

Religious Orientation and Psychological Distress: A comparative study of male and female university students

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Abstract: The present study was an attempt to assess religious orientation and psychological distress as well as to find out relationship of religious orientation with psychological distress among university students. University students were also compared on religious orientation and psychological distress with respect to their gender. The data for the present study was obtained from university students [N=200 (Males 110 & Females 90)] belonging to various departments of Aligarh Muslim University. The data collected was analyzed by using appropriate statistical techniques like Pearson's product moment correlation and t-test. The results showed significant negative correlation between intrinsic religious orientation and psychological distress. Moreover, a significant positive correlation was found between extrinsic religious orientation and psychological distress. Significant difference was also found among university students on extrinsic religious orientation with respect to their gender. However, no significant difference was found among them on intrinsic religious orientation and psychological distress with respect to their gender.

Key Words: 1. Intrinsic Religious orientation, 2. Extrinsic Religious Orientation, 3. Psychological Distress

Introduction

Psychological distress is a major problem of present era, especially for students population. Any situation that evokes negative thoughts and feelings in a person such as unpleasant, frustrating, irritable, worrisome, and anxious is considered psychological distress. According to Chalfant, Heller, Roberts, Briones, Aguirre-Hochbaum, and Farr, (1990) psychological distress is "a continuous experience of unhappiness, nervousness, irritability and problematic interpersonal relationships". The same situation is not necessarily stressful for all people and all people do not experience the same negative thoughts and feelings when distressed. One model that is useful in understanding stress among students is the person- environment model. According to this model, stressful events can be appraised by an individual as "challenging" or "threatening" (Lazarus, 1966). Psychological distress is effected by many factors like personality characteristics, demand of situations, type of attributional styles and which kind of coping strategies are opted to deal with a stressful situation.

University students experience unique stress as they adapt to a new environment and new challenges and demands (Swanholm, Vosvick, & Chng, 2009). Students often deal with stressors such as making decisions on living arrangements, earning an income, building new relations, and making decisions about sexual behavior (Swanholm et al., 2009). Vazquez and Blanco (2008) found that depression was common among university students and indicated the need to develop resources for university students as preventive measures and as a guide on how to adapt to the university (Salmela-Aro, Aunola, & Nurmi, 2008).

In recent years, research has given attention to religiousness and its impact on individuals battling with physical and psychological stressors (Kneipp, Kelly and Cyphers, 2009). Distress at

times can be significant enough to result in psychopathology, such as major depression, and often seems to be ignited by combinations of qualities of the stressor, and individual, familial or cultural factors (Wadsworth, 2010). An example of the significant influences of these factors can be seen in attachment theory. Attachment theorists often view God as an attachment figure and believe that as children seek their parents' care and protection during difficult times, people can view God as a provider of safety, care, and protection in times of stress (Hill & Pargament, 2008). Researchers find that people who report close relationships with God experience less depression and other mental health problems (Hill & Pargament, 2008). In addition to providing meaning in difficult times, religion may also serve as a shield. Strawbridge, Shema, Cohen, Roberts, and Kaplan (1998) found that as levels of organizational religiosity increased, depression decreased. Both types of religiosity buffered relationships between non-family stressors and depression (Strawbridge et al., 1998). Religiosity may shield the impact of financial and health difficulties, but intensifies symptoms of depression in those individuals who experienced family crisis (Strawbridge et al., 1998).

Pargament (1997) defined religion as a "search for significance in ways related to the sacred". This definition includes two important elements: *search for significance*, and *the sacred*. The search refers to the process of discovery of the sacred, conservation of the sacred once it has been found, and transformation of the sacred when internal or external pressures require a change (Pargament, 1997; Pargament & Mahoney, 2002). The search can also be understood in terms of the multiple pathways people take to reach their goals and the goals themselves. Religious pathways can be manifested through multiple dimensions in which the sacred is involved, such as ideology, ethical conduct, emotional experience, social intercourse, and study. The goals to be reached are just as diverse. They include achieving personal ends, such as meaning in life and self-development, social ends, such as intimacy with others and justice in the world, and sacred ends, such as closeness to God and living a moral and ethical life (Tarakeshwar, Pargament & Mahoney, 2003). Pargament and Mahoney (2002) define the sacred as divine beings, higher powers, God, or transcendent reality, and other aspects of life that take on spiritual character by virtue of their association with the divine. According to this definition, any aspect of life can take on extraordinary character through its association with, or representation of, divinity.

For thousands of years, religious traditions have prescribed religious coping methods for dealing with major life stressors. Religious orientation is an important factor in understanding the association between religion and well-being. Within and between the religious groups and subgroups, there are many ways of being religious. Allport and Ross (1967) were concerned with identifying why some religious people are, and others are not, prejudiced. These researchers theorized that *intrinsically* oriented people have sensed the presence of God, that prayer is personally meaningful, and that religion is the master motive of their lives. *Extrinsically* religious people use their religion in an instrumental way to achieve goals like comfort and social integration, according to Allport and Ross. In a review of the literature, Wulff (1997) found that an intrinsic religious orientation was positively associated with self regulation, self-esteem, physical and mental health, life satisfaction, and having a purpose in life. Moreover, intrinsically religious people often report a stronger sense of subjective well-being. However, extrinsic religiosity is also valued in traditions that prize social connections, such as Judaism, Catholicism, and Hinduism (Cohen, et al., 2005). Thus, extrinsic religiosity may be predictive of well-being in these groups, but less so in others. In a study Copeland-Linder (2006) sampled 172 Black women in South Africa and explored the association between stress, religiosity, and depression, and physical health and found that participation in formal religion buffers the impact of cumulative stressors, work stress, and racism on physical health; the findings highlighted the significance of religious practices on mental and

physical health. Such factors may impact an individual's ability to maintain well-being during distressful times. Emerging psychological explorations claim that religion and coping can congregate to enhance resilience, healing, and daily functioning through the course of stressful incidents (Van Dyke, Glenwick, Cecero and Kim, 2009). Obst and Tham (2009) revealed that an individual's religiosity shows positive correlations with psychological well-being and shows negative correlations with depression and anxiety. Moreover, studies show that religious coping allows the individual to cognitively shift stressful events into a more constructive image (Van Dyke, et al., 2009).

Of particular significance to understanding the complex relationship between religiousness and mental health is a recent meta-analysis by Hackney and Sanders (2003) finding that the relationship between religiousness and mental health varied as a function of the operationalization of religiousness and mental health. They identified three general categories of religiousness: "ideological religion," which emphasized beliefs involved in religious activity (e.g., attitudes, belief salience, fundamentalism); "institutional religion," which focused on social and behavioral aspects of religion (e.g., extrinsic religiousness, attendance at religious services, participation in church activities, or ritual prayer); and "personal devotion," which was characterized by aspects of internalized, personal devotion (e.g., intrinsic religiousness, emotional attachment to God, devotional intensity). In reviewing several recent studies, Hackney and Sanders found that institutional religion was associated with higher levels of psychological distress, personal devotion was associated with lower levels of psychological distress, and ideological religion was not significantly associated with psychological distress.

However, there remains the possibility that such a link between religion and psychological distress need not exist. It is not necessary that religion is what keeps people grounded. Many individuals may attribute their psychological health to factors that are not directly linked to religion such as hiking, reading, stitching, photography and the like. This research therefore, focuses its attention primarily on the relationship between religious orientation and psychological distress and thus attempts to unearth the true connection between the two.

Objectives of the study

1. To study religious orientation and psychological distress among university students.
2. To study the relationship between religious orientation and psychological distress among university students.
3. To study the difference in intrinsic religious orientation among university students with respect to their gender.
4. To study the difference in extrinsic religious orientation among university students with respect to their gender.
5. To study the difference in psychological distress among university students with respect to their gender.

Hypotheses of the study

Ho₁: There is no significant correlation between intrinsic religious orientation and psychological distress among university students.

Ho₂: There is no significant correlation between extrinsic religious orientation and psychological distress among university students.

Ho₃: There is no significant difference in intrinsic religious orientation among university students with respect to their gender.

Ho₄: There is no significant difference in extrinsic religious orientation among university students with respect to their gender.

Ho₅: There is no significant difference in psychological distress among university students with respect to their gender.

Methodology

Participants

The study is based on the sample of 200 university students enrolled in various post-graduate programs at the Aligarh Muslim University, Aligarh. Out of 200 university students 110 were males and 90 were females.

Tools used

To collect the desired data for the present study, two standardized psychological tests were used.

Religious Orientation Scale (1983)

The Religious orientation was developed by Gorsuch & Vanable, 1983. Otherwise known as Age Universal Scale of Religious Orientation, this scale contains 20 items, 8 of which are meant to characterize a person as intrinsic (5, 6, 7, 9, 11, 12, 16, 19) and rest of the 12 items (1, 2, 3, 4, 8, 10, 13, 14, 15, 17, 18, 20) are meant for measuring the extrinsic orientation. The Age Universal Religious Orientation Scale has internal reliability coefficients of .66 (for the extrinsic scale) and .73 (for the intrinsic scale).

Kessler Psychological Distress Scale (K10)

The Kessler psychological distress scale (K10) (Kessler, 1996) is a widely used, simple self-report measure of psychological distress which can be used to identify those in need of further assessment for anxiety and depression. Kessler and colleagues (2002), found that the Cronbach's alpha for the K10 (a measure of internal consistency reliability) to be high (.93). The brief questionnaire has been shown to have good construct and criterion validity (Kessler et al., 2002), being significantly associated with measures of mental health symptoms and disability as well as the frequency on consultations for a mental health problem in the previous 12 month period.

Procedure

These two measures were in printed form and were administered on each selected subject by assuring them that information provided by them will be kept strictly confidential. Having obtained the data from the subjects, the data were tabulated for giving statistical treatment for obtaining the results.

Statistical Analysis

Keeping in view the nature of research problem and to meet the objectives of the study the data collected was analyzed by using Statistical Product and Service Solutions (SPSS16.0). Statistical techniques used for analyzing data were: frequencies, percentages, correlation and t-test. The statistical significance value was set at $p < 0.05$.

Results and Interpretation

Table 1 Showing Frequency and Percentage of Sample Group With Respect to Intrinsic Religious Orientation

Level	Range	f	%
Low	8-12	8	4
Moderate	13-20	64	32
High	21-24	128	64
Total		200	100

Table 1 reveals that out of 200 university students, 2% was found low on intrinsic religious orientation, 32% show moderate level of intrinsic religious orientation and 64% of students were found high on intrinsic religious orientation.

Table 2 Showing Frequency and Percentage of Sample Group With Respect to Extrinsic Religious Orientation

Level	Range	f	%
Low	12-18	4	2
Moderate	19-30	160	80
High	31-36	36	18
Total		200	100

Table 2 reveals that out of 200 university students, 2% were found low on extrinsic religious orientation, 80% show moderate level of extrinsic religious orientation and 18% of parents were found high on extrinsic religious orientation.

Table 3 Showing Frequency and Percentage of University Students with Respect to Psychological Distress

Level	Range	f	%
Low	10-19	112	56
Moderate	20-29	68	34
High	30-50	20	10
Total		200	100

Table 3 indicates that out of 200 university students 56% were found low on psychological distress, where as 34% were found moderate and 10% were found high on psychological distress.

Table 4 Showing Pearson's Correlation Coefficient(r) Between Religious orientation and Impulsivity of the Sample Group

Variable	r
Intrinsic Religious Orientation	-.611*(p = <0.001)
Psychological Distress	
Extrinsic Religious Orientation	.550*(p = <0.001)
Psychological Distress	

*.P \leq 0.05 Level of significance

Table 3 reveals that there is a significant correlation negative correlation ($r=-.611^*$, $p = <0.001$) between intrinsic religious orientation and psychological distress among university students, indicating “*more the intrinsic religious orientation, less is psychological distress and less the intrinsic religious orientation, more is the psychological distress*”. Thus our null hypothesis Ho_1 which states that, “*there is no significant correlation between intrinsic religious orientation and psychological distress among university students*” stands rejected.

The above table further reveals that there is a significant positive correlation ($.550^*$, $p = <0.001$) between extrinsic religious orientation and psychological distress among university students, indicating “*more the extrinsic religious orientation, more is psychological distress and less the extrinsic religious orientation less is the psychological distress*”. Thus our null hypothesis Ho_2 which states that, “*there is no significant correlation between extrinsic religious orientation and psychological distress among university students*” stands rejected.

Table 5 Showing Comparison of Mean Scores of Religious Orientation and Psychological Distress among the University students with Respect to their Gender

Variable	Gender	n	M	SD	Df	t-value
Intrinsic Religious Orientation	Male	110	20.36	2.59	58	.753 ^{NS}
	Female	90	20.91	3.07		
Extrinsic Religious Orientation	Male	110	23.25	3.14	58	4.08*
	Female	90	27.70	5.31		
Psychological Distress	Male	110	20.47	6.38	58	.337 ^{NS}
	Female	90	19.87	7.23		
Total N=200						

NS=insignificant, *.P \leq 0.05 Level of significance

The table 5 reveals that there is a significant difference in extrinsic religious orientation among male and female university students ($t=4.08$). The results show that females have more extrinsic religious orientation as compared to their counterparts. Thus our null hypothesis Ho_4 which states that “*there is no significant difference in extrinsic religious orientation among university students with respect to their gender*” stands rejected.

The above table further reveals that there is no significant difference intrinsic religious orientation ($t=.753$) and psychological distress ($t=.337$) among university students with respect to their gender. Therefore our null hypotheses Ho_3 which states that “*there is no significant difference in intrinsic religious orientation among university students with respect to their gender*” and Ho_5 which states that “*there is no significant difference in psychological distress among university students with respect to their gender*” stands accepted.

Discussion

The aim of the present study was to study the religious orientation and psychological distress among university students and relation of religious orientation with psychological distress. The comparison among university students on religious orientation and psychological distress with respect to their gender has also been examined.

The results of the present study revealed that there is a significant negative correlation between intrinsic religious orientation and psychological distress among university students. There are several studies which are in line with these results. Research studies have shown that intrinsic religious orientation has inverse association with psychological distress, maladjustment, anxiety and depression (Genia, 1996; Hackey, & Sanders, 2003; Ventis, 1995). Moreover, several researchers have found that intrinsic religious orientation serves as a buffer and is negatively correlated to a depressive reaction to negative life events (Hettler, & Cohen, 1998; Kendler, Gardner, & Prescott, 1997; Park, Cohen, & Herb, 1990). An intrinsic orientation to religion is found to share a significant negative association with depressive symptoms (Genia, 1996; Genia & Shaw, 1991; Koenig, 1995). Similarly, Maltby and Day (1999) investigated the relationship between religious orientation and depression and found that depressive symptoms are associated with lower measures of intrinsic religious orientation, optimism, self-esteem and problem-focused coping. Studies conducted by Skinner, Correa, Skinner, & Bailey, (2001) and Biesinger, & Arikawa (2008), revealed that intrinsic religious orientation was associated with greater level of happiness and lower levels of depression, anxiety and stress regardless of gender. Similarly Bergin, Masters, & Richards, (1987) in a study examined the relationship between intrinsic religious orientation and mental health and found that intrinsic religious orientation was negatively correlated with unhealthy attributes, such as anxiety, depression and irrational beliefs.

The results of the present study showed that there is a significant positive correlation between extrinsic religious orientation and psychological distress among university students. Research studies have shown that extrinsic religious orientation has clear association with psychological distress; more extrinsic religious oriented individuals, more likely report higher levels of depression and anxiety (Davis, Kerr, & Kurpius, 2003; Park, Cohen, & Herb, 1990). Similarly, Maltby and Day (1999) in a study examined that among men and women, higher scores on the Beck Depression Inventory were accompanied by significantly higher scores on an extrinsic-social and extrinsic personal orientation towards religion, neuroticism, anxiety, internal, global and stable attributions, avoidance and wishful coping measures; and with significantly lower scores on intrinsic orientation towards religion, self-esteem, optimism, problem-focused and support-seeking coping style measures. Ghorbani and Watson (2006) in a study examined the relationship of religious orientation with alexithymia, emotional intelligence, self-consciousness, and found that higher levels of an intrinsic religious orientation were associated with higher levels of private self-consciousness and lower levels of depression, anxiety, and perceived stress. On the other hand, higher levels of an extrinsic religious orientation were related to difficulty identifying and describing feelings and with more distress.

There is no significant difference among university students on intrinsic religious orientation and psychological distress with respect to their gender as far as their gender is concerned. However, significant difference was found among them on extrinsic religious orientation with respect to their gender. Females were high on extrinsic religious orientation as compared to the males. The earlier researches on extrinsic religious orientation among university students with respect to their gender have mixed results. Several studies are inconsistent with our findings. For example, Cirhinlioglu and Demir (2012) conducted a study to examine religious orientation and its relation to locus of control

and depression and found that female participants had higher levels of intrinsic religiosity than male participants. Similarly, Beisinger and Arikawa (2008) in a study examined that there was no significant differences between fathers and mothers on their intrinsic orientation and extrinsic orientation.

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