short Index of Self-Actualization Scale. *Journal of Social Behaviour and Personality, 6*(5).
- Creswell, J. W. (1998). *Qualitative inquiry and research design: Choosing among five traditions*. US: Sage Publications.
- Creswell, J. W. (2003). *Research design: Qualitative, quantitative, and mixed method approaches*. Thousand Oaks, CA: Sage.
- Creswell, J. W. (2005). *Educational research: Planning, conducting, and evaluating quantitative and qualitative research* (2nd Ed.). NJ: Pearson Merrill Prentice Hall.
- Crumbaugh, J. C., & Maholick, L. T. (1964). An experimental study in existentialism: The psychometric approach to Frankl's concept of noogenic neurosis. *Journal of Clinical Psychology, 20*, 200-207.
- Debats, D. L. (1998). Measurement of personal meaning: The psychometric properties of the life regard index. In P. T. P. Wong & P. Fry (Eds.), *The human quest for meaning: A handbook of psychological research and clinical applications* (pp. 111-140). Mahwah, NJ: Lawrence Erlbaum Associates.
- DeHaan, L. G., Yonker, J. E., Affholter, C. (2011). More than enjoying the sunset: Conceptualization and measurement of religiosity for adolescents and emerging Adults and its implications for developmental inquiry. *Journal of Psychology and Christianity, 30*(3), 184-190.
- Denzin, N. K., & Lincoln, Y. S. (2011). *Handbook of qualitative research* (4th Ed.). Los Angeles: Sage.

- Dickie, J. R., Ajega, L. V, Kobylak, J. R., & Nixon, K. M. (2006). Mother, father, and self: Sources of young adults' God concepts. *Journal for the Scientific Study of Religion, 45*, 57-71.
- Dik, B. J., & Duffy, R. D. (2009). Calling and vocation at work: Definitions and prospects for research and practice. *The Counseling Psychologist, 37*(3), 424-450.
- Dik, B. J., Eldridge, B. M., Steger, M. F., & Duffy, R. D. (2012). Development and validation of the Calling and Vocation Questionnaire (CVQ) and Brief Calling Scale (BCS). *Journal of Career Assessment, 20*, 242-263.
- Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The Satisfaction With Life Scale. *Journal of Personality Assessment, 49*, 71-75.
- Diener, E., Suh, E. M., Lucas, R. E., & Smith, H. L. (1999). Subjective well-being: Three decades of progress. *Psychological Bulletin, 125*, 276-302.
- Donahue, M. J. (1985). Intrinsic and extrinsic religiousness: Review and meta-analysis. *Journal of Personality and Social Psychology, 48*, 400-419.
- Donahue, M., & Benson, P. (1995). Religion and the well-being of adolescents. *Journal of Social Issues, 51*, 145-156.
- Dougherty, S. G., & Worthington, E. L. (1982). Preferences of conservative and moderate Christians for four Christian counselors' treatment plans. *Journal of Psychology and Theology, 10*, 346-354.
- Dowling, E. M., & Scarlett, G. W. (2006). *Encyclopedia of religious and spiritual development*. Thousand Oaks, CA: Sage.
- Ebersole, P. (1991). The short index of self-actualization and purpose in life. *Psychological Reports, 69*, 550.
- Elkind, D. (1997). The origins of religion in the child. In B. Spilka & D. N. McIntosh (Eds.), *The psychology of religion* (pp. 97-104). Boulder, CO: Westview Press.

- Elliott, M. R., & Hayward, D. (2009). Religion and life satisfaction worldwide: The role of government regulation. *Sociology of Religion*, 70(3), 285-310.
- Ellis, A. (1980). Psychotherapy and atheistic values: A response to A. E. Bergin's psychotherapy and religious issues. *Journal of Consulting and Clinical Psychology*, 48, 635-639.
- Ellis, A. (1986). *The case against religion: A psychotherapist's view and the case against religiosity*. TX: American Atheist Press.
- Ellis, A. (2000). Can rational emotive behavior therapy (REBT) be effectively used with people who have devout beliefs in God and religion? *Professional Psychology: Research and Practice*, 31(1), 29-33.
- Ellison, C. G., Gay, D. A., & Glass, T. A. (1989). Does religious commitment contribute to individual life satisfaction? *Social Forces*, 68(1), 100-123.
- Emmons, R. A. (1999). *The psychology of ultimate concerns: Motivation and spirituality in personality*. New York: Guilford Press.
- Emmons, R. A. (2005). Striving for the sacred: Personal goals, life meaning, and religion. *Journal of Social Issues*, 61(4), 731-745.
- Epstein, S. (1985). The implications of cognitive-experiential self-theory for research in social psychology and personality. *Journal of the Theory of Social Behavior*, 15(3), 283-310.
- Fanni Asl, A., Narimani, M., & Ghaffari, M. (2008). A survey of relationship between religious beliefs practice, self-esteem, and mental health and scholar performance of collegians. *The Social Sciences*, 3, 359-363.
- Feather, N. T., & Barber, J. G. (1983). Depressive reactions and unemployment. *Journal of Abnormal Psychology*, 92, 185-195.

- Feenstra, J. S., & Brouwer, A. M. (2008). Christian vocation: Defining relations with identity status, college adjustment, and spirituality. *Journal of Psychology and Theology, 36*(2), 83-93.
- Feinsilver, A. (1960). *In search of religious maturity*. Yellow Springs, OH: Antioch Press.
- Fowler, J. W. (1981). *Stages of faith: The psychology of human development and the quest for meaning*. NY: Harper Collins Publishers.
- Fuller, A. R. (1994). *Psychology and religion: Eight points of view*. London: Rowman and Littlefield Publishers.
- Francis, L. J. (2000). The relationship between bible reading and purpose in life among 13–15-year olds. *Mental Health, Religion and Culture, 3*, 27–36.
- Frankl, V. E. (1959). *Man's search for meaning*. Boston: Beacon Press.
- Frankl, V. E. (1965). *Man's search for meaning: An introduction to logotherapy*. Boston: Beacon Press.
- Frankl, V. E. (1967). *Psychotherapy and existentialism: Selected papers on logotherapy*. NY: Simon and Schuster.
- French, S., & Joseph, S. (1999). Religiosity and its association with happiness, purpose in life, and self-actualisation. *Mental Health, Religion and Culture, 2*(2), 117-120.
- Freud, S. (1964). (Original work published 1927). *The future of an illusion*. Garden City: Doubleday.
- Fromm, E. (1967). *Psychoanalysis and religion*. New York: Bantam Books.
- Galek, K., Krause, N., Ellison, C. G., Kudler, T., & Flannelly, K. J. (2007). Religious doubt and mental health across the life span. *Journal of Adult Development, 14*, 16–25.

- Gardner, R. C. (2001). *Psychological statistic using SPSS for Windows*. New Jersey: Prentice Hall.
- Gartner, J., Larson, D. B., & Allen, G. D. (1991). *Religious commitment and mental health: A review of the empirical literature*. *Journal of Psychology and Theology*, *19*, 6-25.
- Gebauer, J. E., Sedikides, C., & Neberich, W. (2012). Religiosity, social self-esteem, and psychological adjustment: On the cross-cultural specificity of the psychological benefits of religiosity. *Psychological Science*. Advance online publication. doi:10.1177/0956797611427045.
- Geertz, C. (1993). Religion as a cultural system. In C. Geertz (Ed.), *The interpretation of cultures: Selected essays* (pp. 87-125). US: Fontana Press.
- George, L. K., Ellison, C. G., & Larson, D. B. (2002). Explaining the relationships between religious involvement and health. *Psychological Inquiry*, *13*, 190-200.
- Glaser, B. G. (1994). Theoretical elaboration of quantitative data. In B. G. Glaser (Ed.), *More Grounded Theory Methodology: A Reader* (pp.197-232). CA: Sociology Press.
- Glaser, B., & Strauss, A. (1967). *The discovery of grounded theory: Strategies for qualitative research*. Chicago: Aldine.
- Golsworthy, R., & Coyle, A. (1999). Spiritual beliefs and the search for meaning among older adults following partner loss. *Mortality*, *4*, 21-40.
- Goulding, C. (1999). *Grounded Theory: Some reflections on paradigm, procedures and misconceptions*. (Working Paper Series June 1999). Retrieved May 9, 2012, from <http://wlv.openrepository.com/wlv/bitstream/2436/11403/1/Goulding.pdf>.
- Grandqvist, P., & Hagekull, B. (2000). Religiosity, adult attachment, and why "singles" are more religious. *International Journal for Psychology and Religion*, *10*, 111-123.

- Greene, J. C. (2007). *Mixed methods in social inquiry*. San Francisco: Jossey-Bass.
- Greene, J. C., & Caracelli, V. J. (2003). Making paradigmatic sense of mixed methods practice. In A. Tashakkori & C. Teddlie (Eds.), *Handbook of mixed methods in social and behavioural research* (pp. 91-110). USA: Sage.
- Greenfield, E. A., & Marks, N. F. (2007). Religious social identity as an explanatory factor for associations between more frequent formal religious participation and psychological well-being. *The International Journal for the Psychology of Religion*, 77(3), 245-259.
- Greenway, A. P., Milne, L. C., & Clarke, V. (2003). Personality variables, self-esteem and depression and an individual's perception of God. *Mental Health, Religion & Culture*, 6(1), 45-57.
- Hackney, C. H., & Sanders, G. S. (2003). Religiosity and mental health: A meta-analysis of recent studies. *Journal for the Scientific Study of Religion*, 42(1), 43-55.
- Hall, D. E., Meador, K. G., & Koenig, H. G. (2008). Measuring religiousness in health research: Review and critique. *Journal of Religious Health*, 4, 134-163.
- Hanson, W. E., Creswell, J. W., Plano Clark, V. L., Petska, K. S., & Creswell, J. D. (2005). Mixed methods research designs in counseling psychology. *Journal of Counseling Psychology*, 52(2), 224-235.
- Hayes, N., & Joseph, S (2003). Big 5 correlates of three measures of subjective well-being. *Personality and Individual Differences*, 34(4), 723-727.
- Health and Care Professions Council [HCPC, UK]. (2012). *Standards of proficiency: Practitioner psychologists*. Retrieved, November 20, 2012, from http://www.hpcuk.org/assets/documents/10002963SOP_Practitioner_psychologists.pdf.
- Heron, J. (1998). Validity in co-operative inquiry. In P. Reason (Ed.), *Human inquiry in action* (pp.3-17). Chichester: Wiley.

- Hill, C. H., & Pargament, K. I. (2008). Advances in the conceptualization and measurement of religion and spirituality: Implications for physical and mental health research. *Psychology of Religion and Spirituality, 5*(1), 3–17.
- Hill, P. C., Pargament, K. I., Hood, R. W., Mc-Cullough, M. E., Swyers, J. P., Larson, D. B., et al. (2000). Conceptualizing religion and spirituality: Points of commonality, points of departure. *Journal for the Theory of Social Behaviour, 30*, 51–77.
- Hood, J. C. (2007). Orthodoxy vs. power: The defining traits of grounded theory. In A. Bryant, & K. Charmaz (Eds.), *The Sage handbook of grounded theory* (pp. 151-164). Thousand Oaks, CA: Sage.
- Hood, R. W., Hill, P. C., & Spilka, B. (2009). *The psychology of religion: An empirical approach*. New York: Guilford Press.
- Hood, R. W., Spilka, B., Hunsberger, B., & Gorsuch, R. (1996). *The psychology of religion*. New York: Guilford Press.
- Hunsberger, B., Alisat, S., Pancer, S. M., & Pratt, M. (1996). Religious fundamentalism and religious doubts: Content, connections, and complexity of thinking. *The International Journal for the Psychology of Religion, 6*(3), 201–220.
- Hunsberger, B., Pratt, M., & Pancer, S. M. (2001). Adolescent identity formation: Religious exploration and commitment. *Identity: An International Journal of Theory and Research, 1*, 365-387.
- Husaini, B. A., Blasi, A. J., & Miller, O. (1999). Does public and private religiosity have a moderating effects on depression? A bi-racial study of elders in the American south. *International Journal of Aging and Human Development, 48*, 63–72.
- Idler, E. L., & Kasl, S. V. (1997). Religion among disabled and nondisabled elderly persons: Cross-sectional patterns in health practices, social activities, and well-being. *Journal of Gerontology, 52*(B), 300–305.

- James, W. (1902). *The varieties of religious experience: A study in human nature*. New York: Modern Library.
- James, P. (2010). *The current position of counselling psychology: A personal opinion*. Paper presented at the Annual Counselling Psychology Conference at the University of Strathclyde. Glasgow, UK: Author.
- Johnson, R. B. (2009). Toward a more inclusive “scientific research in education” *Educational Researcher*, 38(6), 449–457.
- Johnson, R. B. (2011). *Dialectical pragmatism: A way to hear and "combine" our valued differences*. Paper presented at the annual meeting of the American Educational Research Association. New Orleans, LA: Author.
- Johnson, K. A., Hill, E. D., & Cohen, A. B. (2011). Integrating the study of culture and religion: Toward a psychology of worldview. *Social and Personality Psychology Compass*, 5(3), 137–152.
- Johnson, R. B., & Gray, R. (2010). A history of philosophical and theoretical issues for mixed methods research. In A. Tashakkori & C. Teddlie (Eds.), *Handbook of mixed methods in social behavioral research* (pp. 69-94). US: Sage Publications.
- Johnson, R. B. & Onwuegbuzi, A. J. (2004). Mixed methods research: A research paradigm whose time has come. *Educational Researcher*, 7, 14-26.
- Joiner, T. E., Perez, M., & Walker, R. L. (2002). Playing the devil’s advocate: Why not conclude that the relation of religiosity to mental health reduces to mundane mediators? *Psychological Inquiry*, 13(3), 214-216.
- Jones, A., & Crandall, R. (1986). Validation of a short index of self-actualization. *Personality and Social Psychology Bulletin*, 12, 63–73.
- Joseph, S., & Lewis, C. A. (1998). The Depression-Happiness Scale: Reliability and validity of a bipolar self-report scale. *Journal of Clinical Psychology*, 54, 537-544.

- Joules, S. (2007). *The mediating role of god attachment between religiosity and spiritual and psychological adjustment in young adults*. Unpublished doctoral dissertation, The Ohio State University, Ohio.
- Jung, C. G. (1969). (Original work published 1938). Psychology and religion. In C. G. Jung, *Collected works: Vol. 11* (pp. 3–105). USA: Yale University Press.
- Kahneman, D., Diener, E., & Schwarz, N. (1999). *Well-being: The foundations of hedonic psychology*. NY: Russell Sage.
- Keyes, C. L. M., Shmotkin, D., & Ryff, C. D. (2002). Optimizing well-being: The empirical encounter of two traditions. *Journal of Personality and Social Psychology*, 82, 1007-1022.
- King, P. E., Furrow, J. L., & Roth, N. (2002). The influence of families and peers on adolescent religiousness. *Journal of Psychology and Christianity*, 21(2), 109-120.
- King, M., & Hunt, R. A. (1971). The intrinsic-extrinsic concept: A review and evaluation. *Journal for the Scientific Study of Religion*, 10, 339-356.
- Kirkpatrick, L. A. (1990). Attachment theory and religion: Childhood attachments, religious beliefs, and conversion. *Journal for the Scientific Study of Religion*, 29(3), 315-333.
- Kirkpatrick, L. A. (1992). An attachment-theory approach to the psychology of religion. *International Journal for the Psychology of Religion*, 2, 3-28.
- Kirkpatrick, L. A. (1997). A longitudinal study of changes in religious belief and behavior as a function of individual differences in adult attachment style. *Journal for the Scientific Study of Religion*, 36(2), 207-217.
- Kirkpatrick, L. A., & Shaver, P. R. (1992). An attachment-theoretical approach to romantic love and religious belief. *Personality and Social Psychology Bulletin*, 18(3), 266-275.

- Klein, M. (1946). Notes of some schizoid mechanisms. In J. Mitchell (Ed.), *The selected Melanie Klein* (pp. 175–200). London: Penguin Books.
- Knox, S., Catlin, L., Casper, M., & Schlosser, L. Z. (2005). Addressing religion and spirituality in psychotherapy: Clients' perspectives. *Psychotherapy Research, 15*, 287–303.
- Koenig, H. G. (1995). Religion and older men in prison. *International Journal of Geriatric Psychiatry, 10*, 219-30.
- Koenig, H. G. (1998). *Handbook of religion and mental health*. San Diego, CA: Academic.
- Koenig, H. G., George, L. K., & Peterson, B. L. (1998). Religion and remission from depression in medically ill older patients. *American Journal of Psychiatry, 155*, 536–542.
- Koenig, H. G., McCullough, M. E., & Larson, D. B. (2001). *Handbook of religion and health*. New York: Oxford University Press.
- Koenig, H. G., Pargament, K. I., & Nielsen, J. (1998). Religious coping and health status in medically ill hospitalized older adults. *Journal of Nervous & Mental Disease, 186*, 513–521.
- Koltko-Rivera, M. E. (2004). The psychology of worldviews. *Review of General Psychology, 8*, 3-58.
- Krause, N. (1995). Religiosity and self-esteem among older adults. *The Journals of Gerontology, Series B: Psychological Sciences and Social Science, 50*(5), 236-246.
- Krause, N. (2003). Religious meaning and subjective well-being in late life. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences, 58*(3), S160-S170.

- Krause, N., & Ellison, C. G. (2009). The doubting process: A longitudinal study of the precipitants and consequences of religious doubt in older adults. *Journal for the Scientific Study of Religion, 48*(2), 293–312.
- Krause, N., & Wulff, K. M. (2004). Religious doubt and health: Exploring the potential dark side of religion. *Sociology of Religion, 65*, 35–56.
- Krause, N., & Wulff, K. M. (2005). Church-Based social ties, a sense of belonging in a congregation, and physical health status. *The International Journal for the Psychology of Religion, 15*(1), 73-93.
- Kraut, R., Olson, J., Banaji, M., Bruckman, A., Cohen, J., & Couper, M. (2003). *Psychological Research Online: Opportunities and Challenges*. APA-Internet Version 3.3 Retrieved January 5, 2009, from <http://www.apa.org/science/apainternetresearch.pdf>.
- Krojetin, B. A., McIntosh, D. N., Bridges, R. A., & Spilka, B. (1987). Quest: Constructive search or religious conflict. *Journal for the Scientific Study of Religion, 26*, 111-115.
- Laird, S. P., Snyder, C. R., Rapoff, M. A., & Green, S. (2004). Measuring private prayer: Development, validation, and clinical application of the multidimensional prayer inventory. *The International Journal for the Psychology of Religion, 14*(4), 251-272.
- Laurencelle, R. M., Abell, S. C., & Schwartz, D. J. (2002). The relation between intrinsic religious faith and psychological well-being. *International Journal for the Psychology of Religion, 12*, 109–23.
- Leak, G. K. (2002). Exploratory factor analysis of the religious maturity scale. *Social behaviour and personality, 30*(6), 533-538.
- Leak, G. K., & Fish, S. B. (1999). Development and initial validation of a measure of religious maturity. *The International Journal for the Psychology of Religion, 9*(2), 83-103.

- Leak, G. K., Loucks, A. A., & Bowlin, P. (1999). Development and initial validation of an objective measure of faith development. *International Journal for the Psychology of Religion, 9*(2), 105-124.
- Levin, J. (2002). Is depressed affect a function of one's relationship with God? Findings from a study of primary care patients. *International Journal of Psychiatry in Medicine, 32*, 379-393.
- Levin, J. S., Chatters, L. M., & Taylor, R. J. (1995). Religious effects on health status and life satisfaction among Black Americans. *Journal of Gerontology: Social Sciences, 50*(B), S154-S163.
- Levin, J. S., & Schiller, E. L. (1987). Is there a religious factor in health? *Journal of Religion and Health, 26*, 9-36.
- Lewis, C. A., & Joseph, S. (1995). Convergent validity of the Depression-Happiness Scale with measure of happiness and satisfaction with life. *Psychological Reports, 76*, 876-878.
- Lewis, C. A., Maltby, J., Day, L. (2005). Religious orientation, religious coping and happiness among UK adults. *Personality and Individual Differences, 38*, 1193-1202.
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Newbury, CA: Sage Publications.
- Lynch, G. (1996). What is the truth? A philosophical introduction to counselling research. *Counselling, 7*(2), 144-148.
- Malony, H. N. (1988). The clinical assessment of optimal religious functioning. *Review of Religious Research, 30*, 3-17.
- Maltby, J., & Day, L. (2000). Depressive symptoms and religious orientation: Examining the relationship between religiosity and depression within the context of other correlates of depression. *Personality and Individual Differences, 28*, 383-393.

- Martin, P. R., Cheung, F. M., Knowles, M. C., Kyrios, M., Overmier, J. B., Prieto, J. M. et al. (2011). *IAAP handbook of applied psychology*. US: Blackwell Publishing Ltd.
- Maslow, A. H. (1943). A theory of human motivation. *Psychological Review*, *50*, 370-96.
- Maslow, A. H. (1954). *Motivation and personality*. New York: Harper & Row.
- Maton, K. I. (1987). Patterns and psychological correlates of material support within a religious setting. *American Journal of Community Psychology*, *15*, 185–207.
- Maxwell, J. A. (2011). Paradigms or toolkits? Philosophical and methodological positions as heuristics for mixed methods research. *Mid-Western Educational Researcher*, *24*(2), 27-30.
- McCann, T., & Clark, E. (2003). Grounded theory in nursing research: Part 3 - Application. *Nurse Researcher*, *11*(2), 29-39.
- McCullough, M. E., Hoyt, T. H., Larson, D. B., Koenig, H. G., & Thoresen, C. (2000). Religious involvement and mortality: A meta-analytic review. *Health Psychology*, *19*, 211–222.
- McCullough, M. E., & Larson, D. B. (1999). Religion and depression: A review of the literature. *Twin Research*, *2*, 126–136.
- McGreal, R., & Joseph, S. (1993). The Depression-Happiness scale. *Psychological Reports*, *73*, 1279-1282.
- McLeod, J. (2001). *Qualitative research in counselling and psychotherapy*. Thousand Oaks, CA: Sage.
- McLeod, C. R., & Vodanovich, S. J. (1991). The relationship between self-actualization and boredom proneness. In A. Jones & R. Crandall (Eds.). *Handbook of replication research*. [Special issue]. *Journal of Social Behavior and Personality*, *6*, 137-146.

Mental Health Foundation (2006). *The impact of spirituality on mental health: A review of the literature*. Retrieved December 2011 from <http://www.rcpsych.ac.uk/pdf/Mental%20Health%20Foundation%20spirituality%20reportx.pdf>.

Mertens, D. M. (2003). Mixed methods and the politics of human research: The transformative-emancipatory perspective. In A. Tashakkori & C. Teddlie (Eds.), *Handbook of mixed methods in social and behavioral research* (pp. 135-164). Thousand Oaks, CA: Sage.

Miles, M., & Huberman, M. (1994). *Qualitative data analysis: An expanded sourcebook*. Thousand Oaks, CA: Sage.

Miller, K. J. (1998). Life satisfaction in older adults: The impact of social support and religious maturity. (Doctoral dissertation, 1998). *Dissertation Abstracts International*, 59, 6B.

Miller, L., & Kelley, B. S. (2005). Relationships of religiosity and spirituality with mental health and psychopathology. In R. F. Paloutzian, & C. L. Park (Eds.), *Handbook of the psychology of religion and spirituality* (pp. 460–478). New York: Guilford Press.

Miller, W., & Thoresen, C. (2003). Spirituality, religion, and health: An emerging research field. *American Psychologist*, 58(1), 24-35.

Mills, J., Bonner, A., & Francis, K. (2006). The development of constructivist Grounded Theory. *International Journal of Qualitative Methods*, 5(1), 25-35.

Milton, M. (2010). *Therapy and beyond: Counselling psychology contributions to therapeutic and social issues*. UK: John Wiley & Sons.

Misumi, D. M. (1993). Asian-American Christian attitudes towards counseling. *Journal of Psychology and Christianity*, 12, 214–224.

Morrow, S. L. (2005). Quality and trustworthiness in qualitative research in counseling psychology. *Journal of Counseling Psychology*, 52(2), 250-260.

- Murray, S. A., Kendall, M., Boyd, K., Worth, A., & Benton, T. F. (2004). Exploring the spiritual needs of people dying of lung cancer or heart failure: A prospective qualitative interview study of patients and their carers. *Palliative Medicine*, *18*, 39-45.
- Myers, S. M. (1996). An interactive model of religiosity inheritance: The importance of family context. *American Sociological Review*, *61*(5), 858-866.
- Neff, J. A. (2006). Exploring the dimensionality of “religiosity” and “spirituality” in the Fetzer Multidimensional Measure. *Journal for the Scientific Study of Religion*, *45*(3), 449-459.
- Oakland, J. A. (1974). Self-actualization and sanctification. *Journal of Psychology and Theology*, *2*, 202-209.
- Office for National Statistics, UK. (2011). *Integrated household survey April 2010 to March 2011: Experimental statistics*. Retrieved September, 16, 2012, from http://www.ons.gov.uk/ons/dcp171778_227150.pdf.
- Osborne, J. (2002). Notes on the use of data transformations. *Practical Assessment, Research & Evaluation*, *8*(6). Retrieved December 2, 2005, from <http://PAREonline.net/getvn.asp?v=8&n=6>.
- Oser, F. K., & Gmunder, P. (1991). *Religious judgement: A developmental approach*. Birmingham: Religious Education Press.
- Pahnke, W. H. (1966). Drugs and mysticism. *International Journal of Parapsychology*, *8*, 295-314.
- Paloutzian, R. F. (1996). *Invitation to the psychology of religion*. Boston: Allyn & Bacon.
- Pargament, K. I. (1997). *The psychology of religion and coping: Theory, research, practice*. New York: Guilford Press.
- Pargament, K. I. (1999). The psychology of religion and spirituality? Yes and no. *International Journal for the Psychology of Religion*, *9*, 3-16.

- Pargament, K. I. (2002a). The bitter and the sweet: An evaluation of the costs and benefits of religiousness. *Psychological Inquiry*, 13, 168–181.
- Pargament, K. I. (2002b). Is religion nothing but ...? Explaining religion versus explaining religion away. *Psychological Inquiry*, 13(3), 239–244.
- Pargament, K., Brannick, M., Adamakos, H., Ensing, D., Kelemen, M., Warren, K., et al. (1987). Indiscriminate pro-religiousness: Conceptualization and measurement. *Journal for the Scientific Study of Religion*, 26, 182-200.
- Pargament, K. I., & Maton, K. I. (2000). Religion in American life: A community psychology perspective. In J. Rappaport, & E. Seidman (Eds.), *Handbook of community psychology* (pp. 495–522). New York: Kluwer Academic/Plenum.
- Pargament, K. I., Silverman, W., Johnson, S., Echemendia, R., & Snyder, S. (1983). The psychosocial climate of religious congregations. *American Journal of Community Psychology*, 11(4), 351-381.
- Park, C. L. (2005). Religion and meaning. In R. F. Paloutzian, & C. L. Park (Eds.), *Handbook of the psychology of religion and spirituality* (pp. 295-314). New York: The Guilford Press.
- Parrott, C. (1999). Towards an integration of science, art and morality: The role of values in psychology. *Counselling Psychology Quarterly*, 12(1), 5-20.
- Patton, M. Q. (2002). *Qualitative research and evaluation methods*. Thousand Oaks, CA: Sage Publications.
- Pavot, W., & Diener, E., (1993). Review of the Satisfaction with Life scale. *Psychological Assessments*, 5(2), 164-172.
- Payne, I. R., Bergin, A. E., Bielema, K. A., & Jenkins, P. H. (1991). Review of religion and mental health: Prevention and the enhancement of psychosocial functioning. *Prevention in Human Services*, 9, 11-40.

- Piaget, J. (1975). *The equilibration of cognitive structures: The central problem of cognitive development*. Chicago: University of Chicago Press.
- Pidgeon, N. (1996). Grounded theory: Theoretical background. In J.T.E. Richardson (Ed.), *Handbook of qualitative research methods for psychology and the social sciences* (pp.75-85). Leicester: BPS Books.
- Poloma, M. M., & Pendleton, B. F. (1989). Exploring types of prayer and quality of life: A research note. *Review of Religious Research*, 31(1), 46-53.
- Poloma, M. M., & Pendleton, B. F. (1991). The effects of prayer and prayer experiences on measures of general well-being. *Journal of Psychology and Theology*, 19(1), 71-83.
- Post, B. C., & Wade, N. G. (2009). Religion and spirituality in psychotherapy: A practice-friendly review of research. *Journal of Clinical Psychology*, 65(2), 131-146.
- Prosnick, K. P. (1999). Claims of near-death experiences, gestalt resistance processes, and measures of optimal functioning. *Journal of Near-Death Studies*, 18, 27-34.
- Pruyser, P. W. (1976). *The minister as diagnostician*. Philadelphia, PA: Westminster Press.
- Regnerus, M. D., Smith, C., & Smith, B. (2004). Social context in the development of adolescent religiosity. *Applied Developmental Science*, 8, 27-38.
- Reinert, D. R. (2005). Spirituality, self-representations, and attachment to parents: A longitudinal study of Roman Catholic seminarians. *Counseling and Values*, 49, 226-238.
- Reisner, A. D., & Lawson, P. (1992). Psychotherapy, sin, and mental health. *Pastoral Psychology*, 40(5), 303-311.

- Remer, P. A., & Oh, K. H. (2012). Feminist therapy in counseling psychology. In C. Zerbe Enss & E. Nutt Williams (Eds.), *The Oxford handbook of feminist counseling psychology* (pp. 304-322). New York: Oxford University Press.
- Riva, G., Teruzzi, T., & Anolli, L. (2003). The use of the internet in psychological research: Comparison of online and offline questionnaires. *Cyber Psychology & Behavior*, 6(1), 73-80.
- Roberts, K. A. (1991). A sociological overview: Mental health implications of religio-cultural megatrends in the United States. *Prevention in Human Services*, 9, 113-135.
- Roehlkepartain, E. C., Benson, P. L., King, P. E., & Wagener, L. M. (2006). Spiritual development in childhood and adolescence: Moving to the scientific mainstream. In E. C. Roehlkepartain, P. E. King, L. Wagener, & P. L. Benson (Eds.), *The handbook of spiritual development in childhood and adolescence* (pp. 1-15). Thousand Oaks, CA: Sage.
- Rogers, C. R. (1951). *Client-centered therapy: Its current practice, implications, and theory*. Boston: Houghton Mifflin.
- Rose, E. M., Westefeld, J. S., & Ansley, T. N. (2008). Spiritual issues in counseling: Clients' beliefs and preferences. *Psychology of Religion and Spirituality*, 5(1), 18-33.
- Rosenberg, M. (1965). *Society and the adolescent self-image*. NJ: Princeton University Press.
- Rosenberg, M. (1986). *Conceiving the self*. Malabar, FL: Krieger.
- Rowatt, W. C., & Kirkpatrick, L. A. (2002). Two dimensions of attachment to God and their relation to affect, religiosity, and personality constructs. *Journal for the Scientific Study of Religion*, 41, 637-651.

- Ryan, R. M., Rigby, S., & King, K. (1993). Two types of religious internalization and their relations to religious orientations and mental health. *Journal of Personality and Social Psychology*, *65*, 586–596.
- Ryff, C. D. (1995). Psychological well-being in adult life. *Current Directions in Psychological Science*, *4*, 99–104.
- Sale, J. E. M., Lohfeld, L. H., & Brazil, K. (2002). Revisiting the quantitative-qualitative debate: Implications for mixed-methods research. *Quality & Quantity*, *36*, 43-53.
- Salsman, J. M., Brown, T. L., Brechting, E. H., & Carlson, C. R. (2005). The link between religion and spirituality and psychological adjustment: The mediating role of optimism and social support. *Personality and Social Psychology Bulletin*, *31*, 522-535.
- Salsman, J. M., & Carlson, C. R. (2005). Religious orientation, mature faith, and psychological distress: Elements of positive and negative associations. *Journal for the Scientific Study of Religion*, *44*, 201-209.
- Schleiermacher, F. (1958). (Original work published 1799). *On religion: Speeches to its cultured despisers*. New York: Harper and Row.
- Schlegel, R. J., Hicks, J. A., Arndt, J., & King, L. A. (2009). Thine own self: True self-concept accessibility and meaning in life. *Journal of Personality and Social Psychology*, *96*(2), 473–490.
- Sedikides, C. (2010). Why does religiosity persist? *Personality and Social Psychology Review*, *14*, 3–6.
- Seybold, K. S., & Hill, P. C. (2001). The role of religion and spirituality in mental and physical health. *Current Directions in Psychological Science*, *10*, 21-24.
- Sheldrake, P. (1992). *Spirituality and history: Questions of interpretation and method*. New York: Crossroad.

- Shostrom, E. L. (1965). A test for the measurement of self-actualization. *Educational and Psychological Measurement, 24*, 207-218.
- Silberman, I. (2005). Religion as a meaning system: Implications for the new millennium. *Journal of Social Issues, 61*(4), 641-663.
- Simpson, J. A. (2002). The ultimate elixir? *Psychological Inquiry, 13*(3), 226-229.
- Slater, W., Hall, T. W., & Edwards, K. J. (2001). Measuring religion and spirituality: Where are we and where are we going? *Journal of Psychology and Theology, 29*, 4-21.
- Smith, T. B., McCullough, M. E., & Poll, J. (2003). Religiousness and depression: Evidence for a main effect and the moderating influence of stressful life events. *Psychological Bulletin, 129*(4), 614-636.
- Smith, T. B., McCullough, M. E., & Poll, J. (2003). Religiousness and depression: Evidence for a main effect and the moderating influence of stressful life events. *Psychological Bulletin, 129*(4), 614-636.
- Steger, M. F. (2007). Structural validity of the Life Regard Index. *Measurement and Evaluation in Counselling and Development, 40*(2), 97-110.
- Steger, M. F., & Frazier, P. (2005). Meaning in life: One link in the chain from religion to well-being. *Journal of Counseling Psychology, 52*, 574-582.
- Steger, M. F., Frazier, P., Oishi, S., & Kaler, M. (2006). The Meaning in Life Questionnaire: Assessing the presence of and search for meaning in life. *Journal of Counseling Psychology, 53*, 80-93.
- Steger, M. F., & Kashdan, T. B. (2006). Stability and specificity of meaning in life and life satisfaction over one year: Implications for outcome assessment. *Journal of Happiness Studies, 8*, 161-179.

- Steger, M. F., Kashdan, T. B., & Oishi, S. (2008). Being good by doing good: Eudaimonic activity and daily well-being correlates, mediators, and temporal relations. *Journal of Research in Personality, 42*, 22-42.
- Strauss, A., & Corbin, J. (1990). *Basics of qualitative research: Grounded theory procedures and techniques*. USA: Sage.
- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research: Techniques and procedures for developing grounded theory*. Thousand Oaks, CA: Sage.
- Strawbridge, W. J., Cohen, R. D., Shema, S. J., & Kaplan, G. A. (1997). Frequent attendance at religious services and mortality over 28 years. *American Journal of Public Health, 87*, 957–961.
- Streib, H., & Hood, R. W. (2008). *Research on “spirituality”: New perspectives from reconsidering the classics on religion*. Paper for the Annual Meeting of the American Academy of Religion, USA, Chicago.
- Tabachnick, B. G., & Fidell, L. S. (2007). *Using multivariate statistics*. Boston: Allyn and Bacon.
- Tamminem, K. (1991). *Religious development in childhood and youth: An empirical study*. Finland: Suomalainen Tiedeakatemia.
- Tashakkori, A., & Creswell, J. (2007). The new era of mixed methods. *Journal of Mixed Methods Research, 1*(1), 3-8.
- Teddlie, C., & Johnson, R. B. (2009). Methodological thought since the 20th century. In C. Teddlie & A. Tashakkori, *Foundations of mixed methods research: Integrating quantitative and qualitative techniques in the social and behavioral sciences* (pp. 62–82). Thousand Oaks, CA: Sage.

- Teddle, C., & Yu, F. (2007). Mixed methods sampling: A typology with examples. *Journal of Mixed Methods Research, 1*(1), 77-100.
- Thoresen, C. E. (1998). Spirituality, health, and science: The coming revival? In S. Roth-Roemer, S. E. R. Kurpius, & C. N. Carmin (Eds.), *The emerging role of counseling psychology in health care* (pp. 409-431). New York: W. W. Norton.
- Tillich, P. (1957). *The dynamics of faith*. New York: Harper and Row.
- Tix, A. P., & Frazier, P. A. (1998). The use of religious coping during stressful life events: Main effects, moderation, and mediation. *Journal of Consulting and Clinical Psychology, 66*, 411-422.
- Tomer, A., & Eliason, G. (2000). Beliefs about self, life, and death: Testing aspects of a comprehensive model of death anxiety and death attitudes. In A. Tomer (Ed.), *Death attitudes and older adults* (pp. 139-153). Philadelphia, PA: Taylor & Francis.
- Vaughan, F. (1991). Spiritual issues in psychotherapy. *Journal of Transpersonal Psychology, 23*(2), 105-119.
- Ventis, W. L. (1995). The relationships between religion and mental health. *Journal of Social Issues, 51*(2), 33-48.
- Vilchinsky, N., & Kravetz, S. (2005). How are religious belief and behaviour good for you? An investigation of mediators relating religion to mental health in a sample of Israeli Jewish students. *Journal of the Scientific Study of Religion, 44*(4), 459-471.
- Walsh, J., Joseph, S., & Lewis, C. A. (1995). Internal reliability and convergent validity of the Depression-Happiness scale with the general health questionnaire in an employed adult sample. *Psychological Reports, 76*, 137-138.
- Walton, J. (1999). Spirituality of patients recovering from an acute myocardial infarction: A grounded theory study. *Journal of Holistic Nursing, 17*(1), 34-53.

- Watson, P. J., Morris, R. J., & Hood, R. W. (1990). Intrinsicness, self-actualization, and the ideological surround. *Journal of Psychology and Theology*, 18, 40–53.
- Watson, P. J., Morris, R. J., Hood, Jr., R. W., Milliron, J. T., & Stutz, N. L. (1998). Religious orientation, identity, and the quest for meaning in ethics within an ideological surround. *The International Journal for the Psychology of Religion*, 8, 149-164.
- Weiss Ozorak, E. (1989). Social and cognitive influences on the development of religious beliefs and commitment in adolescence. *Journal for the Scientific Study of Religion*, 28(4), 448-463.
- Whittington, B. L., & Scher, S. J. (2010). Prayer and subjective well-being: An examination of six different types of prayer. *The International Journal for the Psychology of Religion*, 20, 59–68.
- Wink, P., & Dillon, M. (2003). Religiousness, spirituality and psychosocial functioning in late adulthood: Findings from a longitudinal study. *Psychology and Aging*, 18, 916–924.
- Winnicott, D. W. (1971). *Playing and reality*. Oxford, England: Penguin.
- Witter, R. A., Stock, W. A., Okun, M. A., & Haring, M. J. (1985). Religion and subjective well-being in adulthood: A quantitative synthesis. *Review of Religious Research*, 26(4), 332-342.
- Wong-McDonald, A., & Gorsuch, R. L. (2004). A multivariate theory of God concept, Religious motivation, locus of control, coping, and spiritual well-being. *Journal of Psychology and Theology*, 32(4), 318-334.
- Woolfe, R., Douglas, B., Strawbridge, S., & Dryden, W. (2010). *Handbook of counselling psychology: Third edition*. London: Sage.

- Wyatt, S. C., & Johnson, R. W. (1990). The influence of counselors' religious values on clients' perceptions of the counselor. *Journal of Psychology and Theology, 18*, 158–165.
- YouGov (2011). *YouGov survey, 2011* [Data file]. Retrieved January 12, 2013, from <http://yougov.co.uk/>.
- YouGov (2012). *YouGov Sunday times survey, 2012* [Data file]. Retrieved January 12, 2013, from <http://yougov.co.uk/>.
- Ysseldyk, R., Matheson, K., & Anisman, H. (2010). Religiosity as identity: Toward an understanding of religion from a social identity perspective. *Personality and Social Psychology Review, 14*(1), 60-71.
- Zika, S., & Chamberlain, K. (1992). On the relation between meaning in life and psychological well-being. *British Journal of Psychology, 83*, 133-145.
- Zinnbauer, B. J., & Pargament, K. I. (2005). Religiousness and spirituality. In R. F. Paloutzian & C. L. Park (Eds.), *Handbook of the psychology of religion and spirituality* (pp.21-42). New York: Guilford Press.
- Zinnbauer, B. J., Pargament, K. I., Cole, B., Rye, M. S., Butter, E. M., Belavich, T. G., et al. (1997). Religion and spirituality: Unfuzzifying the fuzzy. *Journal for the Scientific Study of Religion, 36*, 549-564.
- Zinnbauer, B. J., Pargament, K. I., & Scott, A. B. (1999). The emerging meanings of religiousness and spirituality: Problems and prospects. *Journal of Personality, 67*, 889–920.

Appendix-A1

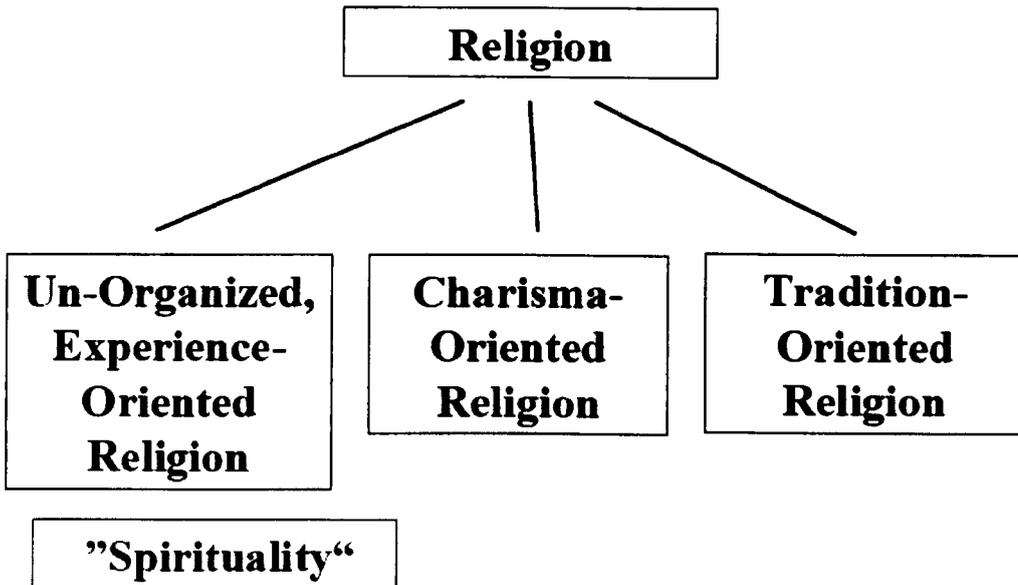
Extended Discussion regarding the Use of the Religion and Spirituality terms

There is now a contemporary tendency to view religion as a narrowly defined construct and regard religion and spirituality as two opposing poles (Zinnbauer, Pargament, & Scott, 1999). Thus religion is institutional and exclusive whereas spirituality is personal; religion represents an authoritarian, inhibiting expression while the latter represents a subjective and freeing expression (Koenig, McCullough & Larson, 2001). This focus on spirituality as distinct from religiousness is though regarded as controversial (Thoresen 1998; Streib & Hood, 2008; Hill et al., 2000; Pargament, 1999) with Zinnbauer, Pargament, & Scott (1999) arguing that such a polarization only provides a limited understanding of the two constructs.

Interestingly a number of factors external to a drive for conceptual clarity might be fuelling the growing distinction between religiosity and spirituality. Firstly this semantic polarisation may be more fruit of historical events (e.g. clergy abuse incidents, terrorism motivated by religious fundamentalism, the politicalisation of contentious moral issues) and cultural shifts in the Western world (i.e. a greater focus on individualism) rather than a sound theoretical rationale. Secondly, simply equating religiosity and spirituality respectively with the negative and positive aspects of the religious field might represent a straightforward way of settling the long-standing quandary of how religion can be both beneficial and harmful. Such a solution is certainly alluring in its simplicity, but being based on conceptually shaky grounds it offers psychologists no real understanding of the heterogeneity of the phenomenon of religion and its diverse psychological implications.

Appendix A2

Definition Tree of 'Religion' by Streib & Hood (2008)



Appendix-A3

Attributes of a Mature Religious Sentiment as conceptualised by Allport (1950)

1. *Differentiation of the Mature Sentiment:* The mature religious sentiment is characterised by a complex and coherent articulation and ordering of a variety of emphasis, interests and objects (e.g. towards the divine, nature of the soul, issues of freedom and sin). In a religiously mature individual these objects are woven into a pattern providing a genuine sense of wholeness. Such a differentiated sentiment is contingent on a critical tendency and is the result of many successive discriminations and continuous reorganisation. Contrastingly an immature sentiment would be characterised by an uncritical abandon and an unrealistic understanding of religious issues. In conclusion the basic structure of this sentiment is “well differentiated, comprising many subsidiary attributes, critically arrived at and flexibly maintained as the sphere of experience widens” (Allport 1950; p. 71)
2. *Derivative yet Dynamic Nature of the Mature Sentiment:* When speaking of this attribute, Allport stresses the autonomous nature of the motivation behind the individual’s religiousness, indicating that mature religiosity should be more of a master and less of a servant in one’s economy of life. Hypothetically, as the religious sentiment matures it becomes largely independent of its origin and therefore functionally autonomous of other desires. According to Allport, the centrality of the mature religious sentiment in relation to the other psychophysical systems that compose personality determines its degree of dynamism and its ability to direct other aspects of the individual’s life.
3. *The Mature Sentiment is consistently Directive:* This dimension refers to a mature religiousness’ consistency of moral consequences. A mature religiosity should exert a steady and persistent influence on how one relates to the world.

4. *The Comprehensive Character of the Mature Sentiment:* A mature religiosity provides a comprehensive philosophy of life that permeates all aspects of one's being and therefore serves an integrative function that provides significance to life. Allport also hypothesized that this drive to develop a comprehensive religious sentiment leads to tolerance of other viewpoints as it enables the individual to realise that his/her life can't contain all facets of meaning.
5. *The Integral Nature of the Mature Sentiment:* The mature religious sentiment is also earmarked by a homogenous design accommodating complex concepts like free will and evil and contentious issues such as suffering.
6. *Heuristic Character of the Mature Sentiment:* A religiously mature individual treats his/her faith as a working hypothesis and therefore holds a belief tentatively until it can be confirmed or until it helps discover a more valid belief. A mature religiosity would be characterised by decisive commitment tempered by a certain humility and readiness to doubt. Allport thus describes the religious mature individual as able to hold a heuristic commitment; i.e. the ability to derive guidance from religion without absolute certainty.

Appendix-A4

Description of other RM Conceptualisations

Fowler (1981) understood faith as a means for making sense of one's experience of the world. He viewed the maturation in this arena of life as a process taking place through six qualitative stages that differ in terms the individual's reasoning about a Higher Being and how this Higher Being influences one's beliefs, values, meanings and relationships. Faith development can be assessed through the Faith Development Interview (FDI; Fowler, 1981; cf. Burris, 1999) or the Faith Development Scale (FDS; Leak, Loucks, & Bowlin, 1999). The FMS is constructed on a definition of maturity as "the degree to which a person embodies the priorities, commitments and perspectives characteristic of vibrant and life-transforming faith, as these have been understood in 'mainline' Protestant traditions" (Benson, Donahue, & Erickson 1993: p. 3). This definition focuses on indicators of faith rather than characteristics of faith. In this conceptualisation greater religious maturity is revealed through the individual giving greater priority to service to others (horizontal religion) and to maintaining a relationship with a transcendental reality (vertical religion). The RSI was developed by Malony (1988) and is based on Pruyer's (1976) taxonomy of the functional expressions of the main Christian theological dimensions in a religiously mature individual. Examples of these functional expressions include the extent individuals are aware of God in their daily lives, are repentant and responsible and are involved in organised religion.

Appendix A5

Distribution of UK population by Religious Affiliation - April 2010 to March 2011 (Office for National Statistics UK, 2011)

Great Britain	Percentages			
	England	Wales	Scotland	Great Britain
Christian	68.5	66.1	69.6	68.5
Buddhist	0.4	0.3	0.3	0.4
Hindu	1.5	0.5	0.3	1.3
Jewish	0.5	0.1	0.1	0.4
Muslim	4.9	1.2	1.3	4.4
Sikh	0.8	0.1	0.1	0.7
Any other religion	1.1	1.2	1.1	1.1
No religion at all	22.4	30.6	27.2	23.2

Table source: Office for National Statistics

Table notes:

1. Respondents were asked the question 'What is your religion, even if you are not currently practising?' which measures religious affiliation - that is identification with a religion irrespective of actual practice or belief.
2. The total number of eligible responders to the question was 413,832.
3. There are differences in the question for religious affiliation in Northern Ireland, therefore estimates are only for Great Britain rather than UK.
4. Changes have been made to religion questions in January 2011 in line with Census 2011 data collection.
5. Percentages may not add to 100 per cent due to rounding.

Appendix B

Sample of the Demographic Form

Participant Demographic Form

Please answer the following demographic questions. Do not write your name on any of the forms provided to you.

1. Age: _____

2. Gender: _____

Please answer the following questions by checking your response:

3. Are you a UK resident?

Yes

No

4. Religious Affiliation:

Catholic

Protestant

Church of England

Other / Further Details _____

5. Marital Status:

- Single
- Married
- Divorced
- Widowed
- Separated

6. Race or Ethnicity:

- White
- Black or Black British
- Asian or Asian British
- Mixed
- Other Ethnic Background: _____

7. Level of Education (please mark highest level applicable)

- Primary
- Secondary
- College
- University
- Other

8. Occupation Status

- Employed**
- Student**
- Retired**
- Other** _____

9. Church Attendance

- Several times a week**
- Once a week**
- At least once a month**
- Sometimes**
- Never**

10. Are you involved in a Christian religious organisation?

- Yes**
- No**

Further Details _____

Appendix C

Inventories

C1. Sample of the Creighton Religious Attitudes Questionnaire

CREIGHTON RELIGIOUS ATTITUDES QUESTIONNAIRE

(Version 4 -- Developed Spring, 2005)

(Fall, 1989)

General Instructions

This questionnaire is designed to assess your current religious attitudes on certain topics. People can be religious in various ways, and this questionnaire is designed to measure several of those religious dimensions and orientations.

It is important you answer each item as accurately as possible. That is, answer each statement as it describes you in reality --- today, and not how you would like it to be, or how you were at one time. Unlike most questionnaires which ask very direct and simple questions, the issues raised here are complex. So please read each statement carefully and respond thoughtfully. Even if some items appear redundant, they often do differ from each other, but in subtle ways. Finally, the term "religious orientation" is used frequently. It means your personal religious attitudes, feelings, and thoughts. In other words, your general or overall attitude toward deeply personal, faith-related issues, be they formal and "religious" or personal and "spiritual".

Answer Sheets

Answer all questions on the answer sheet that is attached to this questionnaire, using the 5-point rating scale shown on the next page. Use the values 1 through 5 to reflect your degree of agreement or disagreement with each statement. Remember many of the statements deal with things you may want to be true of you but may not be; please be as honest as you can (your answers are anonymous and will be kept confidential). Place your answers on the computer answer sheet, and not on this questionnaire itself.

Rating Scale

1 2 3 4 5

Strongly
disagree

Disagree

Unsure

Agree

Strongly
agree

1. Compared to most people I know, I have a wide range of interests.
2. My values have changed or evolved quite a bit in the past few years.
3. I perceive shortcomings in many traditional religious teachings, yet I still appreciate the value of religion in my life.
4. I owe my present religious attitude in part to having experienced a deep doubt about the validity and value of my earlier religious beliefs.
5. My religious orientations is useful in helping me understand and deal with many aspects of my life, not just the strictly "religious" ones.
6. I can't, "in theory", know with total certainty that my beliefs are correct, but I still act and live my life assuming they are true, even if I can't be totally sure.
7. I don't feel much need to reflect on my religious orientation to life; my religious questions have already been answered to my satisfaction.
8. My personal religious development has required me to struggle with certain issues in religion.
9. Religion is the major framework or perspective I use in ordering my life.
10. I hold my religious beliefs because they help me understand all existence, even though I realize their ultimate validity cannot be proven.
11. Like it or not, there are grounds and reasons for religious skepticism, but I am comfortable in acting on my beliefs nevertheless.
12. I have developed, or am now developing, an independent religious conviction based on my experiences in living.
13. To me, it more important to believe and follow the teachings of my church than to develop and follow my own personal view of God.
14. I am in general agreement with many of the teachings of my church; however, I am still able to be critical and questioning about some of the specific things my church tells me.

The quote below is the description of a hypothetical person's religious orientation. Please read it carefully because the concepts addressed are complex. Then use the rating scale below it to indicate how closely that description fits your own religious orientation.

"The role of religion in the person's life is continually being reorganized so as to affect almost every facet of his or her life. An emphasis is placed on growth, and growing religiously is seen by the person as a process: it is changing rather than a static, finished product. The person is capable of being critical of his or her religion, continually examining and questioning it. Religious beliefs are held tentatively until they can be confirmed or until they help the person discover a more valid set of beliefs. Thus religion is not viewed as being absolute or the Truth. This allows the person to be tolerant of others' beliefs and attitudes. Religion also functions as a driving motive for the person. That is, religion is the primary motive which influences almost all aspects of the person's life. It helps to interpret all events in a person's life, and it helps to generate what has been called 'high and consistent actions of living' -- that is, it promotes living a moral life. Religion aids the person in searching out and confronting matters central to all existence (that is, the meaning of one's life, and one's place in the universe)."

33. To what extent is this description an accurate statement of your religious or spiritual orientation? (circle one)

1	2	3	4	5
not	slightly	somewhat	moderately	very
accurate	accurate	accurate	accurate	accurate

34. How deeply religious are you?

1. not at all religious
2. slightly religious
3. moderately religious
4. very religious

35. How interested are you in religion?

1. not at all interested
2. slightly interested
3. moderately interested
4. very much interested

36. How deeply spiritual of a person do you consider yourself to be?

1. not at all spiritual
2. slightly
3. moderately
4. very spiritual

C3. Sample of the Rosenberg Self-Esteem Scale

Rosenberg Self-Esteem Scale (Rosenberg, 1965)

Instructions: Below is a list of statements dealing with your general feelings about yourself. If you strongly agree, circle **SA**. If you agree with the statement, circle **A**. If you disagree, circle **D**. If you strongly disagree, circle **SD**.

1.	On the whole, I am satisfied with myself.	SA	A	D	SD
2.*	At times, I think I am no good at all.	SA	A	D	SD
3.	I feel that I have a number of good qualities.	SA	A	D	SD
4.	I am able to do things as well as most other people.	SA	A	D	SD
5.*	I feel I do not have much to be proud of.	SA	A	D	SD
6.*	I certainly feel useless at times.	SA	A	D	SD
7.	I feel that I'm a person of worth, at least on an equal plane with others.	SA	A	D	SD
8.*	I wish I could have more respect for myself.	SA	A	D	SD
9.*	All in all, I am inclined to feel that I am a failure.	SA	A	D	SD
10.	I take a positive attitude toward myself.	SA	A	D	SD

Scoring: SA=3, A=2, D=1, SD=0. Items with an asterisk are reverse scored, that is, SA=0, A=1, D=2, SD=3. Sum the scores for the 10 items. The higher the score, the higher the self esteem.

C4. Sample of the Life Regard Index

LIFE REGARD INDEX (LRI) - ADJUSTED VERSION

Below you find 28 statements with which you can agree or disagree. Indicate each time the answer that best represents your opinion.

1	2	3
do not agree	no opinion	agree

1. I feel like I have found a really significant meaning for leading my life.
2. Living is deeply fulfilling.
3. I really don't have much purpose for living, even for myself.
4. There honestly isn't anything that I totally want to do.
5. I really feel good about my life.
6. I spend most of my time doing things that really aren't important to me.
7. I have really come to terms with what's important for me in my life.
8. I need to find something that I can really be committed to.
9. I just don't know what I really want to do with my life.
10. Other people seem to have a better idea of what they want to do with their lives than I do.
11. I have some aims and goals that would personally give me a great deal of satisfaction if I could accomplish them.
12. I don't seem to be able to accomplish those things that are really important to me.
13. I really don't believe in anything about my life very deeply.
14. I have a philosophy of life that really gives my living significance.
15. Other people seem to feel better about their lives than I do.
16. I get completely confused when I try to understand my life.
17. Something seems to stop me from doing what I really want to do.

18. I have a lot of potential that I don't normally use.
19. When I look at my life I feel the satisfaction of really having worked to accomplish something.
20. I have real passion in my life.
21. I feel that I'm really going to attain what I want in life.
22. I don't really value what I'm doing.
23. I have a clear idea of what I'd like to do with my life.
24. I get so excited by what I'm doing that I find new stores of energy I didn't know that I had.
25. There are things that I devote all my life's energy to.
26. Nothing outstanding ever seems to happen to me.
27. I feel that I am living fully.
28. I have a system or framework that allows me to truly understand my being alive.

C5. Sample of the Depression-Happiness Scale

Depression-Happiness Scale (DHS)

A number of statements that people have used to describe how they feel are given below. Please read each one and circle the number which best describes how frequently you felt that way in the past seven days, including today. Some statements describe positive feelings and some describe negative feelings. You may have experienced both positive and negative feelings at different times during the past seven days.

0 = Never
1 = Rarely
2 = Sometimes
3 = Often

1	I felt sad.	0	1	2	3
2	I felt that I had failed as a person.	0	1	2	3
3	I felt dissatisfied with my life.	0	1	2	3
4	I felt mentally alert.	0	1	2	3
5	I felt disappointed with myself.	0	1	2	3
6	I felt cheerful.	0	1	2	3
7	I felt that life wasn't worth living.	0	1	2	3
8	I felt satisfied with my life.	0	1	2	3
9	I felt healthy.	0	1	2	3
10	I felt like crying.	0	1	2	3
11	I felt that I had been successful.	0	1	2	3
12	I felt happy.	0	1	2	3
13	I felt that I couldn't make decisions.	0	1	2	3
14	I felt unattractive.	0	1	2	3
15	I felt optimistic about the future.	0	1	2	3
16	I felt that life was rewarding.	0	1	2	3
17	I felt cheerless.	0	1	2	3
18	I felt that life had a purpose.	0	1	2	3
19	I felt too tired to do anything.	0	1	2	3
20	I felt pleased with the way I am.	0	1	2	3
21	I felt lethargic.	0	1	2	3
22	I found it easy to make decisions.	0	1	2	3
23	I felt that life was enjoyable.	0	1	2	3
24	I felt that life was meaningless.	0	1	2	3
25	I felt run down.	0	1	2	3

C6. Sample of the Satisfaction with Life Scale

Satisfaction with Life Scale

Below are five statements that you may agree or disagree with. Using the 1-7 scale below indicate your agreement with each item by placing the appropriate number on the line preceding that item. Please be open and honest in your responding.

- 7 Strongly agree
- 6 Agree
- 5 Slightly agree
- 4 Neither agree nor disagree
- 3 Slightly disagree
- 2 Disagree
- 1 Strongly disagree

- _____ 1. In most ways my life is close to my ideal.
- _____ 2. The conditions of my life are excellent.
- _____ 3. I am satisfied with my life.
- _____ 4. So far I have gotten the important things I want in life.
- _____ 5. If I could live my life over, I would change almost nothing.



London Metropolitan University,
School of Psychology,
Research Ethics Review Panel

I can confirm that the following project has received ethical approval to proceed:

Title: Can religion promote psychological well-being? An investigation into religious maturity and well-being.
Student: Julian Caruana
Supervisor: Dr Mark Donati

Ethical clearance to proceed has been granted providing that the study follows the ethical guidelines used by the School of Psychology and British Psychological Society, and incorporates any relevant changes required by the Research Ethics Review Panel. All participating organisations should provide formal consent allowing the student to collect data from their staff.

The researcher is also responsible for conducting the research in an ethically acceptable way, and should inform the ethics panel if there are any substantive changes to the project that could affect its ethical dimensions, and re-submit the proposal if it is deemed necessary.

Signed:

A handwritten signature in black ink, appearing to read "C. Chandler", written over a light grey grid background.

Date: 22/03/13

Dr Chris Chandler
(Chair - School of Psychology Research Ethics Review Panel)
chandler@staff.londonmet.ac.uk

Appendix E

Sample of the Information Sheet Given to Potential Participants for Study-1

Dear potential participant,

Thank you for your interest in finding out more about this study. I am currently conducting a piece of doctoral research as part of my professional training in Counselling Psychology at London Metropolitan University. The aim of my study is to explore the relationship between religion and psychological well-being. The role religion plays in our lives has been a subject of interest over many years in many disciplines. As it is such a complex topic many questions still remain for researchers who are interested understanding the relationship between religion and an individual's psychological wellbeing. Obviously there are many different types of religion in the world today but as it would be too ambitious to try to investigate this relationship in one study across a number of different religions, for simplicity I have chosen to focus in my study on people from Protestant and Catholic religious backgrounds.

Participation

Participation in this study is completely voluntary. In order to be eligible to participate you will need to be at least 18 years old and from a Protestant and Catholic religious backgrounds. If you are currently experiencing serious mental health problems or have received a mental health diagnosis unfortunately you will not be able to participate in the study. This step has been taken to ensure answering the questions in the study will not have adverse psychological effects on any of the participants. Participation will require the completion of a set of questionnaires that should take approximately 35 minutes to complete.

Your Contribution

If you would like to participate in the study you will be asked to read and sign a consent form explaining that you have understood your rights related to the study. Before agreeing to participate it is important that you consider that this study will require you to think about yourself and the meaning life has for you, which could be an emotive experience. Although it is not anticipated that participating will cause distress in case you find that you have been affected by the questions you will be provided with some possible sources of support in a debriefing sheet after participating in the study.

Confidentiality and Use of Data.

To protect your privacy you will not be required to enter your name anywhere. For practical reasons you will be asked to provide an ID code before completing this survey. The purpose of this ID code is to make it possible for you to withdraw from the study. Withdrawal from the study will be possible until the 31st March 2011 before the data will be compiled and statistically analysed. To do so you only need to email your ID code to the researcher's email address.

I will be responsible for reading, analysing and storing the data obtained from the questionnaires. All of the data will be statistically analysed to produce the findings from the study. Research data will be stored securely for a period of up to 5 years after the completion of the study and then discarded safely.

The next stage of the research

After the questionnaires I will also be interested in carrying out some interviews with some of the participants to find out more detailed information about people's views on the topic. When you have completed the questionnaires you will be asked whether you would be interested in participating in this second stage of the research. Participation in this second research stage will also be completely voluntary.

Thank you for taking the time to read about this study.

Researcher: Julian Caruana

E-mail: juliancaruana@hotmail.com

Supervisor: Dr Mark Donati

E-mail: m.donati@londonmet.ac.uk

Appendix F

Sample of the Consent Form Given to Potential Participants for Study-1

I consent to participate in the previously described study investigating the relationship between religion and psychological well-being. I also agree to the use of my data for the purposes of a Counselling Psychology doctoral dissertation at London Metropolitan University.

I understand that my participation is completely voluntary and that I will be free to withdraw from the study at any time before the data is analysed and I understand that all the necessary precautions will be taken to safeguard my anonymity throughout all the research process.

1. I agree to the above.

- Yes
- No

Appendix G

Sample of the Additional Information Sheet Given to Potential Participants for Study-1

Additional information:

Do you feel that you are currently experiencing severe mental health problems (please refer to information sheet)?

- Yes
- No

Have you ever been diagnosed with a mental health condition?

- Yes
- No

Would you be interested in participating in an interview discussing in greater depth the role of religion in your life?

- Yes
- No

If you answered yes to the above question, could you please provide an email address on which you can be contacted in the near future.

Appendix H

Sample of Debriefing Sheet-B Used for Study-1

Thank you for your interest in participating in this study. You have been taken to this page as you indicated that you have experienced serious mental health difficulties and/or a diagnosis. As explained in the information sheet you have just read, this unfortunately means that you will not be able to participate further in the study. This is part of the study's ethical procedures to ensure the prevention of any adverse psychological effects on any of our participants.

If any issues or emotions have been raised for you in considering participating in this study and you would like to know about any sources of support, please refer to the suggestions provided below:

- Contact your local GP or mental health practitioner.
- Refer to BPS (British Psychological Society) website for psychological services:
<http://www.bps.org.uk/e-services/find-a-psychologist/directory.cfm>
- Refer to NHS Choices for information about how to access therapy:
<http://www.nhs.uk/livewell/counselling/pages/accesstotherapy.aspx>

Should you be interested in the findings or if you have any questions about this study, please feel free to contact me.

Researcher: Julian Caruana

Email: juliancaruana@hotmail.com

Supervisor: Dr Mark Donati

Email: m.donati@londonmet.ac.uk

Appendix I

Sample of Debriefing Sheet-A Used for Study-1

Thank you for valuable contribution to this study and helping to develop our understanding of the relationship between religion and psychological well being. As explained in the information sheet, this is an area where many questions are still not fully understood. For example, does religion help someone to achieve psychological wellbeing and if so how? Specifically are there particular characteristics of being religious that have an effect on wellbeing? These are the kinds of questions this research is interested in exploring. Please note that this research is not interested in making comparisons of the usefulness of different kinds of religion or religious practices, but is more concerned with understanding in depth the role religion plays in an individual's psychological life.

If any issues or emotions have been raised for you by participating in this study and you would like to know about any sources of support, please refer to the suggestions provided below:

- Contact your local GP or mental health practitioner.
- Refer to BPS (British Psychological Society) website for psychological services:

<http://www.bps.org.uk/e-services/find-a-psychologist/directory.cfm>

- Refer to NHS Choices for information about how to access therapy:

<http://www.nhs.uk/livewell/counselling/pages/accesstotherapy.aspx>

Should you be interested in the findings or if you have any questions about this study, please feel free to contact me.

Researcher: Julian Caruana

Email: juliancaruana@hotmail.com

Supervisor: Dr Mark Donati

Email: m.donati@londonmet.ac.uk

Appendix J

Table J1

Descriptive Statistics for Demographic Variables

Characteristic	Frequency	Percent
Gender:		
Female	93	67.4
Male	45	32.6
Age		
18-30	42	30.4
31-45	38	27.5
46-60	33	23.9
61+	25	18.1
Mean (43.0)		
Standard Deviation (16.3)		
Range (18-90)		
Religious Affiliation:		
Catholic	61	44.2
Church of England	50	36.2
Protestant	25	18.1
Non-denominational Christian	2	1.4
Ethnicity:		
White	132	95.7
Other	6	4.3
Marital Status:		
Single	59	42.8
Married	68	49.3
Other	11	8.0

Educational Level:		
Secondary	6	4.3
College	30	21.7
University	100	72.5
Professional Qualification	2	1.4
Occupation Status:		
Employed	96	69.6
Student	23	16.7
Retired	19	13.8

		Age	Gender	Ethnicity	Religious Maturity	Master-motive	Complexity-of-beliefs	Openness	Heuristic quality	Church Attendance	Religious Organisation	Religiosity Self-Rating	Spirituality Self-Rating	Self-Esteem	Life Regard	Self-Actualisation	Depression Happiness	Life Sat
Age	Pearson Correlation Sig. (2-tailed)	1																
Gender	Pearson Correlation Sig. (2-tailed)	.139	1															
Ethnicity	Pearson Correlation Sig. (2-tailed)	.031	-.073	1														
Religious Maturity	Pearson Correlation Sig. (2-tailed)	.072	.063	.185*	1													
Master-motive	Pearson Correlation Sig. (2-tailed)	.173*	.111	.148	.707*	1												
Complexity-of-beliefs	Pearson Correlation Sig. (2-tailed)	.042	.197	.083	.407	-.043	1											
Openness	Pearson Correlation Sig. (2-tailed)	-.045	.019	.085	.407	.617	.288**	1										
Heuristic quality	Pearson Correlation Sig. (2-tailed)	.013	.387	.179	.000	.001	.001	.309	1									
Church Attendance	Pearson Correlation Sig. (2-tailed)	.210	.039	.088	.625*	.294*	.099	.309	.194	1								
Religious Organisation	Pearson Correlation Sig. (2-tailed)	.014	.650	.306	.000	.000	.249	.000	.022	.657*	1							
Religiosity Self-Rating	Pearson Correlation Sig. (2-tailed)	.181*	.100	.183	.560	.752	.027	.248	.194	.000	.410*	1						
Spirituality Self-Rating	Pearson Correlation Sig. (2-tailed)	.033	.242	.031	.000	.000	.749	.003	.022	.000	.000	.483*	1					
Self-Esteem	Pearson Correlation Sig. (2-tailed)	.097	.211*	.236	.544	.592	.066	.312	.220	.000	.000	.025	.025	1				
Life Regard	Pearson Correlation Sig. (2-tailed)	.258	.013	.005	.000	.000	.444	.000	.009	.000	.000	.867	.773	.534	1			
Self-Actualisation	Pearson Correlation Sig. (2-tailed)	.064	-.049	.023	.525**	.678**	-.041	.210*	.327**	.511**	.410*	.000	.000	.000	.615	1		
Depression-Happiness	Pearson Correlation Sig. (2-tailed)	.453	.564	.789	.000	.000	.633	.013	.000	.000	.000	.014	.025	.000	.000	.000	1	
Life Satisfaction	Pearson Correlation Sig. (2-tailed)	.214*	-.040	.142	.631	.606	.256	.389	.253	.571*	.471*	.000	.000	.000	.000	.000	.000	.586*
	Pearson Correlation Sig. (2-tailed)	.012	.643	.097	.000	.000	.002	.000	.003	.000	.000	.000	.000	.000	.000	.000	.000	.000
	Pearson Correlation Sig. (2-tailed)	.144	.010	.189	-.084	-.021	.034	-.174	.037	-.032	-.059	.014	.025	.000	.000	.000	.000	.000
	Pearson Correlation Sig. (2-tailed)	.093	.907	.026	.329	.804	.691	.041	.665	.707	.489	.867	.773	.000	.000	.000	.000	.000
	Pearson Correlation Sig. (2-tailed)	.192	-.060	.031	.188	.316	.062	.005	.056	.280	.192	.286	.201	.534	.000	.000	.000	.000
	Pearson Correlation Sig. (2-tailed)	.024	.487	.719	.028	.000	.471	.950	.515	.001	.024	.001	.018	.000	.000	.000	.000	.000
	Pearson Correlation Sig. (2-tailed)	.243	.040	.121	.117	.236	.116	-.084	-.006	.273	.201	.181	.246	.615	.539	.000	.000	.000
	Pearson Correlation Sig. (2-tailed)	.004	.638	.158	.173	.005	.175	.325	.940	.001	.018	.034	.004	.000	.000	.000	.000	.000
	Pearson Correlation Sig. (2-tailed)	.223	.029	.101	.028	.168	.014	-.145	.004	.230	.165	.201	.141	.604	.752	.535	.000	.000
	Pearson Correlation Sig. (2-tailed)	.009	.733	.239	.742	.049	.870	.089	.962	.007	.053	.018	.098	.000	.000	.000	.000	.000
	Pearson Correlation Sig. (2-tailed)	.136	-.003	.010	.003	.135	-.029	-.137	.003	.122	.088	.150	-.012	.359	.541	.302	.586*	.000
	Pearson Correlation Sig. (2-tailed)	.111	.972	.910	.970	.114	.739	.109	.976	.153	.304	.078	.889	.000	.000	.000	.000	.000

Table J3

Correlation Matrix

*. Correlation is significant at the 0.05 level (2-tailed).

**. Correlation is significant at the 0.01 level (2-tailed).

Appendix K

Summary of Study-1's Main Findings

In summary the statistical results seem to indicate that:

A. Master-motive is to some extent positively related to higher emotional well-being and life satisfaction, mainly through life regard.

B. Openness is to some extent negatively associated with depression-happiness and life satisfaction, mainly through self-esteem.

C. Certain RM components, i.e. master-motive and openness, have an opposing relationship with the PWB indicators.

D. Church attendance and religiosity self-rating display the same pattern of relationships with PWB as master-motive; with the former displaying the strongest association with depression-happiness and religiosity self-rating displaying the strongest relationship with life satisfaction.

E. All religiosity measures have a more pronounced relationship with affective well-being than life satisfaction.

Appendix L

Interview Schedule

L1. Sample of the Interview Schedule – Version 1

Preamble:

- Thank you for agreeing to participate in this interview. As was explained beforehand, the survey you completed was investigating the potential relationship between religiosity and well-being and this interview will now be exploring this topic of interest in a deeper and more open-ended manner.
- In this interview I will be asking you a few questions about this topic with the process normally taking around an hour. I am not expecting you to have thought a lot about the topic, though you may have.
- In this interview I am interested in your own personal views and experiences of religious life as these may provide fresh insight about the topic of interest. .
- I understand that your views may change or new ideas may crop up during the course of the interview, so please feel free to speak openly and even refer to previous questions throughout all stages of this interview.
- As explained in the information sheet, the contents of this interview will be treated with utmost confidentiality and at no time after the interview will your name or other identity-revealing information be disclosed. There are though limits to confidentiality in circumstances involving mention of harm to self and/or others.

Questions

1. Do you consider yourself religious? If so, what does being religious mean to you?
2. How would you describe your religiosity?
3. What is your understanding of the role religion plays in your life?
 - Can you speak about any possible effects being religious has had in your life?
E.g:- Could you tell me about how being religious may influence the way you view yourself?
 - Could you tell me about how being religious may influence the way you view your life?
4. What is your view about whether religiosity is related to personal well-being? If yes, what is your experience about how this works?

- Are there any particular aspects/characteristics of your religious life that influence your well-being positively?
 - Are there any particular aspects/characteristics of your religious life that influence your well-being negatively?
 - Would you be able to give me an example of these?
5. How would you rate the importance/effects of being religious to your well being compared to other aspects of your life?

Further questions – to be used if topics in question are not addressed beforehand.

One idea that has been discussed by people who are interested in the possible psychological impacts of religiosity is the importance of taking into account the changes that occur within the individual's religious life over time.

6. What do you think of this idea from your own experience? Have you experienced any changes in your religious life over time?
- If yes, how would you describe these changes?
 - What motivated or brought about these changes?
7. Do you feel that these changes have impacted your well-being in any way?

Note

- *Prompts*

Appendix L

Interview Schedule

L2. Sample of the Interview Schedule – Version 2

Preamble:

- Thank you for agreeing to participate in this interview. As was explained beforehand, the survey you completed was investigating the potential relationship between religiosity and well-being and this interview will now be exploring this topic of interest in a deeper and more open-ended manner.
- In this interview I will be asking you a few questions about this topic with the process normally taking around an hour. I am not expecting you to have thought a lot about the topic, though you may have.
- In this interview I am interested in your own personal views and experiences of religious life as these may provide fresh insight about the topic of interest. .
- I understand that your views may change or new ideas may crop up during the course of the interview, so please feel free to speak openly and even refer to previous questions throughout all stages of this interview.
- As explained in the information sheet, the contents of this interview will be treated with utmost confidentiality and at no time after the interview will your name or other identity-revealing information be disclosed. There are though limits to confidentiality in circumstances involving mention of harm to self and/or others.

Questions

1. Do you consider yourself religious? If so, what does being religious mean to you?
2. Can you tell me about any aspects, or parts, of your religious life that are important to you?
3. What is your understanding of the role religion plays in your life?
 - Can you speak about any possible effects being religious has had in your life?
E.g:- Could you tell me about how being religious may influence the way you view yourself?
 - Could you tell me about how being religious may influence the way you view your life?

4. What is your view about whether religiosity is related to personal well-being? If yes, what is your experience about how this works?
 - Are there any particular aspects/characteristics of your religious life that influence your well-being positively?
 - Are there any particular aspects/characteristics of your religious life that influence your well-being negatively?
 - Would you be able to give me an example of these?
5. How would you rate the importance/effects of being religious to your well being compared to other aspects of your life?

Further questions – to be used if topics in question are not addressed beforehand.

One idea that has been discussed by people who are interested in the possible psychological impacts of religiosity is the importance of taking into account the changes that occur within the individual's religious life over time.

6. What do you think of this idea from your own experience? Have you experienced any changes in your religious life over time?
 - If yes, how would you describe these changes?
 - What motivated or brought about these changes?
7. Do you feel that these changes have impacted your well-being in any way?

Note

- *Prompts*

Appendix M

Sample of the Information Sheet Given to Potential Participants for Study-2

Dear Volunteer,

I am currently conducting my doctoral research in completion of my Professional Doctorate in Counselling Psychology at London Metropolitan University. The general aim of this study is to explore the relationship between religion and psychological well-being. In line with the increasing interest in the relationship between religion and psychological health, this study is interested in the role religion plays in the individual's life choices, priorities, meaning-making and general lifestyle and consequently what influence religion has on well-being. I am approaching you because through your interest in this subject you can offer a valuable contribution to the knowledge base bridging the important fields of psychology and religion.

Participation

Please note that participation in this study is completely voluntary and you retain the right to withdraw your participation at any time before the research data is compiled and analysed. To participate in this study consists of a one-to-one semi-structured interview approximately an hour long.

Your Contribution

If you intend to contribute to this study you will first need to carefully read and agree to the consent form explaining that you have understood your rights related to the study. Before agreeing to participate please consider that this study will be asking deep and existential questions about your life, questions that require you to think about yourself, your life and the level of meaning you ascribe to it. Please take into consideration the fact that due to their existential nature these questions might possibly provoke unexpected emotional reactions. In case you decide to participate and do find these questions

upsetting, please refer to the sources of support that will be listed in the debriefing sheet provided after participating in this study. On completing the consent form the interview will commence.

Confidentiality and Use of Data

Each interview will be recorded and then transcribed and this data will then be analysed using standard research procedures. To ensure anonymity and confidentiality you will be assigned a reference number and your interview recordings and transcripts will only be identifiable through this number. A pseudonym will be used during the interview to protect your identity and any information that might be considered identity-revealing such as addresses and particular demographics will be omitted or changed in the transcript. The relevant audio files will be stored on a password protected computer. Only the consent form will link your name to your reference numbers and this will be stored in a safe location separate from the transcripts and audio files. Withdrawal from this stage of the study will be possible until the 31st June 2012 before the data will be compiled and analysed. To do so you only need to email your reference number to the researcher's email address.

I will be solely responsible for reading, analysing and storing the data. Research data will be stored securely for a period of time after the completion of the study and then discarded safely.

Thanks for your kind attention,

Researcher: Julian Caruana

Email: juliancaruana@hotmail.com

Supervisor: Dr Mark Donati

Email: m.donati@londonmet.ac.uk

Appendix N

Sample of the Consent Form Given to Potential Participants for Study-2

I consent to participate in a study entitled '*What is religion's psychological role? An in-depth investigation into the relationship between religiosity and well-being*' investigating the relationship between religiousness and psychological well-being. I also agree to the use of my data for the purposes of a Counselling Psychology doctoral dissertation at the London Metropolitan University.

I understand that my participation is completely voluntary and that I will be free to withdraw from the study at any time before the data is analysed and I understand that all the necessary precautions will be taken to safeguard my anonymity throughout all the research process.

Ref No: _____

I agree to the above.

- | |
|--|
| <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
|--|

Appendix O

Sample of the Debriefing Sheet Used for Study-2

Thank you for valuable contribution to this study and to the current knowledge base about religiosity and the psychological domain.

As explained in the briefing session, this study aims to investigate in detail the relationship between religiosity (more precisely the nature of the individual's engagement with and approach towards religiosity) and psychological well-being. This study is examining the possibility that different ways of being religious might have diverse psychological effects and that these various ways of being religious can be present in every religion. Therefore please note that this study does not aim to make an analysis of a particular religion or about the intrinsic usefulness of religion in general.

In the eventuality that you found participation in this study upsetting and would like to search for adequate sources of support please refer to the options below:

- Contact your local GP.
- Refer to BPS (British Psychological Society) website:
<http://www.bps.org.uk/e-services/find-a-psychologist/directory.cfm>
- Refer to the therapy pages of NHS Choices:
<http://www.nhs.uk/livewell/counselling/pages/accesstotherapy.aspx>

Should you be interested in the findings or if you have any questions about this study, please feel free to contact me.

Researcher: Julian Caruana

Email: juliancaruana@hotmail.com

Supervisor: Dr Mark Donati

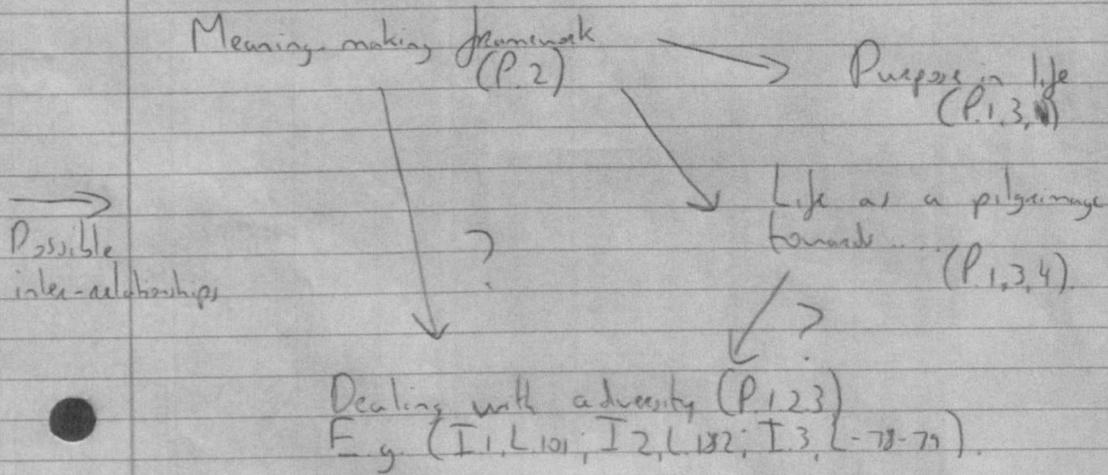
E-mail: m.donati@londonmet.ac.uk

Appendix P

Sample of a Memo

Existential issues

Religiosity's influence on existential strivings.



Yes - Can suffering be considered an existential issue?
Seems so - Do participants look at it as an existential issue?
They certainly draw a link between suffering & other existential issues.

(Suffering $\xrightarrow{\text{can lead to}}$ meaningless, loss of purpose, loss of future orientation, feeling futile)

E.g. I1, L115 Religion seems to act as a buffer
I2, L182-185 for this process according to interviews
I3, L339-340... Religion seemingly providing an ontological meaning for suffering...

Coding Trail for Theme-1: Multifaceted Nature of Individual's Religiosity

Part 1

Higher-Order Category	Lower-Order Category	Axial Codes
Religiosity profile	Discernment and doubt in religiosity	Open-minded engagement with religiosity Doubt about basic religious tenets
	Religion's role in life	Religion pervading every aspect of life Religion as tool Religion connected to daily life
	Understanding of and identification with religiosity and spirituality labels	Personal definitions of religiosity and spirituality View of self
	Conception of the divine: Personal God vs Distant God	Conception of the divine: Personal God vs Distant God Notion of God within self
Having an intimate relationship with God	Relating to God	Relating to God as a central aspect of religiosity Nature of relationship between God and self Understanding prayer as relating to God
	Changes in individual's religiosity: Personal growth and relating with God	Religiosity becoming concerned with love, growth and a personal relationship with God

Coding Trail for Theme-1: Multifaceted Nature of Individual's Religiosity

Part 2

Axial Code	Focused Code	Initial Code
Open-minded engagement with religiosity	Family encouraging a discerning and critical approach towards religion	Raised in a liberal Catholic family (I.3.L.105), Modern approach to religiosity encouraging lateral thinking (I.3.L.106)
	Father encouraging a thought-out engagement with religion	Experience of Holy Communion (I.3.L.546), Having a white nice dress and a party not adequate reasons for receiving Holy Communion (I.3.L.548-549), inability to provide a good rationale for receiving Holy Communion at a young age (I.3.L.550), Needing a good rationale for receiving Holy Communion (I.3.L.551-552)
	Searching for a synthesis between intellect and affect	Religion calling for a synthesis between intellect and affect (I.2.L.84-85), Searching for a balance between intellect and affect (I.2.L.144), Balance between intellect and affect being sometimes difficult to achieve (I.2.L.145)
	Importance of discerning the aspects brought in by the religious authorities	What the authorities bring in (I.4.L.572), Discerning what is right and wrong (I.4.L.573)
	Using intelligence to discern	God-given intelligence (I.4.L.556), Personal choice how to use intelligence (I.4.L.557), Having an enquiring mind (I.4.L.558), Not accepting everything as gospel truth (I.4.L.559), Discerning what is right and wrong (I.4.L.563), Discerning what is important (I.4.L.564), Using intelligence to discern (I.4.L.566), Discerning information (I.5.L.604,605), Need to question (I.4.L.606), Religion not promoting questioning (I.4.L.609), Intelligence driving questioning (I.4.L.610,611), Intelligence promoting creativity (I.4.L.612)
	Need to be vigilant	Need to be vigilant (I.4.L.601), "Not to be gullible" (I.4.603)
	Lack of discernment being problematic	Lack of discernment of right and wrong (I.1.L.238)
	Primary guidance coming from conscience	Listening to conscience (I.4.L.569), Conscience providing guidance (I.4.L.570), Choice as a personal responsibility (I.4.L.575), Listening to conscience (I.4.L.569)
	Objective accuracy vs. symbolic usefulness	Mode of interpretation of religious texts (I.2.L.138), Historical accuracy of religious texts not being of primary importance (I.2.L.139)
	Liberal-minded parents providing a critical perspective on religiosity	Input of liberal-minded parents (I.3.L.515), Liberal-minded parents commenting openly and critically on religion (I.3.L.516), "There are other way ways to be really Christian without..." (I.3.L.517)
	Entrenchment leading to a lack of openness	Entrenchment in a particular religious view (I.2.L.211), Entrenchment leading to a lack of openness (I.2.L.212), Lack of openness always being harmful (I.2.L.213)
	Disagreeing with view that upholds the primacy of a particular religion	Disagreeing with view that upholds the primacy of a particular religion (I.3.L.582), View that upholds the primacy of a particular religion (I.3.L.581)
	View of Church as fallible	Church can make mistakes (I.4.L.568)
	Awareness that certain religious tenants are man-made	Man-made tenants (I.4.L.560,561), Using intelligence to discern man-made tenants (I.4.L.562)

	Not accepting blindly the Church's teachings	Not accepting all the Church's teachings (I.4.L.565), Not accepting blindly all the Church's teachings (I.4.L.567), Not accepting everything as gospel truth (I.4.L.559)
	Moral choice always residing within self	Is this right or wrong? (I.4.L.577), Moral choice as a personal responsibility (I.4.L.578)
	Personally responsible for leading one's life	Personal responsibility for leading one's life (I.3.L.209), Personal responsibility (I.4.L.325-326)
	Setting one's own standards	Not to focus on other people's expectations (I.4.L.321-322), "I have to set the standards" (I.4.L.323-324)
	Doubt about basic religious tenets	Full acceptance of a religion (I.4.L.413-415)
	Strong presence of religious doubt	A lot of thinking about religion (I.2.L.117), Religious doubt (I.2.L.118,119), A lot of thinking about religious beliefs (I.2.L.135), Lack of proof that God exists (I.2.L.136), Doubt about historical accuracy of religious texts (I.2.L.137)
	Fluctuations in religious life	Unstable religiosity (I.2.L.285,288)
	Dichotomy between science and religion fuelling doubt	Dichotomy between science and religion (I.2.L.131), Dichotomy between science and religion fuelling doubt (I.2.L.132), Doubt leading to depression (I.2.L.133)
	Meaning in doubt	Meaning even in the doubt (I.2.L.120)
	Religious doubt having a negative psychological impact	Religious doubt having a negative psychological impact (I.2.L.133)
	Difficulty in ascertaining source of doubt	Doubt consequence of religion or personality? (I.2.L.134)
	Faith providing an underlying assurance	Faith providing an underlying assurance (I.1.L.502)
	Faith becoming a deep part of self	Faith becoming a deep part of self (I.1.L.135)
	Religion pervading every aspect of life	I think that faith.... touches every aspect of existence (I.1.L.46)
	Religion touching every aspect of existence	Religion interweaving through life (I.2.L.392)
	Religion interweaving through life	Religion interweaving through life (I.2.L.392)
	Religious principles permeating life	Following religious principles (I.1.L.40), Religious principles transferred to other arenas in life (I.1.L.41), Religious principles transferred to working life (I.1.L.42)
	Religion as an underlying foundation	Religion not occupying personal thoughts the whole time (I.1.L.30), "It's sort of an underlying foundation to everything that I do in my life" (I.1.L.31,32), Christian principles providing a foundation to everyday working life (I.1.L.60,61)
	Religion involving the person holistically	Religiosity having an intellectual aspect (I.2.L.79), Religion as an intellectual interest (I.2.L.80), Religion having an impact on affect (I.2.L.81), Religion involving the person holistically (I.2.L.83)
	Religion as a deep priority	Religion as a deep priority in life (I.1.L.29)
	Religion having a very important role in life	Religion having a very important role in life (I.1.L.78)
	Religion intricately linked with personal life	Difficult to imagine life without religion (I.4.L.179,180)
	Religion can work on different levels	"Religion can work on a number of different levels" (I.1.L.68)

<p>Personal definitions of religiosity and spirituality</p>	<p>Evolution in understanding of religiosity</p> <p>Contrast between religiosity and spirituality</p> <p>Spirituality being a broader construct than religiosity</p> <p>Religion implying an institutional element</p> <p>Religion implying affiliation with a group</p> <p>Understanding religiosity as piousness</p> <p>Internal aspect as the defining feature of spirituality</p> <p>View of self as religious</p> <p>Does not identify directly with the religious label</p> <p>Dissociates from label of radical believer</p> <p>Roman Catholic affiliation</p> <p>Partly connected with institutional religion</p> <p>Identifying more with being spiritual than religious</p> <p>Religion providing a working environment</p> <p>Energetically denying being religious in the past</p> <p>Re-attending church to accompany husband</p> <p>Past view of self as non-religious</p> <p>Irregular Church attendance despite understanding of self as religious</p> <p>View of self as religious and spiritual</p> <p>Being a member of a religious congregation</p> <p>Personal religiosity tied to being a member of a religious congregation</p> <p>Conception of the divine: Personal God vs Distant God</p> <p>Present notion of God as close and helpful</p> <p>Conception of God as a crutch</p> <p>Understanding God is also present in failures</p>	<p>Religious by modern standards (1.3.L.2), Not religious by the standards of 30/40 years ago (1.3.L.3), Evolution in understanding of how people are religious (1.3.L.4)</p> <p>Religion as taking notice of dogma and doctrine (1.2.L.11), Religion as emphasizing church attendance (1.2.L.12), Spirituality as meeting God inside oneself (1.2.L.13), Religion as listening to other people (1.2.L.15), Spirituality as listening to oneself (1.2.L.16), Distinction between religiosity and spirituality (1.4.L.191; 1.4.L.12; 1.4.L.23)</p> <p>Regardless of religious affiliation (1.4.L.22)</p> <p>Institutional religion (1.4.L.8)</p> <p>Religious referring to affiliation with a group (1.4.L.14-15)</p> <p>Religiosity' having a particular connotation (1.4.L.378), Understanding religiosity as piousness (1.4.L.379)</p> <p>Understanding spirituality as religion on an inner level (1.2.L.74)</p> <p>View of self as religious (1.1.L.2), "I consider myself religious" (1.3.L.7)</p> <p>Being religious from an outsider's point of view (1.2.L.4)</p> <p>"I'm not one of the radical believers" (1.3.L.100)</p> <p>Roman Catholic affiliation (1.2.L.5)</p> <p>Lack of connection to a religious institution (1.2.L.8), Working for a religious order (1.2.L.18), Religion as a sea that I swim in (1.2.L.19), Attending mass when possible (1.2.L.20)</p> <p>Identifying more with being spiritual than religious (1.2.L.6), God's direct involvement in the individual's life (1.2.L.7)</p> <p>Religion providing a working environment (1.2.L.73,75)</p> <p>"I always energetically denied being religious" (1.3.L.260)</p> <p>Husband encouraging church attendance (1.3.L.261), Attending Church so as to accompany husband (1.3.L.262)</p> <p>Past notion of not being religious (1.3.L.251,252,256)</p> <p>Not attending mass every Sunday (1.3.L.8), Mass attendance being dependent on convenience and other commitments (1.3.L.9), Irregular church attendance (1.3.L.61)</p> <p>Defining self as both religious and spiritual (1.4.L.26)</p> <p>"I am a religious by nature" (1.4.L.2), Being a member of a religious congregation (1.4.L.3)</p> <p>Belonging to a congregation as a fundamental component of religiosity (1.4.L.35,36)</p> <p>Present view of God being more personal (1.1.L.588), Present notion of God helping one reach high standards (1.1.L.589)</p> <p>God as an extra crutch (1.3.L.78), Relationship with God acquiring extra importance in moments of need (1.3.L.93), God as someone you can lean on (1.3.L.94)</p> <p>Spirituality of imperfection (1.2.L.343), Understanding that God is present in both the failures and successes (1.2.L.344)</p>
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	God being present in all creation	"Because God is in all things" (1.4.L.56), God as the creator (1.4.L.57)
	Franciscan emphasis on meeting God in creation	Seeing God in all creation (1.4.L.43), St Francis as the patron of ecology (1.4.L.44), "Seeing God in all things" (1.4.L.101), "Mother earth, sister moon, brother sun" (1.4.L.102)
	Conception of God as a superior entity	"God is a superior entity" (1.3.L.177)
	Conception of God as removed from daily life	View of God as not involved in daily life (1.3.L.178), View of God not having time to notice every person's daily activities (1.3.L.179), View of God as not involved in daily life (1.3.L.180)
	God exerting no influence on human life	"I've come to the conclusion that God doesn't ultimately influence anything that happens to us" (1.3.L.184), God is not influencing every single action (1.3.L.197), Simple mechanics explaining the cause of a traffic accident (1.3.L.198,199,200,202), "Is God involved in it?" (1.3.L.201), God not offering protection (1.3.L.203), Not wanting to sound blasphemous (1.3.L.204), Doubt God is running the traffic around the world (1.3.L.205)
	God being absent	God is not there (1.3.L.186), Futile attempting to derive comfort from God in suffering (1.3.L.187)
	Notion of God within self	God living within self (1.1.L.598), Knowing that God is within self (1.1.L.614)
		The Lord is within each of us (1.4.L.184)
		Kingdom of God being both within and outside of the self (1.2.L.233,234)
	Relating to God as a central aspect of religiosity	Acquiring greater knowledge of God (1.4.L.5)
		Realising many Catholics experienced relationship with Jesus (1.1.L.539), Experience of a personal relationship with Jesus making a tremendous difference in one's religious life (1.1.L.540,541)
		Praying as an important aspect of religious life (1.4.L.79), Praying daily as a fundamental component of religiosity (1.1.L.4), Spending time in prayer (1.4.L.4)
		Praying as more important than church attendance (1.2.L.44), Easier to describe prayer by what it is not (1.2.L.56), Prayer not being about attending church (1.2.L.56)
		Belief in God as a central component of religiosity (1.3.L.29), Can be any God (1.3.L.29)
	Nature of relationship between God and self	Religion as a background to the relationship between God and self (1.2.L.23), Religion not being of main importance (1.2.L.24)
		Closer relationship with God providing clarity (1.2.L.336)
		Relationship with God becoming more personal (1.2.L.334), Relationship with God becoming more similar to an everyday relationship (1.2.L.335)
		Relationship with Jesus not being mentioned in Catholic upbringing (1.1.L.532), Catholic Church not emphasizing a personal relationship with Jesus in the past (1.1.L.533,534), Catholic Church starting to put a greater emphasis on having a personal relationship with Jesus (1.1.L.535)

	Acts of kindness connected to a personal relationship with God	Importance of small acts of kindness (I.2.L.166), Small acts of kindness connected to a personal relationship with God (I.2.L.167)
	Dealing with adversity deepening one's relationship with God	Dealing with adversity deepening one's relationship with God (I.1.L.453,454)
	God actively seeking to bring one closer to him	"Lord uses people or events to bring me closer to him" (I.4.L.365)
	Experience of God's presence providing peace	Viewing God as having a gentler disposition (I.2.L.360), Experience of God's presence providing peace (I.2.L.360)
	Experience of God enriching experience of life	Experience of God enriching experience of life (I.1.L.337,338)
	God as a figure one can vent anger towards	God as someone you can get angry with (I.3.L.98)
	Not thinking about relationship with God daily	Too absorbed in daily life to think about relationship with God (I.3.L.92)
	Understanding prayer as relating to God	Difficulty in defining prayer (I.1.L.153), Multiple definitions of prayer (I.1.L.154), Emphasizing the complexity of praying (I.1.L.170)
	Difficult to explain what praying means	Difficult to capture in words what praying means (I.2.L.55)
	Prayer as a means for relating to God	Praying as a means for having a relationship with God (I.1.L.155), Having a relationship with God (I.4.L.95)
	Prayer as means to get to know God	Prayer as coming to know God (I.4.L.80,81), Getting to know God better through prayer (I.4.L.94)
	Praying regularly facilitating the development of a relationship with God	More helpful to pray throughout the day (I.4.L.124,125), Not restricting prayer to the morning (I.4.L.126,127)
	Prayer as a means of presenting a situation to God	Prayer as a dialogue with God (I.1.L.177), Prayer as a means of presenting a situation to God (I.1.L.177)
	Prayer as a particular form of dialogue	Prayer as a particular form of conversation (I.1.L.185)
	God responding in non-conventional ways	Prayer as a particular form of conversation (I.1.L.185)
	Praying regularly throughout the day	Spreading prayer time throughout the day (I.4.L.117,118,119), "Better to have little bites throughout the day" (I.4.L.120,121), Muslims praying 5 times a day (I.4.L.122,123)
	Prayer not a matter of dictating personal wishes	Prayer not a matter of dictating personal wishes to God (I.1.L.174), Prayer not a matter of telling God what to do (I.1.L.175,176)
	Religiosity becoming concerned with love, growth and a personal relationship with God	Change in understanding of religion (I.1.L.580), Biggest change in religiosity (I.1.L.579)
	Developing a deeper understanding of religion	Understanding of religion developing over the years (I.1.L.71,72), Developing a deeper understanding of Christian faith (I.1.L.134)
	Change in religious views	Change in religious views throughout lifetime (I.2.L.148)
	Developing a different religious approach	Developing a different religious approach (I.1.L.609)
	Gaining perspective	Gaining perspective (I.4.L.667), Different perception (I.4.L.664)
	Having a compartmentalised understanding of religion in the past	Different understanding of religion in the past (I.1.L.69), Past understanding of religion as solely related to Church attendance (I.1.L.70)
	Previously equating religiosity with church attendance	Thinking Church attendance was sufficient (I.1.L.527), Understanding of religion as Church attendance (I.1.L.581)
	Past immersion in institutional religion	Past as a religious sister (I.2.L.21), Past immersion in religion as an institution (I.2.L.22)

	Earlier religiosity being constrained by the institution (I.2.L.149)	Earlier religiosity being constrained by the boundaries of the institutional church (I.2.L.149)
Past view of religion providing a definite direction	Past view of religion providing a definite direction	"Believed there was a right way of doing things" (I.2.L.315,316), Past view of religion providing a clear and set direction (I.2.L.317)
Previous notion of God imposing difficult standards	Previous notion of God imposing difficult standards	Previous notion of God imposing difficult standards (I.1.L.584), Feeling that God's standards were unattainable (I.1.L.585)
Previous notion of God as distant and judgemental	Previous notion of God as distant and judgemental	Previous notion of God as distant (I.1.L.582), Previous notion of God as judgemental (I.1.L.583)
Experience of God tied to doing	Experience of God tied to doing	Experience of God tied to doing things for God (I.2.L.361)
Feeling unloved by God	Feeling unloved by God	"God didn't love me" (I.1.L.587)
A religiosity that is more focused on personal growth	A religiosity that is more focused on personal growth	A religiosity that is more concerned with personal growth (I.2.L.326)
Religion as an experience of internal growth	Religion as an experience of internal growth	Religion as an experience of internal growth (I.1.L.590), Ceasing to view religion as an attempt to meet impossible standards (I.1.L.591)
Love becoming central to religiosity	Love becoming central to religiosity	Love becoming central to religiosity (I.2.L.152), Showing love to others (I.2.L.152), Loving others being central to one's faith (I.2.L.155)
Focus shifting from doing to being	Focus shifting from doing to being	Focus shifting from doing to being (I.2.L.362)
A religiosity that is less concerned with the institutional aspect	A religiosity that is less concerned with the institutional aspect	A religiosity that is more concerned with relationships (I.2.L.327), A religiosity less concerned about rules and instructions (I.2.L.327), A religiosity that is less concerned about dogma and doctrine (I.2.L.328)
Institutional aspect losing relevance	Institutional aspect losing relevance	Institutional aspect ceasing to be a central part of religiosity (I.2.L.151), Majority of the Church's teaching being irrelevant (I.2.L.156,157)
Present view of prescriptions being nonessential	Present view of prescriptions being nonessential	Childhood religiosity full of prescriptions (I.3.L.396), Need to confess once a week (I.3.L.397), Avoid eating meat on Fridays (I.3.L.398,399), Prescriptions varying according to country (I.3.L.400,401), Viewing prescriptions as less important (I.3.L.402), Viewing prescriptions as accessories (I.3.L.403), Viewing prescriptions with a bit of criticism (I.3.L.406), Presently not giving importance to prescriptions (I.3.L.407)
A religiosity that is more focused on the experiential aspect	A religiosity that is more focused on the experiential aspect	A religiosity that is more experiential (I.2.L.326)
Change in conception of God	Change in conception of God	Change in conception of God (I.1.L.578), "Before I felt driven by God, now I feel drawn by him" (I.2.L.351), God gently inviting engagement with him (I.2.L.353,354), God inviting not pushing (I.2.L.352), Change in conception of God (I.3.L.192)
Relationship between God and self becoming more important	Relationship between God and self becoming more important	A religiosity not reliant on spoon-feeding (I.2.L.322), A religiosity based on the relationship between self and God (I.2.L.322)
Developing a personal understanding of God as Trinity	Developing a personal understanding of God as Trinity	Developing a personal understanding of Jesus as Lord and Saviour (I.1.L.572), Developing a personal understanding of the need for the Holy Spirit (I.1.L.573), Holy Spirit becoming an active part of daily life (I.1.L.574), Developing an understanding of God as trinity (I.1.L.575)
Previous notion of God as a constant guiding presence	Previous notion of God as a constant guiding presence	"As a child I always thought that God was always there and guiding me" (I.3.L.206), As a child you feel that God is always there (I.3.L.193), As a child you feel that God is on your shoulder (I.3.L.194)
God judging on love not accomplishments	God judging on love not accomplishments	God judging on love (I.4.L.327), God not judging on accomplishments (I.4.L.328)

Section B

Reflective Essay

My personal journey as an aspiring counselling psychologist

When reflecting on my personal philosophy and orientation towards counselling psychology, the first factor that comes to fore is that my primary professional identity is that of a counselling psychologist and my role as a therapist is one of the sub-components of that identity. In line with the scientist-practitioner and reflective-practitioner stance, I also see myself professionally as a researcher, theorist and scientist interested in the advancement of psychological knowledge and these pursuits inform and guide my practice as psychotherapist.

In my current training stage, I mainly use CBT in my therapeutic work because of the nature of training I have received, the type of expertise I have accumulated so far and to some degree placement policies. However, despite practising mainly as a CBT therapist, my own personal philosophy and theoretical orientation aligns itself with an integrative stance and I see my personal journey of professional development leading towards an integrative psychotherapy practice.

Being initially drawn to psychology because of a strong intellectual interest in the psychological side of the human person and my desire to make a positive difference in others' life, as my undergraduate course progressed I understood that counselling psychology was the area of applied psychology that would best enable to me reach these goals. This decision was mainly due to my growing appreciation of the humanistic philosophy underlying counselling psychology and a gradual realisation of its congruence with my own understanding of the human person and with my personal philosophical preferences and values.

I was attracted by counselling psychology's emphasis on the therapeutic relationship, the significance of inter-subjective experience and the primacy afforded to the client's

own frame of reference and how this emphasis espouses my view of the human person as possessing an inherent dignity, uniqueness and ability to connect to and have a positive effect on others. I was also struck by how the view of the therapist as a co-facilitator, desiring to first relate to the individual seeking help, resonated with my own personal notions of how to make a positive difference in others' lives.

All this drove me towards a postgraduate course in counselling psychology, but despite having a philosophical preference for the third force humanistic therapies, I also had a predilection for an integrative stance to psychological practice due to an intellectual predisposition to theoretical pluralism. This stance, and a number of external factors that are beyond the scope of this essay, led me to choose the counselling psychology course at this university, even though I was not particularly enamoured with its choice of CBT as the main therapeutic model in training.

However, despite an initial indifferent attitude towards CBT, after more than two years of using this therapeutic mode, I have through my own personal experiences become a strong believer in its advantages in terms of structure, focus on formally setting and evaluating goals, importance given to an ever-evolving formulation and emphasis on collaboration and active client participation. I also have personal experience of its effectiveness for anxiety and mood disorders and PTSD and as an impartial psychologist one can not ignore the strong evidence base for CBT for various mental disorders (Leichsenring, Hiller, Weissberg & Leibing, 2006). Through my training, I have also realised that CBT ties in with my personality preferences in terms of its focus on organisation and clarity and this helped me feel attuned to this model. However clinical experience with some clients has also made me aware of the model's limitations, such as its overemphasis on rational and logical processing at the detriment of emotional processing and the high cognitive demands placed on clients in a way that full effectiveness partly depends on a fit between the therapy and the client's thinking style.

On a purely conceptual level, I also consider CBT has having its limitations in offering a comprehensive psychological model for the human person as the analysis of behavioural, emotional, physiological and cognitive components does not provide a holistic view of human functioning. I strongly believe in a pluralistic theoretical

position that views each therapeutic orientation as providing a framework that sheds light on an aspect or some aspects of the complex human psychological realm and hence regard views that CBT, or any other school of therapy, is the model best suited for all presentations, clients and contexts as too simplistic. I feel that this theoretical position offers a sound explanation for the evidence that indicates there is no single approach that is clinically adequate for all cases and that no single form of therapy is more effective than the rest (Patterson & Watkins, 1996). I also believe strongly that counselling psychology's role is to encourage an open-minded approach towards theoretical orientation that is always bound to be more fruitful to progress in the psychotherapeutic field than narrow-minded adherence to a specific school of thought. This preference for theoretical pluralism is also based on my personal position, in terms of philosophy of science, of critical realism which upholds a realist ontology but accepts that reality is so complex that it can only be partially known and understood. Another contributing factor to my integrative stance is the view that the spirit of psychotherapy integration is flexible and more responsive to client considerations and a therapist-therapy orientation fit.

While this personal philosophy and orientation towards counselling psychology has been developing through my postgraduate training cultivated by lectures, reading, supervision, client experience and personal reflection, my practice has been following the same route albeit at a slower pace. This can be explained by the fact that the initial tasks, in the road towards developing one's personal theoretical orientation and associated mode of working, are to first become fully conversant in one therapeutic approach as well as familiar with the other major therapeutic models. However, despite the fact that my training has been mainly dedicated to these tasks and that I have, until now, employed CBT as the main therapeutic model for all my cases, I also have been trying to make best use of other therapeutic models to inform and augment my work in a variety of ways.

Currently I am familiar and have a working knowledge of psychodynamic models through my training, personal therapy and supervision and I am conversant with humanistic and phenomenological orientations particularly person-centred and existential therapy. I also have been introduced to various cognitive models such as schema therapy and third-wave approaches such as DBT and CAT and had received

some Gestalt training before I started my postgraduate studies. Being exposed in varying extents to such a spectrum of therapies has helped cultivate the pluralistic theoretical mindset I expounded on before, but the gap between theory and technique is not easy to bridge and in my practice I have tentatively been trying to draw from non-CBT models to enrich my conceptual understanding of cases and to implement the use of other techniques in a comprehensive manner. A number of case examples will help illustrate this point more clearly:

I sometimes find psychodynamic concepts particularly useful in my evaluation of the therapeutic relationship, as they provide a framework for understanding interpersonal relating that offers a rich source of information on the client and sometimes us as therapists. For example, with a couple of clients, their reactions to homework and psycho-education readings at the initial therapy stages offered an indication of a pattern of relating when people seem to place demands on them. This helped me adopt an appropriate level of directiveness and pace in my CBT interventions, choose future homework cautiously and aided my development of a cognitive case conceptualisation by providing an early indication of beliefs about incompetence. In other instances, exploring the possibility of counter-transference in supervision helped me reflect on certain emotional reactions of mine and discern between possible contributing factors such as unresolved personal issues, the role the client was projecting onto me or normative responses to the client's emotional world.

While always operating from a person-centred base, I believe that certain situations call for a fuller use of this therapeutic model especially where the facilitation of emotional processing or offering containment is necessary. I, for example, strongly felt this was the case recently, when a 45-year old female client passing through a painful divorce entered a session highly distressed due to upsetting encounter with her ex-husband. In this case I departed from the set session agenda and focused on giving the client the requisite time to describe this incident in detail, helping her process her emotional pain and then reflect back an accurate emphatic understanding of such emotions. This choice of interventions was based on a rationale of showing unconditional positive regard to counter the acute feelings of rejection she was experiencing at that point and focusing on showing an authentic front to her pain so as to negotiate, through genuineness, this critical juncture in therapy in a manner that

solidified our relationship. Despite veering off from the CBT therapeutic plan, I still kept a cognitive-behavioural frame of reference throughout and while noticing this episode's relevance for the IBs and core beliefs discussed in previous sessions, I then used these interpretations in future sessions.

Finally in another case I made use of existential therapy concepts to ensure I provided one of my clients with a holistic therapeutic service. This case consisted of a male client in his sixties who had been struggling with depression for several years and had suffered physical abuse in his childhood and a number of failed intimate relationships subsequently. While on the one hand, our therapeutic work focused on the link between these experiences and his depression through his beliefs, processing biases and compensatory behaviours, there was an anxiety about the futility of his past life and the lack of purpose in whatever was left of his future that seemed to demand a different focus. Based also on supervisory input, we dedicated some of the later therapeutic sessions to a discussion about concepts such as existential anxiety and existential vacuum and about how such anxiety is a normative response to certain existential givens but can also act as a growth stimulus. Therapy then progressed to an exploration of possible meanings in the client's life. These interventions elicited a positive reaction from the client both immediately and at the end of therapy and his feedback also highlighted that he did not find such concepts incongruent with our cognitive-behavioural work.

As these case examples indicate, at this point in my development as a counselling psychologist, I am trying to pitch the therapy I offer according to a number of client and situational variables I believe are relevant to the psychotherapeutic service offered. While retaining a strong CBT base, I am slowly trying to augment this approach with concepts and/or techniques from other therapeutic models in a manner that is conceptually coherent. In this respect I am still in the beginning of my journey towards developing my own integrative psychotherapeutic position and practice and these case examples can be viewed as my first tentative steps.

At this stage of the journey, the rationale behind which orientations to draw from is based on the variables mentioned above and on my current conceptualisation of right fit. I believe that existential concepts can be easily used within CBT because

existential therapy, as May and Yalom (2000) asserted in literature, is not in itself a distinct or well-organized therapeutic model and in fact, its founders' aim was not the creation of a separate school of therapy, but rather that the promotion of key concepts and themes that would become integrated into all therapeutic models. In the case of psychodynamic therapy, even though it is based on a diverse (some may say not reconcilable) view of human nature than cognitive-behaviour therapy, I still am of the opinion that psychodynamic concepts can be used in an intelligent manner to garner insights, useful for both case conceptualisation and supervision, that would not be discernable through the use of a cognitive-behavioural lens. The utility of such concepts such as transference and counter-transference for the broad school of cognitive therapies is confirmed in literature by Leahy (2003) and Sanders and Wills (2005) who speak about how they are now viewed within these approaches as a valuable means of gaining a deeper understanding of the therapeutic relationship and factors effecting it. Finally while there is a wide consensus that a general person-centred focus can permeate the way CBT is practised¹, experientially-focused techniques can also be included in the picture. In fact Sanders and Wills (2005) list the use of experientially-driven techniques mainly from humanistic therapies alongside cognitive work as one of the current developments in cognitive therapies in general.

I therefore feel that there is a fertile ground for integration of concepts and techniques in CBT in a theoretical congruent and client useful way. CBT itself is an integration of previously distinct theoretical orientations and Beck himself maintains that cognitive therapy is not a technique-driven approach and that other techniques from diverse orientations can be used within cognitive therapies provided they are congruent with a cognitive case conceptualisation (Sanders & Wills, 2005).

After having conducted these first tentative steps towards an integrative psychotherapeutic practice as a counselling psychologist, I'm optimistic about the possibilities of developing a fruitful personal integrative practice but I am also aware of the intricacies and complexities involved in such an endeavour. A quick overview of the psychotherapy integration debate will help put these difficulties into context.

¹As Moursund & Erskine (2004) stated emphatically, concepts from the experiential approaches emphasizing here-and-now awareness, the therapeutic relationship, and exploration of feelings can blend quite well into cognitive behavioural therapy as ultimately all action-oriented therapies depend on a good rapport between client and therapist

In the study of issues of convergence and complementarity between different therapeutic approaches, the difference between integration and eclecticism has been a primary theme. Norcross and Grencavage (1989) provide a helpful synthesis of these differences when describing eclecticism as being primarily technical, atheoretical and a selection and use of parts that already exist in the same form and integration as being primarily theoretical and consisting in the blending different parts into a unified whole. Although this definition paints a picture of eclecticism and integration as two opposing poles, in reality most integrative and eclectic attempts to reconcile different schools of therapy can be placed on a continuum between these two points.

Both approaches have attracted their fair share of criticism. Some theorists are of the opinion that integration between various schools of therapy is not possible because of epistemological differences (Goldfried & Castonguay, 1992; Franks, 1984), while Lazarus and Beutler (1993) have argued that due to the complexity inherent in the integration endeavour such views may actually retard progress in psychotherapy and lead to unproductive future directions. On the other hand, eclecticism has often been criticised as a non-systematic and arbitrary blend of two or more schools of psychotherapy (Arkowitz, 1992; Lazarus, Beutler & Norcross, 1992).

Currently the pathways to combining therapeutic models identified by literature are technical integration, theoretical integration/eclecticism, common elements approach and assimilative integration (Stricker, 2010). Theoretical integration aspires to synthesize various models on the theoretical level, in search of a superordinate theoretical integrative framework, whilst technical eclecticism attempts to combine effective interventions from different models in a systematic though not theory-based manner (Lampropoulos, Spengler, Dixon & Nicholas, 2002). The common factor approach strives to identify and build on the common components effective therapies share, while assimilative integration can be viewed as a combination of technical eclecticism and theoretical integration (Lampropoulos et al.,2002). These definitions

indicate that each pathway is to varying extents either theory or technique driven and as such carries some of the dangers mentioned above.

Choosing which pathway to follow is not a simple task, but while this is an issue I am still grappling with, I do see myself tending more towards an integration of approaches that is firstly theoretical and then technical. This choice is based on my belief that psychotherapy should wary of distancing itself from psychological theory but that rather, in a cyclical manner, the available psychological understanding of the human person should form the foundations of the former and psychotherapy and its results should in turn influence and shape this understanding. I am of the opinion that a movement in psychotherapy integration that is primarily technique driven can create gaps between psychological theory and psychotherapeutic practice that would be detrimental to both.

While I find myself veering towards the route of theoretical integration, I believe that my final destination is unique, as ultimately every practitioner arrives at his own personal integration based on his personal philosophy, values, experiences, personality and probably countless other variables. This journey requires constant reflection about therapeutic work, appropriate use of supervision, reading, research and constant reference to the available evidence, in other words the ability to operate effectively as both a scientist-practitioner and reflective-practitioner. In this respect, evidence must be defined broadly and searched for in various arenas such as standard research, personal experience and client feedback. It is also important to critically appraise how appropriate the systems of evaluation are for the range of therapeutic models being investigated. This conceptualisation of research based on an integration of scientist-practitioner and reflective-practitioner models must balance the nomothetic and idiographic approaches to knowledge to make best use of the wide variety of information that is at our disposal and amenable to systematic analysis. This process of integration can be considered a lifelong endeavour as it requires a continual open-minded attitude towards new developments in theory and practice as well as continuous testing of one's orientation to practice against each therapeutic encounter.

At this stage, CBT, due to reasons mentioned above, will continue playing an important part in my future direction as a counselling psychologist as it will continue

to be my psychotherapeutic starting base and foundation for the foreseeable future. In considering areas for future development, whilst I plan to continue striving to incorporate the use of experientially-driven techniques and psychodynamic concepts effectively in CBT where necessary, I also intend to further my working knowledge of growth-orientated therapies such as Gestalt and existential approaches and investigate potential for integrating their use into my practice. This particular choice is motivated by the tie between these orientations and my view of human nature, as capable of self-determination and having an innate drive for self-fulfilment, and therefore also to my associated philosophy of change. I am also intrigued by the potential incorporation of the systems perspective strength of taking into account the contextual role of family, social and cultural factors (Corey, 2005).

More important though than the actual therapeutic modality avenues I wish to pursue are the guidelines determining this. One definitely important guideline are my philosophical preferences and values, and by philosophical preference I specifically mean the personal views of human nature, philosophy of change and philosophy of science I have presented in this essay. I firmly believe that the development of a personal style of practice would be inhibited by a lack of appreciation to the philosophical underpinnings of the models employed, as we act from a context of beliefs and philosophical presuppositions even if we are unaware of or fail to acknowledge them. These beliefs and presuppositions have implications on how we think about the therapist's role, human interaction, the conceptualisation of mental health and so forth and therefore ultimately on how comfortable our practice sits within our persona.

My positive view of human nature, growth-oriented theory of change, critical realist epistemological position and humanistic values are hence going to be the framework guiding the development of my psychotherapeutic practice. Therefore there is no better way to conclude this essay than for me to assert that the compass for the development of my psychotherapy practice ultimately is going to be my identity as a counselling psychologist.

Words: 3,300 (Excluding references and title)

References

- Arkowitz, H. (1992). Integrative theories of therapy. In D. K. Freedheim (Ed.), *History of psychotherapy: A century of change*. Washington, DC: American Psychological Association.
- Corey, G. (2005). *Theory and practice of counseling and psychotherapy*. US: Thomson.
- Franks, C. M. (1984). On conceptual and technical integrity in psychoanalysis and behaviour therapy: Two fundamentally incompatible systems. In H. Arkowitz & S. B. Messer (Eds.), *Psychoanalytic therapy and behaviour change: Is integration possible?* NY: Plenum.
- Goldfried, M. R., & Castonguay, L. G. (1992). The future of psychotherapy integration. *Psychotherapy*, 28, 4-10.
- Lampropoulos, G. K., Spengler, P. M., David N. Dixon, D. N., & Nicholas, D. R. (2002). How psychotherapy integration can complement the scientist-practitioner mode. *Journal of Clinical Psychology*, 58(10), 1227-1240.
- Lazarus, A. A., & Beutler, L. E. (1993). On technical eclecticism. *Journal of Counseling and Development*, 71, 381-386.
- Lazarus, A. A., Beutler, L. E., & Norcross, J. C. (1992). The future of technical eclecticism. *Psychotherapy*, 29, 11-20.
- Leahy, R. (2003). *Overcoming resistance in cognitive therapy*. UK: Guilford.
- Leichsenring, F., Hiller, W., Weissberg, M., & Leibing, E. (2006). Cognitive-behavioral therapy and psychodynamic psychotherapy: Techniques, efficacy and indications. *American Journal of Psychotherapy*, 60(3), 233-259.

- May, R., & Yalom, I. (2000). Existential psychotherapy. In R. J. Corsini & D. Wedding (Eds.), *Current psychotherapies*. IL: F. E. Peacock.
- Moursund, J. P., & Erskine, R. G. (2004). *Integrative psychotherapy: The art and science of relationship*. CA: Brooks-Cole/Wadsworth.
- Norcross, J. C., & Grencavage, L. M. (1989). Eclecticism and integration in counselling and psychotherapy: Major themes and obstacles. *British Journal of Guidance and Counselling*, 17(3), 227-247.
- Patterson, C. H. & Watkins, C. E. (1996). *Theories of psychotherapy*. UK: Allyn & Bacon.
- Sanders, D., & Willis, F. (2005). *Cognitive therapy: An introduction*. London: Sage
- Stricker, G. (2010). A second look at psychotherapy integration. *Journal of Psychotherapy Integration*, 20(4), 397–405

Section C

Theoretical Essay

Introduction

In this essay I aim to present a comparative analysis of interventions in cognitive-behavioural and psychodynamic therapeutic work with dyads, informed by a content-process perspective. Having unfortunately not had the opportunity to engage in couple work, I am tackling this essay unable to refer directly to my personal experience, but will attempt to draw from my general therapeutic experiences and the counselling psychology (CoP) perspective to enrich this analysis.

Content and Process

The distinction between process and content has a long history in psychology and there are various differing definitions of this dualism (Prawat, 1999). Content has been defined as the object of change identified and defined at the theoretical level (Duncan, Solovey & Rusk, 1992). This provides the conceptual framework enabling the therapist to arrive at a psychological case understanding and thus informs the shared understanding between therapist and client of the presentation.

Process has been defined as pertaining to the “nature of the relationship between interacting individuals—members and therapist” (Yalom & Leszcz, 2005,p.143). This term also refers to client-therapist dynamics and that located in therapy’s here-and-now. These definitions indicate that in many cases delineating clearly between content and process interventions is problematic and most interventions can be best understood in terms of their extent of focus on content and process. Based on these premises, content-focused interventions can be understood as those that aid to clarify issues, gather information and define the problem (Patterson, Williams & Edwards, 2009) and process interventions refer to techniques that utilise the therapeutic encounter to facilitate the uncovering of underlying themes or patterns of interaction.

Cognitive-Behavioural Couple Therapy-(CBCT)

Akin to CBT, CBCT's content is based on the constructs of cognitions, behaviours and emotions (Epstein & Baucom, 2002). A CBCT therapist will talk about maladaptive assumptions, cognitive distortions and schemas but might also more specifically allude to relationship-specific cognitions such as standards.

In CBCT, behaviours are framed within an appraisal of positive and negative effects in terms of their functional consequences on the relationship. Behavioural work is based on the premise that distressed couples engage in less positive and more negative behaviours such as dysfunctional communication patterns like blaming (Weiss & Heyman, 1997). There is also a focus on the behavioural exchanges between couples, especially dysfunctional interactions such as demand-withdrawal (Epstein & Baucom, 2002).

Emotions and cognitions are seen as integrally related in CBCT (Epstein & Baucom, 2002) and consideration is given to the effect of emotions on behaviour, cognitions and memory, with a negative mood tending to promote a more analytic and elaborate cognitive processing (Bless, Hamilton & Mackie, 1992) and a tendency to recall negative events (Beach & Fincham, 1994).

Interventions employed in CBCT can also be understood as pertaining to the cognitive, behavioural and affective spheres. Cognitive interventions in CBCT can be divided into techniques for identifying cognitions, e.g. Socratic questioning and DTRs, and modifying cognitions, e.g. logical analysis. In this modality, attention is given to the manner in which partners' cognitions about one other were shaped by past relationships. Psycho-educational interventions are also commonly used in CBCT based on the notion that cognitive change can be facilitated by exposing the couple to educational material concerning intimate relationships (Baucom & Epstein, 1990). A variety of behavioural strategies are employed in CBCT; interventions like communication and assertiveness training aim to target problematic skill deficits in the relationship, experiments such as quid-pro-quo and role-reversal exercises are utilised with the aim of providing the couple with new information in a form of

guided discovery or to test the validity or utility of a new cognition. Affective interventions are also employed to increase the awareness and expression of emotions.

Psychodynamic Couple Therapy-(PCT)

PCT focuses primarily on unconscious factors and the process of re-enactment of past experiences in present relationships in understanding current difficulties (Polonsky & Nadelson, 2003). The primary goal in PCT is the restructuring and reconstruction of partners' internal perceptions, expectations of and reactions to each other (Schwoeri & Pirooz-Sholevar, 2003), thus enabling them to develop a more differentiated and internally integrated self and to experience their partner as a safe and real person.

In line with basic psychoanalytic concepts, PCT is based on the premise that the roots of the couple's current difficulties are found in unresolved conflicts with their families of origin which were then translated into unconscious intrapsychic concerns. Dicks (1964) proposed that parental transference ties distort the couple's present perceptions and expectations and interfere with their communication. The notion of reciprocity (a complimentary fit between couples) is common in psychoanalytic therapy (Framo,1982) while Dicks (1964) proposed that couples are drawn to relationships wherein their unconscious needs to re-create certain aspects of early experiences are fulfilled. Concepts such as repetition compulsion, mutual projection, collusion, and projective identification help the PCT therapist understand the bridge between these unresolved intrapsychic concerns and current problematic interactions (Polonsky & Nadelson, 2003). Attachment is another psychodynamic concept use fruitfully in couple therapy, with literature strongly claiming that this construct augments the ways we understand couple relationships (Clulow, 2000; Fonagy et al., 2003). Theoretically the individual's attachment exerts a strong influence on many interpersonal factors including partner choice.

In PCT, sessions are dedicated to elucidating individual conflicts with families of origin, uncovering intrapsychic conflict and then integrating what is learned in order to promote disengagement from the unconsciously driven patterns that deplete couple relationship. Within this approach psycho-education, transference interpretations, re-

phrasing and confrontation are utilised in order to achieve the therapeutic goals. Psychoeducation about the aforementioned concepts is utilised to provide clients with a framework for understanding how their intrapsychic conflicts are played out in the relationship (Polonsky & Nadelson, 2003). Based on the notion that transference between the dyad and therapeutic transference are manifested in the sessions and that both can be used as an effective therapeutic tool (Sonne, 1981); transference interpretations are employed to help point out the distortions, collusions, and projections operating in the relationship.

Analysis

This analysis departs from the premise that the choice of interventions in a therapeutic approach is based on the theoretical underpinnings and the model of change postulated by that modality (Goldfried, 1980).

CBCT and PCT models both have a strong theoretical base about psychological functioning and distress. Therefore one can claim that both have a solid content component and aim to provide therapist with a detailed map for intervention and the couple with a clear shared understanding of their difficulties. When comparing the specific content to be changed, number of differences and similarities become apparent.

As in most couple therapy orientations, CBCT and PCT are similar in their use of relational conceptualisation; the translation of psychological difficulties into relational terms (Sprenkle & Blow, 2004). These modalities differ in their view of factors underlying present difficulties, with CBCT emphasizing cognitions and behaviours and PCT, intrapsychic conflict, but both view these casual factors as having histories learned largely in past relationships and therefore both aim to address the effects of past experiences. Based on psychodynamic theory that postulates that early formative experiences become entrenched in the unconscious and are a powerful influence on the psyche (Huprich & Keaschuk, 2006), PCT looks at deeper layers of the distant past in uncovering the roots of present relationship difficulties. CBCT being based on social-cognitive and social-exchange views of human behaviour posits that person,

environment, and behavioural factors engage in a constant, mutual, causal interplay. As such, CBCT gives a prominence to environmental influences and behavioural factors not found in PCT.

As these two approaches identify and define therapy's object of change in a differing manner, content-focused interventions in CBCT and PCT have diverse targets and are based on different methods. In CBCT, the therapist seeks to elicit information that is to a certain extent cognitively loaded, while a PCT therapist searches for information about individual and couple dynamics from a present-day and developmental perspective. Based on a philosophy of collaborative empiricism, the CBCT therapist uses techniques and tasks for identifying cognitions such as DTRs, both within and outside of therapy, and works towards a shared understanding of the problem in a rational and experimental manner. By contrast, a PCT therapist would work towards clarifying and promoting understanding of couple difficulties in a less instructive and overt fashion, still using a certain level of psychoeducation but less formal exploratory techniques.

A useful way of comparing and contrasting the interventions in PCT and CBCT is by referring to the processes of change these tap into. Based on the models recently refined by Prochaska and Prochaska (2010); consciousness raising, catharsis, contingency control and conditional stimuli are processes of change used in the leading therapeutic modalities that can be identified as present in PCT and CBCT.

CBCT and PCT both rely to a significant extent on consciousness raising, i.e. increasing the knowledge available to clients so that they are more able to engage in more effective responses to their environment. Both modalities offer rationales and explanations that provide the clients with a new understanding of themselves, their interactions and their couple life, but they do so through generally dissimilar routes. This process of change can be embodied in interventions that are psychoeducational in nature or in feedback about client's actions and experiences (Prochaska & Di Clemente, 1982). CBCT relies more heavily on the former set of interventions thus attempting to raise consciousness through a more content-based route, while PCT utilises to a greater extent the latter set of interventions, frequently in an in vivo

manner as exemplified by transference interpretations, thus following a more process-focused route.

The process of catharsis represents part of the integral core of psychodynamic tradition (Prochaska & Di Clemente, 1982), is a strong component of PCT and is enabled through a series of process-focused interventions such as clarification and confrontation to give emotional meaning to previously inaccessible early experiences (Scharff & de Varela, 2005). On the other hand, while enabling corrective emotional experiences is probably not a strong point of traditional CBT, the affective interventions in contemporary CBCT also try to achieve this aim through content-based interventions such as relating emotions to cognitions and behaviours or interventions that are more process-focused such as reflections of implied feelings between the couple. Conditional stimuli and contingency control are the processes of change that are the major focus of the behavioural interventions in CBCT. Although PCT taps on these processes of change to a much lesser degree, its focus on targeting the couple's perceptions of one another's behaviour, promotes a reevaluation of contingencies on an experiential level.

There are other differences between CBCT and PCT that are worthy of note. The former predicated more session structure and this thrust is apparent in the practices of agenda and goal setting. In general terms, CBCT therapist would be more prone to adopt a directive approach, guide in-session interaction and summarise key issues raised. This approach relates directly to the therapeutic stance favoured by this modality, which is characterised by active exploration, structuring and directivity aimed at fostering a collaborative relationship (Baucom et al., 1998). Contrastingly, the PCT therapist's basic posture is one of acceptance and neutrality, aimed at allowing the emergence of unacceptable aspects of the inner perceptions of both partners (Pirooz-Sholevar, 2003). CBCT's more structured and didactic therapeutic stance is exemplified in interventions that make use of homework tasks and the use of standardised inventories as assessment tools.

In summary, CBCT interventions attempt to enable change mainly through consciousness raising, modifying conditional stimuli and contingency control through a focus that is more content-laden due to this modality's social-cognitive and social-

exchange theoretical views and its highly positivist philosophical underpinnings. Both content and process interventions in this modality would be underlined by a directive and didactic approach with a collaborative ethos inherent in every therapeutic interaction. Conversely, based on the prominent casual role given to unconscious factors and the notion that an experiential focus can help clients connect with these factors, PCT interventions promote consciousness raising and catharsis in couples through a more process-laden route.

In line with CoP's open-minded approach towards theoretical models, this essay would like to propose that the aforementioned disparate approach towards therapeutic intervention gives these modalities a number of strengths and limitations, making them more appropriate for certain scenarios and couple needs and preferences.

It seems intuitive to suggest that the differing therapeutic stances in CBCT and PCT outlined above will have a direct effect on the quality of therapeutic alliance, the factor recognized as a significant key to change in various psychotherapy modalities (Sprenkle et al., 1999) and given primary importance in CoP. Patalano (1997) defines a good therapeutic alliance as one in which both partners work committedly with their therapist, collaborating actively in the treatment process, experiencing it as an important vehicle to resolving their problems. Based on this definition, it becomes apparent the impact of CBCT's and PCT's previously outlined intervention focus and therapeutic stance on the therapeutic alliance depends on the compatibility of these factors with a range of couple member's needs and characteristics.

As outlined, CBCT can be considered as an approach that is cognitively loaded and has a strong rational focus. This might therefore make it less suitable for couples who are not inclined towards these reasoning styles, and especially problematic if there is a significant contrast in thinking styles between the pair. CBCT being to certain degree directive and task-oriented might put across a certain demand on couples to adhere and succeed at the tasks given, possibly putting more pressure that is therapeutically beneficial on a couple member who is low in motivation. On the other hand PCT requires a certain level of intellectual ability and abstract thinking skills that might also not make it the theory of choice for certain combinations of couple psychological characteristics.

Given these models' differing content-driven emphasis and ways through which their interventions attempt to enable change, one might hypothesize that certain problems with an environmental influence and/or strong behavioural component such as difficulty adjusting to changes in couple's lifestyle might be dealt with more comprehensively in CBCT, while certain difficulties with a strong developmental and/or trauma component like attachment or emotional security issues might be more amenable to PCT work.

Case Examples

I have chosen 2 clinical examples found in literature to further illustrate the nature of CBCT and PCT and some of the themes uncovered previously:

Mike and Denise were contemplating marriage but were concerned about their lack of closeness and patterns of retreating. Denise's parents had a difficult marriage, divorcing when she was 12. Her mother died when she was 18. In her intimate she was terrified of abandonment constantly needing reassurance. Mike experienced this as controlling and intrusive. His father died when he was 7, and was expected to take responsibility for his mother and younger sister. At age 21, he was engaged to a young woman who developed ovarian cancer and died within 6 months. This stirred up powerful feelings of vulnerability to loss and the belief that to be involved with someone held great danger. When he withdrew from Denise and she expressed her feelings of abandonment, he experienced her feelings as a demand to take care of her as he had done with his mother, sister and girlfriend (Schwoeri & Pirooz-Sholevar, 2003).

From a PCT perspective the couple's interaction would be understood as being fuelled by their unconscious needs to re-create certain aspects of early experiences. Through the processes of reciprocity and collusion each partner seems to exert out of the other the response that corresponds to their internalised interaction model. PCT would focus on Mike and Denise's experiences of loss and how these are distorting their perception of each other through the use of transference interventions, interpretations

and confrontation to enable Denise to understand that Mike experiences her demands as burdening and Mike to perceive Denise's vulnerability in terms of her losses.

The case's strong developmental component and the primary need in each partner for emotional expression and acceptance indicate that PCT's process-focused interventions could be beneficial for this couple, especially as their current interactions strongly point towards the casual factors behind their present difficulties. In contrast CBCT's focus on cognitions and behaviours might miss how each partner activates and at the same becomes a recipient of his/her partner's psychological needs.

In many respects, José and Indira are typical of couples who met each other at a relatively young age and remain together for decades. They were very excited about each other and had a free and easy relationship until their lives became more complex. The idea of working on their relationship never occurred to them. There was some remote pressure from Indira's family and some culturally-based expectations, although these were mediated by educational and geographic factors. Mostly, they are a typical middle-class, middle-aged, dual-career couple with predictable stressors (Patteron, 2005)

There are a number of aspects that seemingly indicate the couple's appropriateness for CBCT. Their case seems to call for attention basic relationship skills like communication and a number of couple dysfunctional assumptions about themselves and the relationship that might have developed as their life schedule tightened. Given the nature of the problem there is a high probability that cognitive interventions focused on challenging their attributions and developing a more positive view of each other and content-based behavioural interventions focused on time-management and a more balanced allocation of household/family tasks and leisure would have immediate beneficial effects. Conversely, given an absence of any particular developmental issues, PCT's focus on elucidating past conflicts and uncovering the deeper psychological meanings of present couple interaction might not target directly the processes of change these clients need to access. The use of PCT might also overlook a focus on ecological factors that might be impinging on relationship.

Conclusion

This review tried to outline possible major areas of similarity and difference between PCT and CBCT and the consequent implications for therapeutic practice. As a trainee counselling psychologist aspiring to include couple work in my professional practice, I feel that final consideration must be given to how the issues raised can be understood from a CoP lens.

In line with its post-modern pluralistic mentality, CoP strives to encourage an open-minded theoretical stance (Woolfe, Dryden & Strawbridge, 2003) shifting focus from theoretical differences to common factors and complementary aspects of varying psychotherapeutic models. Developments in couple therapy have followed this vein with a number of integrative approaches being utilised (Schwoeri & Pirooz-Sholevar, 2003) such as Integrative-Behavioural Couples Therapy, which adds psychodynamic elements such as the promotion of acceptance to traditional behavioural interventions (Jacobson, Christensen, Prince, Cordova, & Eldridge, 2000).

Interestingly meta-analytic research on the effects of couple therapy does not indicate any significant differences between PCT and CBCT in terms of effectiveness (Shadish & Baldwin, 2003; Baucom, Epstein, & Stanton, 2006). These results direct our interest to the possible role couple therapy common factors might play in effecting therapeutic change. These factors have been identified as conceptualizing difficulties in relational terms and disrupting dysfunctional relational patterns, as mentioned in the essay's analysis, and expanding the therapeutic alliance from a therapist-singular client model (Sprenkle, Davis & Lebow, 2009).

This mentality and current evidence-base renders the counselling psychologist wary of unnecessary dualism between approaches and types of interventions and promotes a deeper level analysis of the relative strengths and limitations of each approach and intervention. One must also mention this discipline's humanistic philosophical underpinnings promote a therapeutic ethos based on humanistic values (Woolfe, Dryden & Strawbridge, 2003), give primary importance to the therapeutic relationship as a process of change in itself and highlight the use of the therapeutic encounter as a precious tool across all modalities. I therefore firmly believe that this rich CoP

standpoint can guide an effective use of both CBT and psychodynamic concepts and interventions in my future couple work.

Word Count: 3, 298

References

- Baucom, D. H., Shoham, V., Mueser, K. T., Daiuto, A. D., & Stickle, T. R. (1998). *Empirically supported couple and family interventions for marital distress and adult mental health problems*. *Journal of Consulting and Clinical Psychology*, 66, 53–88.
- Baucom, D. H., & Epstein, N. (1990). *Cognitive-behavioural marital therapy*. NY: Brunner/Mazel.
- Baucom, D. H., Epstein, N., & Stanton, S. (2006). The treatment of relationship distress: Theoretical perspectives and empirical findings. In A. Vangelisti & D. Perlman (Eds.), *The Cambridge handbook of personal relationships* (pp. 745–765). Cambridge: Cambridge University Press.
- Beach, S. R. H., & Fincham, F. D. (1994). Towards an integrated model of negative affectivity in marriage. In S. M. Johnson & L. S. Greenberg (Eds.), *The heart of the matter: Perspectives on emotion in marital therapy* (pp. 227-255). NY: Brunner/Mazel.
- Bless, H., Hamilton, D. L., & Mackie, D. M., (1992). Mood effects on the organisation of person information. *European Journal of Social Psychology*, 22, 497-509.
- Clulow, C. (2000). *Adult attachment and couple psychotherapy*. London: Brunner-Routledge.
- Dicks, H. (1964). *Concepts of marital diagnosis of therapy as developed at the Tavistock Family Psychiatric Clinic, London, England, in Marriage Counseling in Medical Practice*. US: University of North Carolina Press.
- Duncan, B. L., Solovey, G., Rusk, G. S. (1992). *Changing the rules: A client-directed approach to therapy*. New York: Guilford Pres

- Epstein, N., & Baucom, D. H. (2002). *Enhanced cognitive-behavioral therapy for couples: A contextual approach*. US: American Psychological Association.
- Fonagy, P., Gergely, G., Jurist, E., & Target, M. (2003). *Affect regulation, metallization and the development of the self*. NY: Other Press.
- Framo, J. (1982). *Explorations in marital and family therapy*. NY: Springer.
- Goldfried, M. R. (1980). Toward the delineation of therapeutic change principles. *American Psychologist, 35*, 991-999.
- Huprich, S. K., & Keaschuk, R. (2006). Psychodynamic Psychotherapy. In F. Andrasik (Ed.), *Comprehensive Handbook of Personality and Psychopathology: Volume II: Adult Psychopathology* (pp 469-486). NY: John Wiley & Sons.
- Jacobson, N. S., Christensen, A., Prince, S. E., Cordova, J., & Eldridge, K. (2000). Integrative behavioral couple therapy: An acceptance- based, promising new treatment for couple discord. *Journal of Consulting and Clinical Psychology, 68*, 351-355.
- Patalano, F. (1997). Developing the working alliance in marital therapy: A psychodynamic perspective. *Contemporary Family Therapy, 19*(4), 497-505.
- Patterson, W. (2005). Cognitive behavioural couple therapy. In M. Harway (Ed.), *Handbook of couples therapy* (pp. 141-157). US: John-Wiley and Sons.
- Pirooz Sholevar, G. (2003). Couples therapy: An overview. In G. Pirooz Sholevar & L. Schwoeri (Eds.), *In Textbook of family and couples therapy: Clinical applications* (pp. 417-439).
- Polonsky, D. C., & Nadelson, C. C. (2003). Textbook of family and couples therapy: Clinical applications. In G. Pirooz Sholevar & L. Schwoeri (Eds.), *In Textbook of family and couples therapy: Clinical applications*. US: American Psychiatric Publishing.

- Prawat, R. S. (1999). Social constructivism and the process-content distinction as viewed by Vygotsky and the pragmatists. *Mind, Culture and Activity*, 6(4), 255-273.
- Prochaska, J. O., & DiClemente, C. C. (1982). Transtheoretical therapy: Toward a more integrative model of change. *Psychotherapy: Theory, Research and Practice*, 19(3), 276-288.
- Prochaska, J. O., & Prochaska, J. M. (2010). Self-directed change: A transtheoretical model. In J. E. Maddux & J. P. Tangney (Eds.), *Social psychological foundations of clinical psychology* (pp. 431-440). US: Guilford Press.
- Scharff, D. E., & de Varela, Y. (2005) Object relations couple therapy. In M. Harway (Ed.), *Handbook of couples therapy* (pp. 141-157). US: John-Wiley and Sons.
- Schwoeri, L. D., & Pirooz Sholevar, G. (2003). *Textbook of family and couples therapy: Clinical applications*. US: American Psychiatric Publishing.
- Shadish, W. R., & Baldwin, S. A. (2003). Meta-analysis of MFT interventions. *Journal of Marital and Family Therapy*, 29, 547-570.
- Sonne J: Transference considerations in marriage and marital therapy. In G. P. Sholevar (Eds.). *Handbook of Marriage and Marital Therapy*. Edited by. New York, SP Medical & Scientific Books, 1981, pp 154-168
- Sprenkle, D. H., & Blow, A. J. (2004). Common factors and our sacred models. *Journal of Marital and Family Therapy*, 30(2), 113-129.
- Sprenkle, D. H., Davis, S. D., & Lebow, J. L. (2009). *Common factors in couple and family therapy: The overlooked foundation for effective practice*. US: Guilford Press.

Weiss, R. L., & Heyman, R. E. (1997). A clinical-research overview of couples in interactions. In W. K. Halfors & H. J. Markman (Eds.), *Clinical handbook of marriage and couples interventions* (pp. 39-41). UK: Wiley.

Woolfe, R., Dryden, W., & Strawbridge, S. (2003). *Handbook of counselling psychology*. London: Sage.

Yalom, I. D., & Leszcz, M. (2005). *The theory and practice of group psychotherapy*. US: Basic Books.

Section D

Process Report

Introduction

Overview

This essay refers to psychotherapeutic work within a forensic setting; the Crisis Counselling Service in a Category-B male prison. This service's remit is to provide therapy to psychologically vulnerable prisoners and forms part of the wider-scope Safer Prisoners Team that aims to ensure a safe custodial environment for all the prison's residents. This essay will aim to outline how a trainee counselling psychologist can provide an effective contribution to therapeutic work within a forensic setting.

Neville (pseudonym) was referred by the prison's Primary Care Mental Health (PCMH) team two weeks after being transferred and his screening indicated that he'd like to manage his low mood and anxiety. Upon commencing therapy with Neville, I had been working as a trainee counselling psychologist at this placement for 15-months and therefore had some experience of working within a forensic setting and liaising with prison services/agencies.

Client information

Neville is a 35-year old British male, a solicitor by profession and serving his first custodial sentence. He has been in the prison system for 5 years and was transferred to this establishment last November. Neville is single, has no children, both his parents are alive, and they and his only sibling have never been diagnosed with any mental health problems.

Neville has no history of drug use and does not have any medical conditions. He has been on psychotropic medication for the past 4 years, being prescribed antidepressant,

Mirtazapine, 4 years ago and Quetiapine (an atypical antipsychotic used as an augmenter for the maintenance treatment of depression) for 3 years. He claims to find these medications slightly helpful for symptom-alleviation.

Assessment

Initial interview

Prior to the assessment, contact was made with this establishment's Inreach and PCMH teams and the previous prison's PCMH team so as to obtain information about client's current psychiatric care and past therapeutic input that would enable a more targeted and comprehensive assessment.

Neville presented as visibly upset and agitated and displayed a strong willingness to engage in and make best use of therapy. Neville described how his psychological difficulties started after his initial arrest and incarceration 5 years ago. He struggled to deal with the perceived injustice of what had happened to him and its impact on his life. Thoughts about life being ruined and future being hopeless became a constant fixture in his mind and these were accompanied by persistent low mood, lack of appetite and difficulty sleeping. These depressive symptoms varied in severity, most pronounced in his initial year in prison and stabilising upon receipt of adequate mental health care.

His mother had a brain tumour a year ago with Neville blaming himself for her health troubles based on the potential link between cancer and stress. This illness triggered an intense fear that he would lose his parents, one of the few positive things left in Neville's life. Worrying as a means of controlling his environment ensued with constant checking (calling his parents on average 5 times daily) becoming a frequently utilised compensatory strategy. Assessment indicated further compensatory strategies e.g. social withdrawal based on cognitions: "If I interact with people, they will perceive my weakness". Neville also engaged in regular self-harm as a means of managing his emotions through reducing distress with the most recent episode occurring 9 months ago.

Due to the manner in which he was escorted to prison, Neville experienced his arrest as a traumatic event in itself and started subsequently exhibiting post-trauma symptoms such as flashbacks and nightmares, which have decreased in frequency over the following years with Neville currently reporting experiencing these symptoms once every two weeks. Any situation similar to or reminder of his arrest triggers panic reactions in Neville and he currently experiences panic attacks irregularly in response to stimuli such as being escorted to court or reading articles about a similar subject.

Assessment also highlighted various psychological services Neville had accessed at previous establishments, including 18 sessions from a movement psychotherapist aiming at facilitating emotional expression through objects and 20 CBT sessions by a PCMH nurse focusing on panic management and self-harm reduction. Neville found both helpful in providing emphatic support and a space to share his worries and negative emotions. He viewed CBT as useful in motivating him to think about his problems and disengage from self-harm but brought no discernable mood change. The prison's psychiatric team offered a diagnosis of severe depression and PTSD, strongly influencing Neville's understanding of his psychological problems.

An analysis of client's childhood highlighted positive family relationships but experiences of his father being absent because of a demanding career and of difficulties making friends due to a constant underlying shyness, resulting in persistent feelings of loneliness. Goals for therapy set collaboratively and in sequence were: mood-management, reducing panic reactions and learning how to prevent panic attacks and dealing more effectively with trauma symptoms. Risk assessment indicated a low level of risk with infrequent thoughts of life being pointless but no suicidal ideation.

Formulation

Assessment highlighted a variety of inter-related difficulties that can be helpfully understood through the Depression and PTSD frameworks, with the former being given primary focus due to the higher impact and prevalence of depressive symptoms

and Neville's therapeutic goals. Based on the clear link between the client's panic reactions and trauma-associated stimuli it was considered useful to conceptualise these psychological symptoms as part of Neville's post-traumatic presentation.

CBT was chosen with particular attention given to the cognitive models of depression (Beck, 1976) and PTSD (Ehlers & Clark, 2000). This decision was motivated by client's previous positive experience of the approach, its utility in linking a variety of presenting difficulties and research evidence indicating that CBT is effective in the treatment of depression (Fennell, 2004) and that trauma-focused CBT is a treatment of choice for PTSD (Ponioh & Hollon, 2009).

The regular absence of his father and difficulties making friends and resultant loneliness feeling can be conceptualised as predisposing factors and Neville's arrest and imprisonment as the critical incident that activated Neville's core beliefs(CBs) about the self as weak and others as uncaring (Appendix-1). The sudden loss of freedom, career and future dreams and the need to adapt to a demanding environment could also be understood as leading to a cognitive shift with the world now regarded as unsafe and the future hopeless. Other conditional assumptions that seemed to have formed as reaction to the client's environment include "If I stay away from others, I will avoid getting hurt" and these trigger and maintain the compensatory strategies of social withdrawal and checking behaviours. Protective factors highlighted by assessment that can aid client's recovery include high educational levels and close family relationships

The sudden nature of and the lack of control associated with the traumatic incident in conjunction with the sensory-focused cognitive processing of the event can lead to negative appraisals of the trauma and consequent life changes in terms of their meaning for the self and external world thus resulting in perceiving a high-level threat currently (Appendix-2).

The systemic paradigm was employed to augment case formulation as its shift of focus from the individual to social context (Woolfe, Dryden & Strawbridge, 2003) complements CBT's more pronounced emphasis on personal and interpersonal domains and promotes an analysis of the institutional setting's influence on the

psychological mechanisms implicated in the client's difficulties. The additional use of this paradigm was considered particularly useful given the client reporting his psychological difficulties as having been solely exhibited in a prison environment. Certain characteristics inherent in custodial settings like the hierarchal structure, harsh and rigid institutional routine (Haney, 2001), primacy of authority and the resultant forced dependence on the system for fulfilment of basic needs (e.g. showering) can be seen as reinforcing the client's perceptions of the self as weak as the world as unsafe. The uncaring nature of a prison setting may also be seen as reinforcing Neville's belief system. Thus the system Neville found himself a part of immediately after and as a result of the critical-traumatic incident maintains and reinforces the underlying causes postulated by this formulation. In this way Neville's difficulties can be systemically understood as an attempt to arrive at a sustainable person-environment fit (Delmonte, 1989). The prison environment in this case also offers a plethora of stimuli easily associable to the traumatic material due to unwanted exposure to aggressive incidents and obvious physical and visual similarities leading to a higher occurrence of intrusive and hyperarousal PTSD symptoms.

Therapeutic Plan

Client was provided with 10 sessions as afforded by placement constraints. Based on supervision discussion and consulting relevant literature (Zayfer & Black-Becker,2007), it was decided to first focus on mood-management and general psycho-education and after engaging in cognitive restructuring and behavioural activation then reevaluate whether in-depth CBT for PTSD would still be appropriate.

Intervention

Therapy Overview

Two sessions after assessment focussed on an analysis of previous CBT sessions, PTSD psycho-education, behavioural activation and a discussion of the prison institution's possible role in Neville's difficulties. Following sessions were dedicating

to formulation sharing, monitoring and managing the physical symptoms of anxiety, cognitive restructuring and continued behavioural work. The excerpt is taken from the 7th session. Prior to this extract the session focussed on an outline of cognitive processing during trauma and how traumatic memories are stored and cognitive restructuring.

On-going evaluation:

- Therapist 1** If you speak to them, and they see, then they see you as weak they'll take advantage of you?
- Client 1** Hmm, I think yeah it's possible.
- Therapist 2** Okay.
- Client 2** I think it's possible, cause I don't really know them that well so I don't know how they are going to react.
Okay, okay, okay so.. let's sort of try and summarise, ehm, and I know we haven't done a lot of of the for and the against. But I think, what.. what we can take from from the officers' example is that there are, okay, there are maybe are some officers that are going to make fun of of prisoners that they perceive as weak, other officers but are going to be more concerned and and helpful, okay. And what that shows us is that it very much depends depends depends on the person okay. So not all the persons, even in prison, are, you know, are going to be looking out for any sign of weakness so that they can take advantage of you. Okay? So what you need to start looking at is not applying the same measure for everyone, not saying, you know, everyone is bad because that make me feel feel safe
- Therapist 3**
- This interjection is intended to summarise cognitive restructuring work on the assumption "If I interact with people, I will get hurt". While the prior discussion had led to useful insights for Neville like realising that certain officer's intentions when communicating with him are benign, I abruptly offer my own conclusion about how the assumption can be rendered more adaptive instead of continuing on the guided discovery path. This didactic intervention does not foster the level of equal collaboration required for effective therapy and reflection has made me aware that planning a long agenda leads to me adopt a more directive approach during the session. Exploring this issue in more depth during supervision brought to light my desire to build on the client's initial progress and the implicit pressure of working with a complex case within a time-limited framework as factors I need to keep in perspective when planning sessions.*
- Client 3** Okay
Okay because that just makes the situation worse for you. Okay? And obviously what I am saying is not to go find the first ehm prisoner, that you don't even know, and start telling him about all your life. Cause that wouldn't that wouldn't make sense and that probably could ehm lead to ehm eh some negative consequences. Okay?
- Therapist 4**
- Client 4** Mhm
- Therapist 5** So, but it's about eh doing things eh in a more thought out way.
- Client 5** Yeah
- Therapist 6** Okay?
- Client 6** I will definitely ehm .. definitely think think about what you are saying and bear it in mind now
- Therapist 7** Mhm mhm so .. In a way it's it's about giving giving some kind of chance to people even if you give it to them slowly.

Client 7 Yeah when you're programmed in a certain way now, I just feel like I am programmed in a certain way it's difficult to move away from that. But

Client's comment represents a useful invitation to discuss the perceived adaptive value of the targeted assumption within the prison context as one the factors behind the durability and strength of this cognition. While the gradual nature of a cognitive shift and the role of behavioural experiments in pushing forward this change had been discussed previously, framing this assumption as a means of adapting to prison system would have provided Neville with a more holistic understanding of his current thinking thus rendering him more able to question the value of this way of thinking.

Therapist 8 Mhm

Client 8 Ff. What I'll do obviously I'll go away and I'll I'll I'll obviously give it a lot of thought

My didactic intervention beforehand seems to have led to a teacher-student stance being adopted at this point as indicated by C.6-8. Both reflection and supervision have made me aware that I sometimes tend to fall into this pitfall when a client is cooperative and actively looks to therapist for solutions. I am now striving to address this limitation by bearing in mind that, as emphasized by counselling psychology(CoP), fostering empowerment and responsibility are necessary therapeutic components and the paramount importance of ensuring the client is guided towards being the architect of his/her recovery.

Therapist 9 Okay it's something to think about

Client 9 Yeah definitely

Therapist 10 And

Client 10 I'll definitely think about it.

Therapist 11 And .. we will explore this assumption again in our next session

Client 11 Okay

Therapist 12 So it's good for now if you you continue thinking about it

Client 12 Yeah okay I definitely

Therapist 13 Is it okay if we move on?

Client 13 Yes.

Therapist 14 Because time is quite quite is running quite fast. Okay so. if we had to look at the last, last week we were going through the sort of activities. We said it's good to try and focus on activities that give you some achievement, closeness to others or enjoyment.

Client 14 Mh

Therapist 15 And we discussed a number like library, DVDs watching DVDs, reading your law book etc. Did you have time to note them down on the?

Client 15 I did and obviously

Therapist 16 The log

Client 16 I didn't do ehm all of them but I did a few.

Therapist 17 Okay

Note: Client puts completed log in the middle of the table for both of us to follow and we read off the log together

Client 17 So

Therapist 18 Just just as an example

Client 18 I I have examples.

Therapist 19 Okay.

Client 19 I at least have, read the paper everyday.

Therapist 20 Okay.

Client 20 Yeah so I done that one yeah.

Therapist 21 Okay.

Client 21 I telephoned solicitor

Therapist 22 Mhm
Client 22 I didn't see.. any benefit in that
Therapist 23 Mhm
Client 23 I think our last session was on Thursday wasn't it? I can't remember, or Wednesday of last week?
Therapist 24 Yess we met on Wednesday last week.
Client 24 Ehm so then obviously I tried the library.
Therapist 25 Mhmm
Client 25 So I went to library
Therapist 26 Okay
Client 26 On Friday.
Therapist 27 Okay and you enjoyed that?

Client 27 Yeah I was I was much more relaxed because eh that was when the day I told you I couldn't get through. I made some many calls
Therapist 28 Okay
Client 28 That when I finally got through
Therapist 29 Okay
Client 29 I felt a bit of relief so when I went to the library.
Therapist 30 So you were relaxed when you went to the library
Client 30 Yes more relaxed then normal because I was was so agitated that
Therapist 31 Okay
Client 31 I came back down.
Therapist 32 Okay
Client 32 Ehm and obviously I
Therapist 33 Telephoned your friend, which is the that the friend you phone once a week
Client 33 Yeah I phoned him
Therapist 34 Okay
Client 34 On Saturday normally I phone him on Sunday
Therapist 35 Okay
Client 35 Ehm I watched DVD in the weekends
Therapist 36 Okay
Client 36 Ehm and reading paper
Therapist 37 Okay
Client 37 Obviously. I had a visit on Monday.
Therapist 38 Okay, it went quite well.
Client 38 Closeness was 5 yeah.

This exchange offers an opportunity to pause the log review and attempt to capture a relatively positive experience of socialisation and extract resultant positive emotions. This could have served as a valuable means of eliciting more evidence against the previously analysed assumption. Reflection made me aware that I fell into a mechanical review of the client's activities, adopting a narrow-minded focus and not keeping the overall therapeutic scenario in perspective.

Therapist 39 Okay
Client 39 Ehm reading the paper.
Therapist 40 Paper
Client 40 I have been reading my law book as well.
Therapist 41 Okay
Client 41 That's it. I haven't got, I haven't put everything down.
Therapist 42 Okay
Client 42 Apart these examples.

Therapist 43 Okay would ehm, for example, re e reading the law book, is it something you'd enjoy more than reading the paper for example? What
Client 43 Yeah probably ehm
Therapist 44 Okay.
Client 44 Probably, I do more
Therapist 45 So if you had just hm, rate it now, reading the paper would give you a sense of achievement from

Client 45 The only thing I do notice, the only thing, that reading the law book normally ehm is more ehm more achievement
Therapist 46 Mhm
Client 46 And enjoyment
Therapist 47 Mhm
Client 47 Than reading the newspaper.
Therapist 48 Mhm
Client 48 But reading the, maybe I prefer sometimes reading the paper more than the law book
Therapist 49 Mhm
Client 49 Because when I read the law book my concentration goes very quickly.
Therapist 50 Mhm because it's something harder to take in.
Client 50 Yeah but with the newspaper I just flick through the articles
Therapist 51 Okay
Client 51 Or the main stories
Therapist 52 Okay
Client 52 I read a paragraph or one story and move to another story
Therapist 53 Mhm mhm
Client 53 Yeah ehm and it's quite easy to flick around
Therapist 54 Mhm mhm
Client 54 And you know and different sections of the paper
Therapist 55 Mhm
Client 55 But the law book
Therapist 56 Mhm
Client 56 Like I think in initially my concentration is very good.
Therapist 57 Mhm
Client 57 I think it's like a sliding scale very quickly
Therapist 58 Mhm mhm
Client 58 Before I know it I'm not even reading it

Therapist 59 Okay. It iss isn't a question of either or, so it's it's doing mm both activities in in in their own, in their own time, so it's when you know, you are more able to focus you'd read the law book
Client 59 Mh
Therapist 60 Even if it's for a shorter stretch of time and then when you just want to relax and take it easy you read the paper.
Client 60 I am doing all these things just to obviously to try and help me and to distract me
Therapist 61 Mhm mhm. Do you see them as as helping you to distract you?
Client 61 Yeah yeah definitely. I was thinking, from the first time I saw you and from now where I am now
Therapist 62 Mhm
Client 62 I think I have definitely
Therapist 63 Okay
Client 63 Ehm I wasn't doing, I wasn't doing anything near any any of this, so I think

Therapist 64 No you weren't, obviously you hadn't, you had stopped ordering the papers
Client 64 Yeah
Therapist 65 You weren't reading
Client 65 I've re, I've re-started the papers. I never went library I started going library
Therapist 66 Mhm
Client 66 Ehm, watching DVDs, reading law book, I've set
Therapist 67 Mhm
Client 67 I think, I think there is certainly progress.
Therapist 68 Mhm
Client 68 Don't you think?

Neville's comments (C61-68) seem to indicate his desire to emphasise his progress and have his effort validated by me. My attempt to reassure and praise Neville (T69,70) are confusing and reflecting puts the therapeutic value of giving credit to client's progress in the fore of my awareness. Having said that, the frequency of such comments coupled with the client's emphasis on making his engagement with therapy clear (C6,80) highlights the possible psychological significance of these utterances. Reflecting on the therapeutic relationship made me aware that my looking forward to these sessions was very much associated with Neville's tendency to regularly emphasize the benefit of an intervention, HMW or therapy. This manner of engaging seemed to possibly point to another behavioural strategy ultimately still linked to the belief that others are intrinsically uncaring but motivated by the assumption "If I please others, they might be helpful". Analysing Neville's contrasting interactions with custodial staff and mental health practitioners in the next session provided further proof for this assumption with the client agreeing that adding it to the formulation helped create a more comprehensive picture of his internal world.

Therapist 69 No, I I I think so all also and it's sort of it's it's in a number
Client 69 Yeah
Therapist 70 it's in a number of areas and the good thing is that these things build
Client 70 Yeah

Therapist 71 On each other you know, so you know the more you engage in behaviours the easier it becomes to engage in other behaviours and that makes your day easier, it's more easy to distract yourself you know. The more easy to distract yourself, you have less time to stay thinking you are less anxious you more able not to make that extra phonecall. You know and it all has a cumulative effect.

Client 71 Yeah..
Therapist 72 Okay so just ehm to to give me an idea, reading the book if you had to rate it in terms of achievement from 0-10.
Client 72 Ehm probably about 4 or 5.
Therapist 73 Okay that is 4.5.
Client 73 Ehm
Therapist 74 Closeness would be 0
Client 74 And that be 4 to 5 as well
Therapist 75 Okay okay ... Okay so what would be good also for the coming week is is to continue these
Client 75 Yeah
Therapist 76 You think you'd go to library again?
Client 76 Yeah yeah I'm going to try ehm, obviously I am a bit stressed out today but I'm gonna.. I might be in court tomorrow.
Therapist 77 Okay.
Client 77 I think I'm in court tomorrow, so then it's going to have to, so maybe
Therapist 78 Okay

Client 78 After that don't worry, after work best thing to do in the day I go library for a little while

Therapist 79 Okay okay

Client 79 I don't know what day

Therapist 80 Okay

Client 80 I will try and go obviously before our our next meeting

Therapist 81 Okay

Client 81 I'll try go at least, I will try and go once.

Therapist 82 Okay and as you sort of list them down

Client 82 Yeah

Therapist 83 We can have a look at them next week.

Client 83 Certainly will.

Therapist 84 Okay so let's speak a bit about your your court ehm ehh.. Last time you mentioned the possible release date 2nd of June is that correct?

Client 84 That's right yeah.

Therapist 85 Did you get any further information about that? Any further

Client 85 Ehm not really, ehm I got a go tomorrow. I think it's tomorrow, t the day after? Once you've been in in custody for over 6 months on one, they have to extend your time, so I went to court onn. Eh sorry I was in court yesterday, X.

Therapist 86 Mhm

Client 86 Yesterday, yes yesterday was Tuesday? No

Therapist 87 Yesterday was Tuesday yes.

Client 87 Yeah, X ehm .. And basically the judge he was like more information, so he so he said I am going to list it for Thursday. So he hasn't, so it should be tomorrow.

Therapist 88 Mhm

Client 88 And he has he has to decide whether to extend the time or not.

Therapist 89 Mhm

Client 89 I am sure he will extend the time.

Therapist 90 Mh okay

Client 90 Ehm so my other trial, so basically my this sentence finishes on the 2nd of June

Therapist 91 Okay

Client 91 But I've got a trial

Therapist 92 Okay

Client 92 I'm on on a trial on the 1st of August.

Therapist 93 Okay

Client 93 So I

Therapist 94 Okay

Client 94 Could get, I don't get ehm so I might be stuck in August.

Therapist 95 Okay and they they would keep you in in custody till you till the other trial?

Client 95 That is what I have got to speak to my solicitors about. I think so possibly

Therapist 96 Okay.

Client 96 It's it's not definite I got a find out.

Therapist 97 Okay you have to find find that out.

Client 97 So I'm going to speak to my solicitor tomorrow and ask him what's going on.

Therapist 98 Okay and in terms of the, the other trial how are things looking, do you have any idea of what you might be looking at or?

Client 98 Ehm.. It's not, it's not a serious, it's it could be another 6 months something like that.

Therapist 99 Okay.

Client 99 9 months, 12 months. I don't know something like that.

Therapist 100 Okay so. Whatever you are not looking probably being in jail for more than another year?

Client 100 No I don't think so.

Therapist 101 Possibly.

Client 101 Maximum sentence, it's contempt of court, maximum sentence is 2 years.
Therapist 102 Okay.
Client 102 So that is the maximum.
Therapist 103 Okay okay.
Client 103 So the maximum, that's the maximum.
Therapist 104 Okay
Client 104 I don't know, I haven't really given too much thought to this case as well.
Therapist 105 Okay.
Client 105 Ehm but I should do I suppose.
Therapist 106 Mhm.
Client 106 My solicitor is saying that it's..
Therapist 107 Mhm mhm.
Client 107 It's very very unlikely that you will be found guilty.
Therapist 108 Mhm
Client 108 Very very it's very very unlikely.
Therapist 109 Okay
Client 109 Very unlikely all times.

Therapist 110 So it's some kind of good news okay. What I am asking at I was, because obviously what's what's going to happen in terms of your release it ehh it has it impinges on how you look at your future..

Client 110 Yeah.
Therapist 111 As you said
Client 111 I don't really look at, I have never really thought about release.
Therapist 112 Mhm.
Client 112 Li like I told you last time.
Therapist 113 Mhm.

Client 113 I never really thought about release. I just work on a day-to-day basis, I don't think I have got anything positive to be honest or anything like that. So I just don't really, I just really blank it out of my brain really.

Comments (C111,113) offer a valuable window for exploring various issues. While I later take the route of highlighting the role of the CB postulated by the formulation "My future is hopeless" I could have made best use of this window by also using it as an opportunity to highlight the role of the prison system in Neville's present difficulties. Grounding the client's current cognitions and behaviours within the context and system he lives in, emphasising how certain prison characteristics maintain and reinforce maladaptive ways of understanding self, others and the world would possibly have provided Neville with the prompt required for him to evaluate to possible beneficial consequences of an environmental change. Additionally I could have outlined the sense of hopeless the prison system tends to breed thus offering Neville an emphatic response and an opportunity to view these cognitions in a new light.

Therapist 114 Mhm okay eh. Maybe t that, that will all that's something useful for us to look at

Endings

While this session indicated progress in both cognitive restructuring and behavioural activation it also revealed other areas that were possibly addressed inadequately. It highlighted the need to attend more to process and revealed an interactional pattern that was not taken into account by the case conceptualisation. This was extremely

beneficial for the future course of therapy as it highlighted the need for a refinement of the case formulation and more importantly for a discussion of the client's role with the goal of Neville feeling more empowered as an active collaborator in therapy. This was of great benefit as I felt that in later sessions Neville showed greater agency and the therapeutic alliance became a more powerful promoter of change.

Evaluation

Therapy with Neville offered encouraging signs of progress in terms of mood, hope for the future and ability to cope with his environment. Reflection on transcript, subsequent sessions and the outcomes achieved served to highlight valuable learning points.

Given the historical course of Neville's presentation, this case provided me with the opportunity to creatively apply knowledge acquired previously in this setting, about the possible impact of prison on clients' psychology, to this client's specific difficulties. Augmenting CBT with an emphasis on the systemic context, informed by prior knowledge of the setting, was beneficial to this therapeutic work in various ways. It helped Neville evaluate his thinking as being highly influenced by his current environment and his interpretations of it and thus facilitated the uncovering of the fallacies inherent in these beliefs and assumptions and the acquisition of more adaptive cognitions. This additional layer of conceptualisation also aided Neville's re-evaluation of his future outside prison.

While this approach is undeniably beneficial, as this session indicates, maintaining multiple frames of reference throughout the session is not an easy skill to accomplish. Transcript analysis shows that I operate using a CBT framework and miss valuable opportunities to outline the contextual side of Neville's difficulties and draw attention to the prison's role as a system. This highlights that while I might have progressed in learning how to adopt a multi-modal approach conceptually, I need to now focus my efforts on adopting a multi-theoretical mind-set in-session and not lapse into the mistake of limiting my understanding of in-session material to one modality's lens.

I also feel that liaising with other agencies benefitted the therapeutic process by facilitating a full discussion early in therapy about the input from previous services and their utility for the client, thus enabling me to take into account where Neville was at and evaluate how to best proceed from that point. The following examples will serve to expand on this point:

These aforementioned services were primarily based on a medical model, and their emphasis on diagnosis and disorder-specific treatment led to Neville perceiving himself as having two distinct problems which can be defined simply as PTSD and depression. While these constructs were useful for our work and were not discarded, I engaged Neville in a discussion of how these are best understood as frameworks that need to be evaluated in terms of their utility in helping him understand his problems and work towards achieving his goals. Neville was made aware that these two groupings of difficulties overlap and that while it would be useful to target them separately at different stages in therapy, some factors underlying both are inter-related and that therefore certain interventions could be targeting both.

While previous CBT treatment made use of certain useful behavioural and cognitive techniques which therapy expanded on, it was not formulation-based and it seemed that the links between problem conceptualisation, how to effect change and the rationale behind specific interventions was not clarified. In my work I aimed to offer Neville a coherent way of understanding his difficulties through formulation-sharing and always striving to link back what he presented and interventions used to this shared understanding. I feel that this made therapy as well as each intervention more meaningful for Neville and helped him feel more involved in the process.

This report also served as an opportunity to reflect on current strengths I can build as well as my learning needs. I felt the need to re-focus on key learning points of my initial training stages and always keep in mind the importance of foundation therapeutic skills even when dealing with complex cases within limited timeframes. I realised that this session would have benefitted from a more collaborative and less didactic approach with me adopting a slower pace, eliciting feedback more frequently and validating more fully Neville's contributions. Being reflexive about these needs was of paramount importance as although a generally positive therapeutic relationship

developed from the start with client displaying trust and confidence in me, I feel that after discussing the therapeutic alliance in the following session a sense of better teamwork become apparent.

On the other hand, I think my strengths in this case refer to the benefits mentioned beforehand of applying fruitfully to therapy my experience in prison and the reflexivity and the pluralistic way of thinking provided by my CoP training.

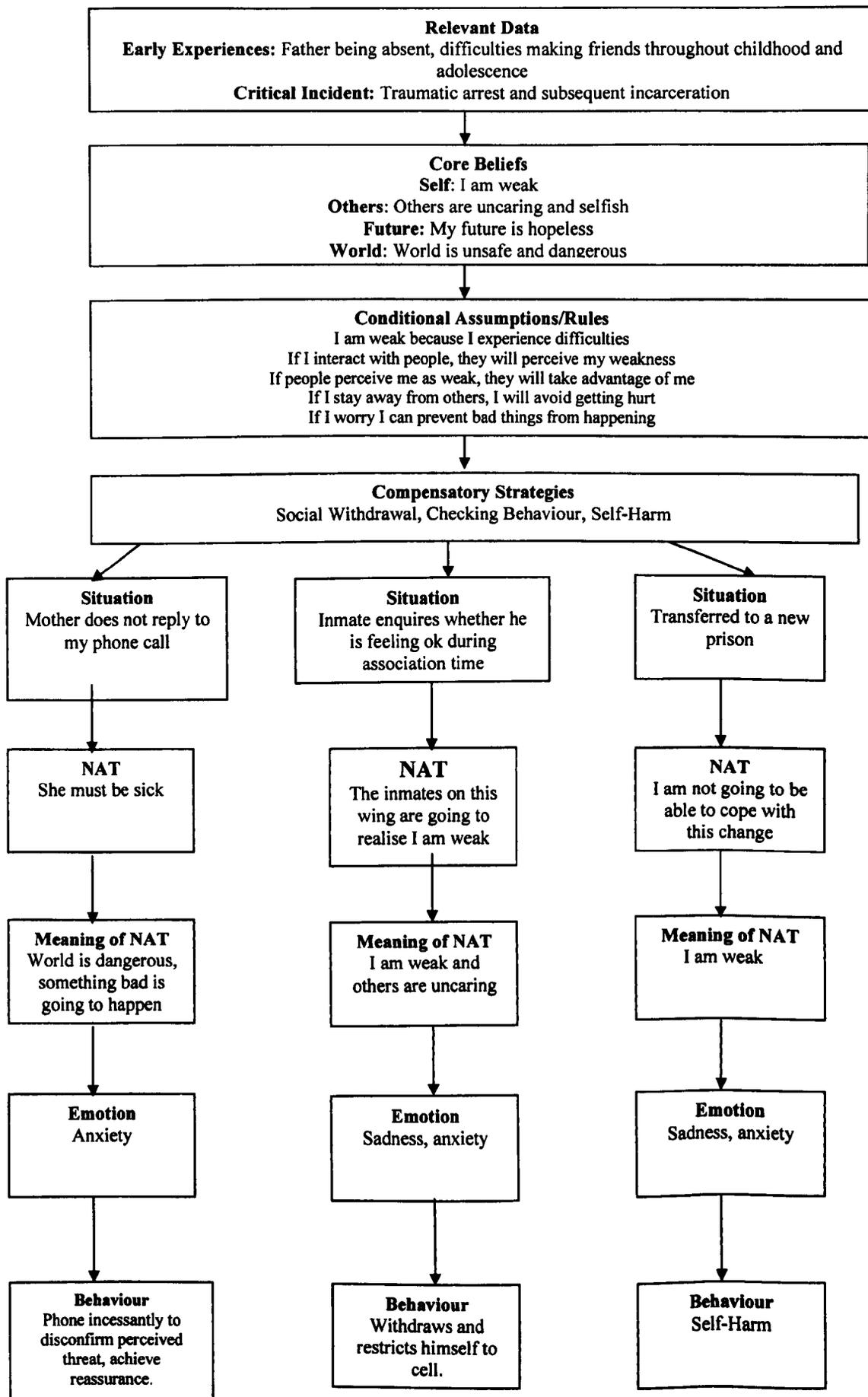
This experience had made me aware that a counselling psychologist in a forensic setting can offer a valuable contribution to the psychological services offered. Reflexivity and an open-minded, discerning approach to case conceptualisation is a strength CoP has to offer to such a setting, thus helping make explicit the dangers of applying a therapeutic model mechanically. A counselling psychologist can also provide holistic understanding of prisoner's psychological difficulties (Kagan, 1988) that shifts back the focus to the prison system itself and how it can fulfil better its role as rehabilitative environment. Finally and more fundamentally CoP can provide another discourse to the clinical, forensic and legal perspectives present in this setting. These to varying degrees all promote a one-dimensional diagnosis-based case understanding aiming at clear categorisation and certainty, while CoP can offer a more idiosyncratic and recovery-focused understanding. Highlighting the utility of using multiple theoretical lenses and including the social context in the equation are precisely ways CoP can provide a unique contribution in a forensic setting by encouraging a shift in mentality from the former to the latter.

Word Count: 3286

References

- Beck, A. T. (1976). *Cognitive therapy and the emotional disorders*. New York: International Universities Press.
- Beck, J. S. (1995). *Cognitive therapy: Basics and beyond*. New York: Guilford.
- Delmonte, M. M. (1989). Systems theory and psychotherapy. *Journal of Contemporary Psychotherapy*, 19(2), 117-135.
- Ehlers, A., & Clark, D. M. (2000). A cognitive model of posttraumatic stress disorder. *Behaviour Research and Therapy*, 38, 319-345.
- Fennell, M. J. V. (2004). Depression. In K. Hawton, P. M. Salkovskis, J. Kirk & D. M. Clark (Eds.), *Cognitive behaviour therapy for psychiatric problems* (pp.169-235). UK: Oxford University Press.
- Haney, C. (2001). *The psychological impact of incarceration: Implications for post-prison adjustment*. Retrieved from <http://img2.tapuz.co.il/CommunaFiles/19852476.pdf>.
- Kagan, N., Armsworth, M. W., Altamaier, E., Dowd, T., Hansen, J. C., Mills, D. H., Schlossberg, N., & Sprinthall, N. A. (1988). Professional practice of counselling psychology in various settings. *The Counseling Psychologist*, 16, 347-365.
- Ponniah, K., & Hollon, S. D. (2009). Empirically supported psychological treatments for adult acute stress disorder and post-traumatic stress disorder: A review. *Depression and Anxiety*, 26, 1086-1109.
- Woolfe, R., Dryden, W., & Strawbridge, S. (2003). *Handbook of counselling psychology*. London: Sage.
- Zayfert, C., & Black-Becker, C. (2007). *Cognitive-behavioural therapy for PTSD: A case formulation approach*. New York: Guilford Press.

Appendix 1: Cognitive Conceptualisation Diagram (J. Beck, 1995)



Appendix 2: PTSD Model (Ehlers & Clark, 2000)

