



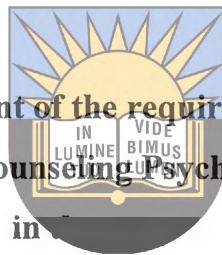
University of Fort Hare

East London Campus

**RELIGIOUS ORIENTATION AND ITS RELATIONSHIP
TO PRESSURE AMONG FIRST YEAR PSYCHOLOGY
STUDENTS**

By

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**Submitted in partial fulfillment of the requirement of the degree of
Masters in Counseling Psychology**
in

**Department of Psychology
University of Fort Hare**
Together in Excellence

The University of Fort Hare (East London Campus)

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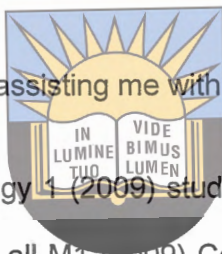
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I wish to express my sincere appreciation and love to my family, for their interest, support, understanding and motivation. You all have been a pillar of strength to me and I sincerely thank you for being apart of my life and my ambitions I undertake in life.

DECLARATION

I declare that: “**Religious Orientation and its relationship to pressure among first year psychology students**” is my own work. All the sources used/quoted have been indicated and acknowledged by means of references. This dissertation was not previously submitted by me for a research paper or degree at another university.



Miss. T. Sam

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Abstract

The relationship between religiosity and health has been of increased interest among researchers in recent years. Recent studies suggest that religious commitment may play a beneficial role in preventing mental and physical illness, and improving how people cope with these illnesses. The present study investigated the relationship between religious orientation and pressure among first-year Psychology students. Religious orientation was measured using the Allport-Ross Religious Orientation Scale-Revised. Pressure was measured in this study using Weiten's Pressure Inventory. Results revealed few significant differences between intrinsic and extrinsic religious orientation and the types of pressures experienced. The more intrinsically orientated a person is, the more pressure the person experiences with regard to family, work, and university relations. The more extrinsically orientated a person is, the more overall pressure as well as pressures in areas of work, intimate, university, and self-imposed pressure were experienced.



Key words: religion, pressure, intrinsic religiosity, extrinsic religiosity, stress

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CHAPTER 1

INTRODUCTION

Religion's effects on mental health have been debated for years, yet only in the last half century have these theories been empirically tested (Shreve-Neiger, Edelstein, 2003). The relationship between religiosity and health has been of increased interest among researchers in recent years (e.g., Emmons & Paloutzian, 2003; Hackney & Sanders, 2003; Masters, Hill, Kircher, Benson, & Fallon, 2004; Mills, 2002; McCullough, Hoyt, Larson, Koenig, & Thoresen, 2000; Pieper, 2004; Tepper, Rogers, Coleman, & Malony, 2001; Thoresen, 1999). Physicians and mental health professionals are finding growing evidence that humans' spiritual lives are related to physical and mental well-being (Koenig, McCullough, & Larson, 2001). Furthermore recent studies suggest that religious commitment may play a beneficial role in preventing mental and physical illness, improving how people cope with mental and physical illness and facilitating recovery from illness (Pieper, 2004; Tepper, Rogers, Coleman & Malony, 2001). Hence the purpose of this research is to consider whether a relationship exists between religious orientation as defined by Allport and Ross (1967) and pressure – a form of stress identified by Weiten (1988, 1998).

Research has shown that age can have significant effects on both religious orientation and pressure with older people adopting a more intrinsic religious orientation as well as perceiving pressure less intensely than younger people (Masters, Hill, Kircher, Benson, & Fallon, (2004); Van Haitsma, 1986; Wieten, 1988). The finding that religion is more salient in the lives of older than younger people is robust and appears to

be due to an increase in importance of religion as individuals age rather than a cohort effect (Johnson, 1995; Koenig, 1997).

Religion may provide security and act as a shield against stress. Religion may also promote stress by insisting on strict conformity to tradition, which may be in conflict with the larger society (Bourguignon, 1992). Much of the research on religion and stress has focused on religion as a coping mechanism, and research is lacking on the role of religion in the appraisal phase of stress (Pargament, 1997; Pargament, Smith, Koenig, & Perez, 1998).



1.1 Rationale and Significance of the Problem

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The link between religiosity and health has been the subject of increased interest among researchers, with research examining the relationship between religion and both physical and mental health. Gathering from cited research much of its emphasis is on investigating the relationship between religious faith and physical health benefits, as well as the relationship between religion and the ability to cope with mental health issues. Thus it is generally agreed that something beneficial related to health and well-being is associated with religion. Aspects of religiosity that may contribute to this relationship are not fully understood and are barely studied hence an effort to address this deficiency has suggested that research move away from measures that have dominated the field, such as church attendance, and move to more conceptually grounded measures (Hill & Pargament, 2003; Powell, Shahabi, & Thoresen, 2003). Thus George, Ellison and Larson (2002) recently suggested that the link between health

and intrinsic/extrinsic religious orientations is an understudied and a productive area for investigation.

There is considerable evidence that religion can be a resource for coping with a variety of stressors, however there remains a lack of research in which pressure as a type of stressor is of concern.

Apart from contributing to previous literature, this research could be of particular value in the South African context, as the role of religion in psychology is an under-researched area in this country.



1.2 Statement of the Problem **University of Fort Hare** *Together in Excellence*

It is the purpose of this study to investigate the relationship between religious orientation and pressure among university students.

1.3 General Hypotheses

- The more intrinsic religiously orientated a person is, the less pressure the person experiences in most aspects of their life.
- The more extrinsic religiously orientated a person is, the more overall pressure the person experiences in various aspects of their life.

1.4 Definitions of terms

Religion - Religion has always been difficult to define among various schools of thought however William James who is cited as the pioneer of psychology and religion defined it as the feelings, acts, and experiences of individual men, in so far as they apprehend themselves to stand in relation to whatever they may consider divine (Paloutzian, 1996). According to Pargament (1997), religion is a pervasive phenomenon that incorporates a system of beliefs in, and the practice of worship and/or rituals directed towards a divine or superhuman power.



Intrinsic Religious Orientation – is characterized by those, 'who view religion itself as an end, a master motive'. These individuals embrace a religious creed, internalize it, and attempt to follow it. Other needs, strong as they may be, are regarded as being of less ultimate significance, and are, so far as possible, therefore, met only to the extent that they correspond with the religious beliefs (Hettler & Cohen, 1998; Maltby, J., Lewis, C. A. (1996).

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Extrinsic Religious Orientation – is characterized by those, 'using religion for their own ends, with values that are always instrumental and utilitarian'. Persons with this orientation endorse religious beliefs and attitudes or engage in religious acts only to the extent that they might aid in the achievement of more mundane goals, which may include social prestige, approval, providing self-justification for actions, promoting social or political aims, comfort and protection (Hettler & Cohen, 1998; Navara & James, 2005).

Stress – is neither a stimulus nor a response but a special stimulus-response transaction in which one feels threatened (Naughton, 1997). Hence ‘stress’ is used as a general term referring to a diverse array of experiences that may be appraised as taxing or threatening to one’s well-being and abilities to cope.

Pressure - Weiten (1988) defines pressure as ‘the perception of expectations and demands that one behaves in a certain manner’ and defines it as a form of stress.



1.5 Summary and Overview

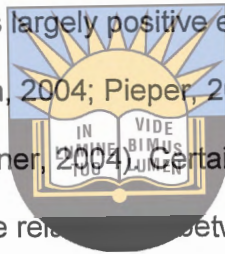
In summary, there is growing body of literature that suggests that religion has largely positive effects on mental health. This present chapter highlighted the rationale, significance of the problem, the intended hypotheses for the research and brief descriptions of key terms stipulated throughout the study. The forthcoming chapter will provide recent literature on religion with a specific regard to the terms coined by Allport of ‘intrinsic and extrinsic religiousness, pressure and its relationship between the two. Chapter three will provide details on the methodology of the study with regard to the instrumentations used, data collection and analysis thereof. Chapter four will explain results found and chapter five will follow with a discussion of these results.

CHAPTER 2

REVIEW OF THE LITERATURE

2.1 Introduction

In recent years, there has been increased interest among multidisciplinary researchers in looking at the relationship between religion and health, with the bulk of the literature indicating that religion has largely positive effects on mental health (Masters, Hill, Kircher, Benson & Fallon, 2004; Pieper, 2004; Smith, McCullough & Poll, 2003; Fabricatore, Handal, Rubio & Gilner, 2004). Certain studies suggest that religious coping is essential in understanding the relationship between religiousness and mental health (Pargament, 1997). Religious coping is a process by which individuals use their religious beliefs to deal with stressors and mental health. Different religious variables, including strength of faith and spiritual life integration have been found to buffer the negative association between stressors and well-being (Fabricatore, Handal, Rubio & Gilner, 2004).



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Pargament (1997) suggested that merely being religious may not be sufficient for retaining adjustment or protecting against distress when confronted with significant stressors. Rather it may be that individuals must mobilize their religiousness and integrate their beliefs into their coping responses in order to reap the beneficial effects of religiousness. Recent studies suggest that religious commitment may play a beneficial role in preventing mental and physical illness, improving how people cope with mental and physical illness and facilitating recovery from illness (Pieper, 2004; Tepper, Rogers, Coleman & Malony, 2001).

Religious beliefs and practices promote an optimistic, positive world-view that gives experiences *meaning*. With regard to conditions of stress, conflict, and confusion, religion may play a vital role. Religion may provide security and act as a shield against mental disorders or as a reflection or expression of stress or distress. On the opposing side religion does not always promote positive emotions and supportive relationships. According to Koenig, & Larson (2001), religion may induce guilt, shame and fear. It can foster social isolation and low self-esteem in those not conforming to religious standards. It may restrict and impede personal growth and foster rigid, narrow thinking. Nevertheless, *on the balance*, it appears that religious beliefs and practices rooted within established religious traditions are generally associated with better mental health, higher social functioning, and fewer self-destructive tendencies (Koenig, & Larson, 2001).



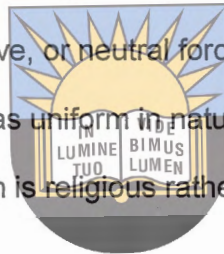
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2.2 Religion

Applied areas of psychology such as clinical, counselling, and health have taken the lead in examining links between religion and psychological, physical, and interpersonal functioning. Basic subfields are also recognizing that spiritual and religious influences may be profoundly important (Emmons & McCullough, 1999; Paloutzian & Kirkpatrick 1995). Religions are rooted in authoritative spiritual traditions that transcend the person and point to larger realities within which the person is embedded (Emmons & Paloutzian, 2003). Religion includes the subjective feelings, thoughts, and behaviours that arise from a search for the sacred. The term “search” refers to attempts to identify,

articulate, maintain, or transform. The term “sacred” refers to a divine being, divine object, ultimate reality, or Ultimate Truth as perceived by the individual.

In addition religion is a multifaceted object, incorporating cognitive, emotional, motivational, and behavioral aspects (Hackney & Sanders, 2003). Religion is a source of meaning and stability in an uncertain world and conducive to positive psychological health. Much research has gone into the question of whether religion is beneficial, detrimental, or neutral in regard to psychological adjustment. Attempts to consider religiosity as an overall positive, negative, or neutral force in people's lives is based on a mistaken conceptualization of religion as uniform in nature. It would be better, they claim, to examine *in what way* a person is religious rather than *how* religious he or she is (Hackney & Sanders, 2003).



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A further exploration into the conceptualization of religion, aids in providing a better outlook on the dimensions that exist within religiosity. Krause (1993) conceptualized religion as having three major components: organizational religiosity, subjective religiosity, and religious beliefs. Organizational religiosity involves participation in religious institutions and is frequently related to church attendance, church membership, or that aspect of religion embedded in a larger organizational context. Subjective religiosity is related to commitment and the level of importance people place on religion in their personal lives. Finally, religious beliefs are the core beliefs people have as related to their religion and man or woman's relationship to God.

Despite being a universal phenomenon, religion has different meanings for different people.

2.3 Intrinsic / Extrinsic Religious Orientation

The nature of religion can be partially explained by looking at two simplistic definitions of religion in past research. It is possible to differentiate religion by distinguishing two distinct types of religiousness as defined by Allport (1959). He distinguished between intrinsic religious orientation (IRO) and extrinsic religious orientation (ERO). A notable body of research developed around the concepts of intrinsic religious orientation and extrinsic religious orientation where much of this work has focused on the relationship of intrinsic and extrinsic religious orientations and mental health or psychological functioning.



People with intrinsic religious attitudes view religion as 'ends'. They tend to be more psychologically well adjusted than their extrinsically orientated counterparts. Donahue (1985) stated that the Religious Orientation Scale (ROS) provides a powerful instrument to help resolve controversies surrounding religion and mental health. A recent meta-analysis (Smith et al., 2003) found evidence that religious orientation is modestly but reliably associated with mental health. More specifically Masters and Bergin (1992) found that intrinsic religious orientation was found to correlate positively with empathic concern, self-consciousness, altruism and internal states of awareness whereas the opposite was true for the extrinsically religiously orientated. Having and using an intrinsic orientation in times of stress may provide meaning, a sense of mastery, strength, and self esteem, which is drawn from more deeply, internalized religious beliefs (Palmer & Shebby, 2003). Ultimately intrinsic orientation may reduce the perceived threat or loss associated with negative events, may enhance an

individual's evaluation of coping options and result in the use of effective religious coping strategies (Hettler & Cohen, 1998).

People with extrinsic religious attitudes use their religion as a 'means'.

Furthermore extrinsic religiousness is predictive of negative outcomes such as mental illness as opposed to mental health, has been supported by literature (Donahue, 1985; Smith et al., 2003). In particular an extrinsic religious orientation was found to correlate negatively with positive mental health and had a significant positive relationship with depressive symptoms. Extrinsic religiousness lacks any fundamental guiding principle and offers no central role to the importance of divine beneficence in times of stress. The extrinsic type turns to God but without turning away from self (Allport & Ross, 1967).



No approach to religiousness has had greater impact on the empirical psychology of religion than Allport's concepts of intrinsic and extrinsic religiousness (Plante, Saucedo, & Rice, 2001). In essence, an intrinsic orientation can be seen as 'a faith unto its own ends' whereas an extrinsic orientation can be seen as 'a means to an end, other than faith itself' (Allport & Ross, 1967). Thus individuals either adopt a religious orientation for social benefits (extrinsic) or for individual meaning (intrinsic) (Palmer & shebby, 2003).

Allport and Ross (1967) developed a 20-item Religious Orientation Scale to measure the IRO and ERO concepts. It measures the extent to which an individual 'lives' their religion (intrinsic) versus 'uses' their religion (extrinsic). Allport began to notice a group of 'muddleheads who refused to conform to our neat religious logic'

(Donahue, 1985). These individuals agreed with the items on *both* scales despite Allport's attempt to construct the scales to represent polar opposites. As a result of this, Allport extended his original bipolar approach into a fourfold typology which is represented in figure 1.1. Researchers have varied in their opinions on whether

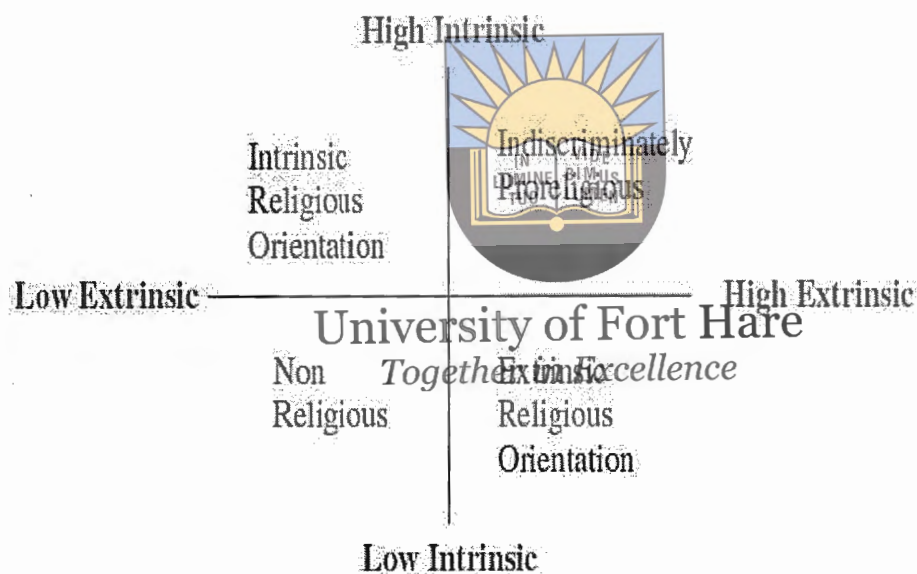


Figure 1.1: Fourfold typology as defined by Allport

assessments of the religious orientation construct should occur according to the two dimensions (I/E construct) or if the fourfold typology should be adopted. Kirkpatrick & Hood, (1990) were more critical of the latter.

Those who agreed with items on the *I* scale and disagreed with the items on the *E* scale he called *intrinsic*s. Those who disagreed with *I* items and agreed with the *E* items he called *extrinsic*s. Those who agreed with items on both scales he called

indiscriminately proreligious (henceforth *indiscriminate*) and those who disagreed with items on both scales he called *indiscriminately antireligious* (henceforth *nonreligious*).

A study conducted by Thompson (1974) made use of this typology. He found that the indiscriminately proreligious were the most dogmatic followed by the extrinsically orientated and the antireligious, with the intrinsically orientated being the least dogmatic.

The intrinsic-extrinsic distinction appears to be helpful in many settings and its precise relationship to psychological health, or the lack of it, is being debated (Hunt & King, 1971; Thompson, 1974). According to Kirkpatrick & Hood (1990) the Intrinsic dimension appears to be poorly defined both conceptually and empirically, but in the end it seems to measure the important but theoretically impoverished construct of (something like) 'religious commitment'. The extrinsic dimension, on the other hand, appears to be fairly well defined as an utilitarian, selfish motivation for religious involvement, or perhaps two such motives, but it immediately leads to another question concerning the specific motive(s) or goal(s) behind the orientation.



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2.4 Pressure

Stress is a part of our daily living and according to Naughton (1997) he believes that stress is primarily a process of motivation since it requires some sort of adaptation (coping) to the demand or set of demands. Furthermore stress threatens a person's well being and produces automatic, persistent attempts to relieve the tension. In coping with stress, a person is confronted with two challenges: To meet the requirements of the stressors and to protect oneself from psychological damage and disorganization (Hussain & Juyal, 2007). Psychological stress states are presumably brought about by

different antecedent conditions, both in the environment and within the person, and have different consequences (Lazarus, 1993). To the extent that we take these variables seriously, stress cannot be considered as a single dimension.

Although a large research literature certainly suggests that change is an important type of stress, it seems unlikely that change represents the only kind of stress. Thus, it is proposed that pressure may represent another key form of stress (Weiten, 1998). Pressures are assumed to be a relatively mild form of everyday stress, although these assumptions need to be investigated. Many studies focus on major life changes as the main cause of stress. While change is a frequent precursor to stress, questions have been raised concerning whether or not change itself should be the only form of stress experienced.

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Pressure has been proposed as another important form of stress (Weiten, 1988). Weiten (1988, p. 229) defines pressure as 'the perception of expectations and demands that one behaves in a certain manner'. Weiten differentiated between two subtypes of pressure, namely (a) pressure to perform various tasks and responsibilities successfully and efficiently, and (b) pressure to conform to others expectations about how one ought to act and think.

While widely discussed by the lay public, pressure has largely been ignored by researchers investigating the dynamics of stress (Weiten, 1998). One of the main benefits of the pressure inventory is that the measure enables researchers to examine pressure which could be a way to incorporate the interpersonal aspects of stress (Weiten, 1998). Although research has been conducted on pressure as a separate form

of stress, based on the findings of Weiten, 1988; 1998) it appears to be an important concept. Pressure affects individuals differently as it is a subjective experience.

Weiten, (1988) suggests that the concept of pressure is located within the transactional model of stress developed by Lazarus and Folkman (1984). Weiten's conceptualization of pressure as a form of stress appears to be appraisal based, in that it explores perceptions of experienced pressure, thus locating pressure within the appraisal process of the transactional model of stress. Further, this model claims that the person and the environment are viewed as being in a dynamic, mutually reciprocal, bi-directional relationship. This model emphasizes that the experience of stress is highly subjective, depending on how people appraise the potentially threatening events that they encounter. According to the present theoretical formulation, stress is used as a general term referring to a diverse array of experiences that might be appraised as threatening. It is assumed that one key research issue involves identifying the principal types of stressful transactions that commonly take place.

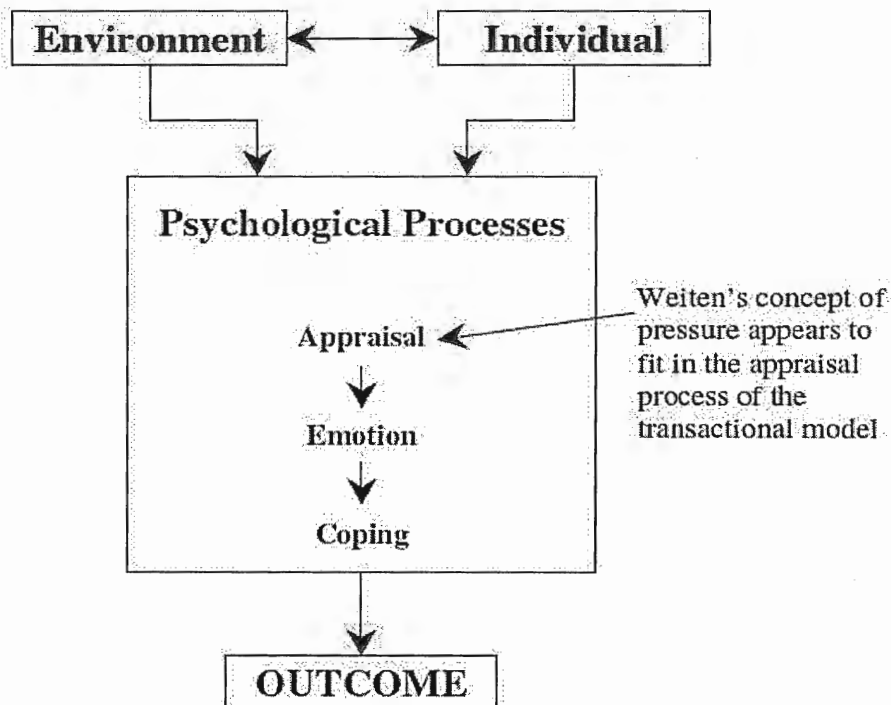
The transactional model incorporates a tripartite process of cognitive, emotional responses, and efforts to cope with the stressor. It specifies conscious, purposive cognitions of behaviours, rather than subconscious ego defence mechanisms and personality styles (Lazarus & Folkman, 1984). Regarding stress appraisal when a person is faced with a stressor, the person first evaluates the potential threat in terms of significance of the threat, the controllability, the positive or negative effect of the threat, and the challenge the stressor presents, commonly known as primary appraisal. Facing this, the secondary appraisal follows, which is the assessment of one's coping resources and options, the secondary appraisal addresses what one can do about the

situation. A person's psychological appraisal of a situation and resources is critical for determining whether the person experiences stress and shows a strain response (Lazarus & Folkman, 1984). How a person perceives a stressful situation and the meaning they ascribe to it is more important than the actual reality of the situation, thus the cognitive mechanisms of appraisal and coping define one's stressful experience. Weiten (1988, 1998) failed to describe exactly how his conceptualization of pressure is consistent with the transactional model. Weiten's conceptualisation of pressure as a form of stress appears to be appraisal based, in that it explores perceptions of pressure experienced, thus locating pressure within the appraisal process of the transactional model of stress shown in Figure 1.2.



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Figure 1.2: The Transactional Model of Stress



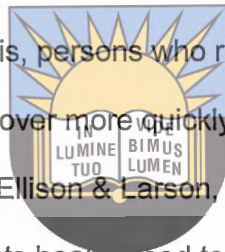
In his attempt to measure pressure as a form of life stress, Weiten (1988) developed the Pressure Inventory (PI) and compared it to the Holmes and Rahe's Social Re-adjustment Rating Scale (SRRS) as a predictor of psychological symptomatology (Weiten, 1998). The PI predicted significantly better than the SRRS and this evidence was interpreted as suggesting: (a) that the construct of pressure can be measured adequately, and (b) that the measurement of pressure can add to the prediction of at least some adaptational outcomes associated with stress (Weiten, 1998).

2.5 Research on Religion and Pressure



Generally there seems to be little research conducted on religious orientation and pressure however there is increasing research documenting the relationship between religious orientation and mental health. There is research evidence that religious involvement is associated both cross-sectionally and prospectively with better physical health, better mental health, and longer survival (George, Ellison & Larson, 2002). Religious participation takes a variety of forms and in recent studies the measurement of religion identified 10 dimensions that might be expected to affect health according to George, Ellison & Larson, (2002). To date research has focused primarily on four of these dimensions: (a) public participation (attendance at religious services and related activities, e.g., study groups), (b) religious affiliation (major religious groups and/or specific denominations), (c) private religious practices (e.g., prayer, meditation, reading religious materials), and (d) religious coping (the extent to which individuals turn to religion when coping with problems).

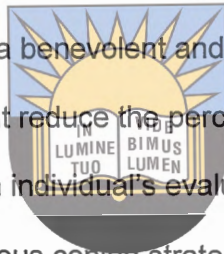
Although all four dimensions have been linked to positive health outcomes, they are not equally powerful. Two of these dimensions stand out, the first, attendance at religious services is most strongly related to physical health, mental health, and mortality in community-based samples, thus, people who attend religious services once a week or more typically have fewer illnesses, recover more quickly from illness, and live longer than individuals who attend less frequently. Second, in studies of illness course and outcome, based on clinical samples, religious coping is the most powerful predictor of recovery and survival, that is, persons who report relying on their religion to help them cope with illness, tend to recover more quickly from illness and better tolerate invasive medical procedures (George, Ellison & Larson, 2002). Thus, efforts to identify the mechanisms by which religion affects health need to take into account the differential importance of religious dimensions for specific health outcomes.



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Those individuals who find meaning within religion itself or those who are motivated by it internally (intrinsic orientation) seem to cope with stressors better or perceive themselves as having less stress, than those who lack this quality (Genia, 1993; Pollard & Bates, 2004). According to Hettler & Cohen (1998) intrinsic religiousness “regards faith as a supreme value in its own right”. Individuals with this orientation find their main motivation in religion, and religion thus serves as the framework within which they live their lives. Extrinsic religiousness, on the other hand, is strictly utilitarian; individuals with this orientation tend to use religion instrumentally to achieve other, more ultimate ends. Previous research on the correlates of intrinsic and extrinsic religiousness has produced inconsistent findings, but in general, it appears that an intrinsic orientation is positively related to other religion variables, such as orthodoxy

and church attendance, but is unrelated to psychological variables. An extrinsic orientation appears to be unrelated to other measures of religiousness, but is related to several undesirable individual difference variables such as prejudice and trait anxiety (Kirkpatrick & Hood, 1990), obsessive-compulsive disorder and narcissistic personality disorder (Masters & Bergin, 1992). In addition to this individuals with the intrinsic orientation would likely turn to religion in times of crisis. Having and using an intrinsic orientation in times of life stress might provide meaning, a sense of mastery, and self-esteem through one's relationship with a benevolent and omnipotent God. More specifically, an intrinsic orientation might reduce the perceived threat or loss associated with negative events, might enhance an individual's evaluation of coping options, and might result in the use of effective religious coping strategies (Hettler & Cohen, 1998).



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Two domains of religiousness have been extensively developed and shown to be significant predictors of psychological adjustment namely religious motivation and religious beliefs (Schaefer & Gorsuch, 1991). A third domain religious problem solving style, describes the extent and manner in which individuals involve their faith in solving problems. Religious problem-solving style has been suggested as an important mediating variable in the relationship between the other measures of religiousness and psychological health (Schaefer & Gorsuch, 1991).

In comparison to other research on religion and mental health, there seems to be relatively little research conducted on religious orientation and stress. Much of the research on religion and stress focused on religion as a coping mechanism. Nooney (2005) argues that a model explaining the link between religiosity and stress is needed. Therefore emphasizing the positives and negatives of religious coping, people who

have religion provide them with a sense of meaning and purpose, emotional comfort, and personal control (Pargament et al., 1998) seem to cope with stressors better than those who lack this quality (Genia, 1993; Pollard & Bates, 2004).

Hence, extrinsic religious orientation is associated with a way of construing the world that results in greater perception of stress, whilst those with an intrinsic orientation, who view religion as important in and itself irrespective of personal assistance, are perhaps assisted by that viewpoint in perceiving less stress (Pollard & Bates, 2004).



2.6 Religious affiliation

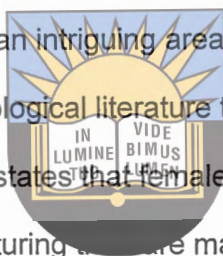
Participation in religious organizations can influence one's perception of pressure. It has been noted that traditional religions teach the importance of caring relationships with others and also offering suggestions of comfort in life circumstances, based on the premise that God is sympathetic to one's needs. Moreover religious involvement may facilitate mental and physical well-being in that religious communities have teachings that (a) discourage risk-taking and deviant behaviours, (b) provide more guidance about sexuality and family life, including marriage and child rearing, and (c) and shape our lifestyle choices in ways that may reduce exposure to various stressful events and conditions (Ellison, 1999).

Previous literature has focused extensively on Christianity and to a lesser extent Judaism. Genia (1993) reported that comparisons of five religious groups indicated that religious affiliation mediated relationships between religious orientation and independent

variables. Although the pattern of relationships among the religious variables was fairly consistent across religious groups, some differences appear.

2.7 Gender differences in religiosity

Studies of religious beliefs and religious behaviour have demonstrated consistently that females are more religious than males. They are more likely to express a greater interest in religion, have a stronger personal religious commitment, and attend church more frequently. This has been an intriguing area of study and two general explanations have emerged in the sociological literature to address this issue (Miller & Hoffmann, 2001). The first explanation states that females are taught to be more submissive, passive, obedient, and nurturing than are males and that these traits are associated with higher levels of religiosity according to Miller & Hoffmann, (2001). In other words those who exhibit these personality traits tend to be more religious than those who do not. Thus it is argued that the apparent gender difference is related to more females than males possessing these personality traits. The second explanation is that females are more religious than males because of their structural location in society. This perspective argues that lower participation in labour force and greater responsibility for the upbringing of children lead women towards greater involvement in religion. Hence leaving women with more time for church-related activities and also a greater need for a source of personal identity and commitment (Miller & Hoffmann, 2001).



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2.8 Summary

There is a need to look at the link between religiosity and pressure to emphasize the positive and negatives of religious coping among people who battle with pressure. In this chapter literature pertaining to religion and pressure were provided, with the aim of distinguishing between two types of religiosities among which individuals subscribe to, as well as the different types of pressures that individual's may experience in their daily lives, were mentioned. The methods used in this study will be discussed in chapter three.



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CHAPTER 3

METHODOLOGY

3.1 Introduction

This study will establish whether a relationship exists between religious orientation and pressure among first year psychology students. Secondly it will establish whether age or gender differences exist in the amount of pressure one is subjected to and its effect on religious orientation.



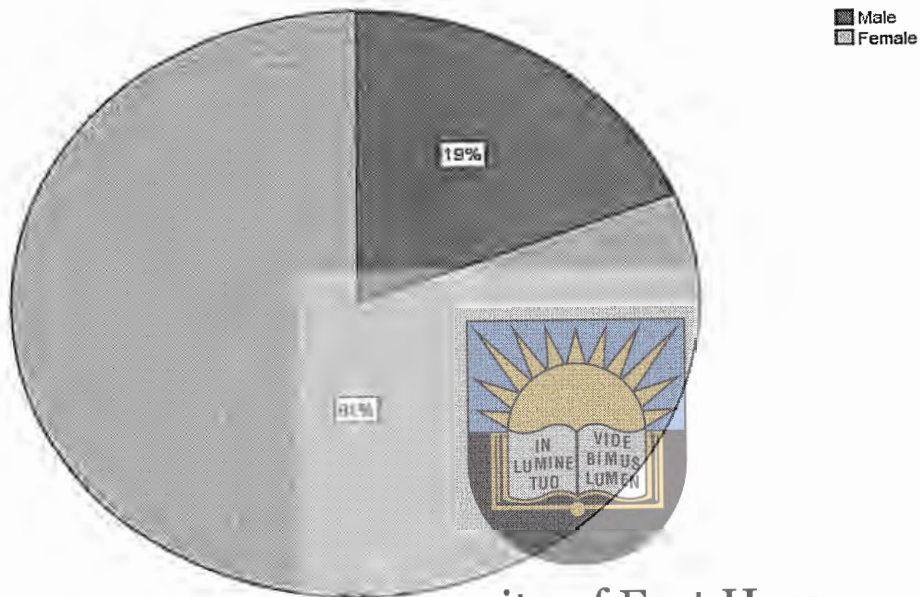
The statistical programme, Statistical Package for the Social Sciences (SPSS) student version 17.0 four Windows, was used to process the data collected from the students.

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3.2 Sample

This research was conducted on a non-probability, convenience sample of 100 first year psychology student volunteers in several psychology tutorial classes at the University of Fort Hare, East London. The respondents ranged between the ages of 17 and 45 years. There were 19 males and 81 females. The religious affiliation breakdown of the sample was as follows: 99 Christianity respondents, 1 Atheist respondent

Gender of participants



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Figure 1.3 Gender of participants

Age

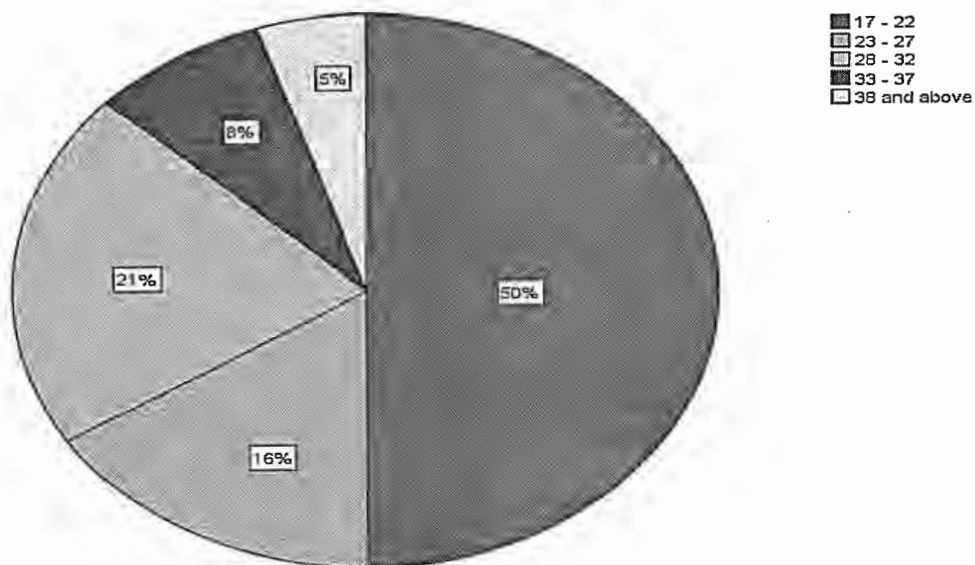


Figure 1.4 Age of participants

Of the sample 5% were between the ages of 38 and above, 8% were between the ages of 33 – 37, 16% were between the ages of 23 – 27, 21% were between the ages of 28 – 32, and 50% were between the ages of 17 – 22 years of age.

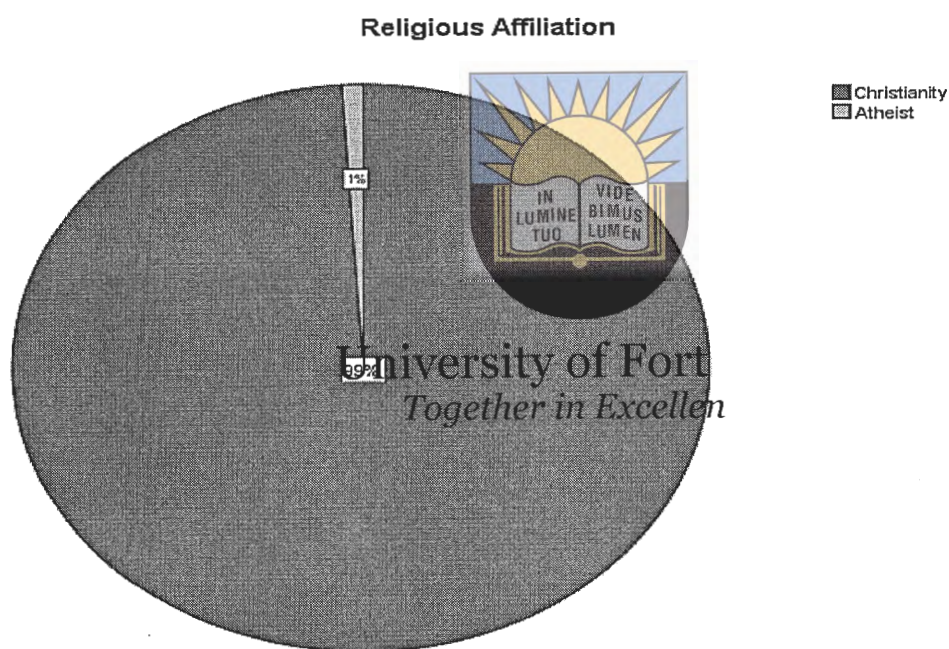


Figure 1.5 Religious affiliations of participants

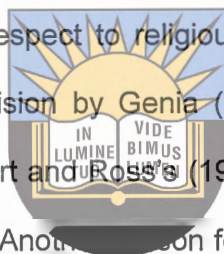
3.3 Instrumentation

Two questionnaires were utilized in this present study, the Religious Orientation Scale (ROS) and the Pressure Inventory (PI). In addition some demographic information regarding age, gender, and religious affiliation was also requested. Categories under religious affiliation included Christianity, Hinduism, Islam, Judaism, Agnostic, Atheist and a category called 'Other' which allowed for participants who did not fall within the

other 6 categories. Both of the instruments used in this study have been created and revised on samples of undergraduate university students making them valid and reliable instruments for use on the sample in this study (Genia, 1993; Weiten, 1988).

3.3.1 The Religious Orientation Scale (ROS)

The Religious Orientation Scale is a 20-item scale designed to measure the extent to which a person is extrinsically or intrinsically religiously orientated. It remains the most frequently used scale with respect to religious orientation (Donahue, 1985; Gorsuch, 1988). The most recent revision by Genia (1993) was used in this study. Genia's version was chosen over Allport and Ross's (1967) version as it demonstrated an increased reliability on both scales. Another reason for Genia's version chosen over Allport is because of its wider applicability but also because it does not include items that were previously found to be problematic. The Cronbach's Alpha coefficients for the intrinsic religious orientation and extrinsic religious orientation subscales as defined by Genia (1993) were 0.85 and 0.78 respectively. The Cronbach's Alpha coefficients for the intrinsic religious orientation and extrinsic religious orientation subscales according to Allport and Ross's (1967) version were 0.79 and 0.62 respectively. Since the revised intrinsic scale consists of nine items, scores range from 9 to 45. Since the extrinsic scale consists of six items, scores range from 6 to 30. Cronbach's Alpha reliability coefficients in the present study for Genia's revised intrinsic and extrinsic scales were 0.74 and 0.75 respectively as can be seen in table 1 below.

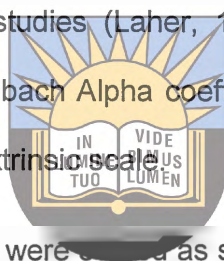


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Table 3.1: Cronbach Alpha coefficients for the Intrinsic and extrinsic religious orientation scale

Subscale	Cronbach Alpha Coefficient
IRO scale	0.74
ERO scale	0.75

The religious orientation scale is a reliable measure for use with South African student population as South African studies (Laher, 1998; Silva, 2000) utilized the Religious Orientation Scale found Cronbach Alpha coefficients between 0.76 and 0.78 for the intrinsic scale and 0.78 for the extrinsic scale.



The intrinsic and extrinsic scales were used as separate scales. Each item was scored on a 5 – point Likert type scale from 1 = strongly disagree to 5 = strongly agree. A prototypic intrinsic item is “My religious beliefs are what really lie behind my whole approach to life,” whereas a representative extrinsic item is “Although I believe in my religion, I feel there are many more important things in life”.

As previously mentioned in the literature about Allport’s fourfold typology in response to religious orientation, the results reported using this typology have been fairly outdated hence this study will not make use of this typology, instead intrinsic and extrinsic religious orientation will be interpreted as two independent constructs along a bipolar continuum, which is consistent with the most current revision of the Religious Orientation Scale by Genia (1993).

3.3.2 The Pressure Inventory (PI)

The Pressure Inventory is a 48-item self-report inventory that lists 42 specific examples of pressure evenly divided among six sectors of interaction, namely Family relations, Work relations, Intimate relations, University relations, Peer relations, and Self-imposed pressures. Added is six fill-in-the-blank items (one for each area) that allow subjects to write in additional examples of personal pressure applicable to them. Subjects are asked to identify pressures experienced in the past three months, and to rate the severity of these pressure on a six-point scale from 0=none to 5=severe (Weiten, 1998).



These subscales were not explicitly defined by Weiten (1988, 1998), but it is possible to briefly define each subscale from the items. Family relations measures perceived interpersonal tension within the family and appears to be more relevant to the younger populations as the emphasis is on parent-child conflict. Work relations measures the perceived strain experienced by the individual in carrying out his or her job as well as in maintaining amenable relationships with co-workers. An intimate-relation is more personal than family relations in that it measures the perceived pressure encountered in relationships with a spouse or significant other. University relations measures the perceived tension experienced by the individual in terms of his or her academic achievement as well as sustaining relationships with staff and students. Peer relations measure the perceived strain in relationships with friends. The last scale looks at self-imposed pressure as opposed to the other five subscales, which look at interpersonal issues. Hence the last subscale measures the perceived tension involved in intrapersonal expectations.

The PI demonstrated reasonable psychometric qualities in the two studies with the scale. In the first study (Weiten, 1988), test-retest reliability over a period of two weeks ($r = 0.72$) was found to be adequate. The PI was compared to the Symptom Checklist – 90R (SCL – 90R), and showed a significant relationship to the SCL-90R, with the correlations ranging from 0.41 to 0.62. A second study compared the PI to the Life Experiences Survey (LES) a life events measure of stress, and similar results to the 1988 study were found. Adequate internal consistency reliability was demonstrated in the present study. Cronbach's Alpha coefficients in table 2 below, for the subscales ranged between 0.69 and 0.80. A Cronbach's Alpha coefficient of 0.90 was obtained for the total pressure score. Thus the Pressure Inventory does appear to be a valid instrument for measuring pressure.



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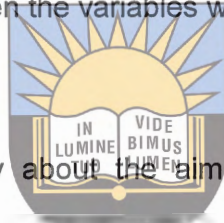
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Table 3.2: Cronbach Alpha Coefficients for the Pressure Inventory Subscales

Subscales	Cronbach Alpha Coefficients
Family Relations	0.69
Work Relations	0.74
Intimate Relations	0.80
University Relations	0.71
Peer Relations	0.80
Self-imposed Pressure	0.77
Total Pressure	0.90

3.5 Data collection Procedures

Permission for the study was obtained from the Department of psychology at the UFH. Students were approach during their Psychology tutorial periods and were asked to participate in the study by completing two questionnaires. These questionnaires will measure the extent to whether participants are extrinsically or intrinsically religiously orientated as well as measure pressure experienced in different aspects of their life. The strength of the relationship between the variables will then be assessed as to effect on pressure.



Students were briefed verbally about the aim of the study. Anonymity and confidentiality were stressed and students were also made aware that participation was voluntary. Students completed the questionnaires and were thanked for their participation.

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3.7 Ethical Considerations

With respect to particular ethical principles to this study, informed consent, confidentiality and anonymity were considered. Before data was collected, respondents were briefed about the purpose of the study and that their participation will be appreciated as it would contribute to a further South African understanding of religious orientation and its relationship to pressure.

Participants were made aware that responding to the questionnaires were voluntary and that they may discontinue their participation at any point if they so choose, without adverse effect. More importantly students were made aware that their responses to the questionnaires will remain confidential and in no way will they be able

to be identified to them as specific demographic details such as gender, age and religious affiliation only, were significant for the study.

Lastly students were debriefed following the culmination of the study.

3.8 Limitations

Due to the use of convenience sampling, results cannot be generalized beyond the population used in this study.

As indicated in the literature, most of the literature conducted on religious orientation used primarily Christian samples. Therefore this study cannot be applied to other religious affiliations such as Islam, Hinduism, and Buddhism as the majority of these samples were religiously affiliated to Christianity (99%).



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3.9 Summary

In conclusion the sample, instrumentations utilized, process of data collection was detailed. The ethical considerations were noted as well as limitations of this study. Chapter four will document the results that were founded.

CHAPTER 4

RESULTS

4.1 Descriptive Statistics

Descriptive statistics for all participants are presented in Table 3. From the table it is evident that at all levels, scores were fairly normally distributed for all the variables.

An examination of skewness coefficients suggests that the scales and subscales utilized were not skewed.



Table 4.1. Descriptive Statistics for intrinsic religious orientation (IRO), extrinsic religious orientation (ERO) and the pressure scales for the Combined Religious sample (N = 100).

	N	Mean	Std. Dev.	Min.	Max.	Skewness
IRO	100	36.2100	5.57289	16.00	46.00	-.610
ERO	100	36.8400	7.41786	17.00	53.00	-.076
PRESSURE	100	113.6200	21.87789	60.00	159.00	-.451
Family	100	19.34	4.513	7	27	-.630
Work	100	19.38	5.581	7	28	-.490
Intimate	100	16.44	5.258	7	28	-.094
University	100	21.38	4.346	11	28	-.331
Peer	100	16.95	5.141	7	27	-.065
Self	100	20.13	5.012	8	28	-.462

Examination of the mean scores for the combined religious group suggest that in this sample, students experience most pressure in terms of their university commitments (M= 21.38), followed by the pressure they impose on themselves (M= 20.13), pressure felt at work (M= 19.38), pressure experienced in terms of family

relations (M= 19.34), pressure experienced in peer relations (M= 16.95), and pressure experienced in terms of intimate relations (M= 16.44)

4.1.1 Religious Orientation Scale

It is evident that from Table 3 that 100 of the responses received on the religious orientation scale a mean intrinsic religious orientation score of 36.21 with a standard deviation 5.57 was obtained. Scores ranged between 16 and 46. The extrinsic religious orientation subscale had a mean score of 36.84 with scores ranging between 17 and 53, and a standard deviation 7.42.



4.1.2 The Pressure Inventory

The statistical analysis of the 100 responses received on the pressure inventory revealed that the scores ranged between 69 and 159 with a mean total pressure score of 113.62 and a standard deviation of 21.88. These scores are higher than those reported by Weiten (1988, 1998) where his study with the scale revealed means of 57.31 (SD=32.69) and 52.65 (SD=28.01). This suggests that South African students may experience more pressure than the American samples.

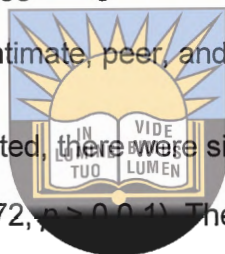
Table 4.2. Correlations between intrinsic religious orientation (IRO), extrinsic religious orientation (ERO) and the pressure scales for the Combined Religious Sample (N = 100).

	PRESSURE	Family	Work	Intimate	University	Peer	Self
IRO Pearson Correlation	.309**	.287**	.335**	.152	.282**	.181	.128
Sig. (2-tailed)	.002	.004	.001	.130	.004	.072	.205
ERO Pearson Correlation	.372**	.139	.395**	.326**	.267**	.168	.316**
Sig. (2-tailed)	.000	.169	.000	.001	.007	.095	.001

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

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

In table 4, in terms of intrinsic religious orientation, there were positive correlations with the overall pressure scale ($r = .309, p > 0.01$) as well as significant correlations for family relations ($r = .287, p > 0.01$), work relations ($r = .335, p > 0.01$), and university relations ($r = .282, p > 0.01$). This suggests that the more intrinsically orientated a person is, the more pressure the person experiences with regard to family, work, and university relations. There were no correlations for intimate relations, peer relations and self-imposed pressure, suggesting that an intrinsically orientated person experiences less pressure in terms of intimate, peer, and self-imposed pressures.



For the extrinsic religious orientated, there were significant positive correlations for overall pressure experienced ($r = .372, p > 0.01$). There were significant correlations for the work relations ($r = .395, p > 0.01$), intimate relations ($r = .326, p > 0.01$), university relations ($r = .267, p > 0.01$), and self-imposed pressures ($r = .316, p > 0.01$), which suggests that the more extrinsically orientated person tends to experience more overall pressure as well as pressures in areas such as work, intimate, university, and self-imposed pressure. There were no correlations for the family and peer relations suggesting that an extrinsic individual experiences less pressure in those relations

There are more positive correlations for the extrinsically orientated individuals as opposed to the intrinsically orientated person. In other words extrinsic individuals experience more pressure in certain areas highlighted above than do intrinsic individuals.

From the correlations reported in table 4, it is evident that certain correlations are significant for both groups. For example, the correlation between extrinsic religious

orientation and university and work relations is significant to the intrinsic religiously orientated as well.

Table 4.3. Correlations between intrinsic religious orientation (IRO), extrinsic religious orientation (ERO) and the pressure scales for the 17 – 22 year age group.

	IRO	ERO	PRESSURE	Family	Work	Intimate	University	Peer	Self
IRO Pearson Correlation	1	.232	.275	.408**	.297*	.067	.358*	.172	.003
IRO Sig. (2-tailed)		.105	.053	.003	.036	.644	.011	.233	.986
ERO Pearson Correlation	.232	1	.331*	.285*	.267*	.421**	.166	.130	.188
ERO Sig. (2-tailed)	.105		.019	.045	.061	.002	.250	.368	.192

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

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

Examining the intrinsic religious orientation scale for 17 – 22 year aged participants, significant correlations were found for the family, work and university relations. On the extrinsic religious orientation scale, significant results were found for overall pressure, family, and intimate relations.

Table 4.4. Correlations between intrinsic religious orientation (IRO), extrinsic religious orientation (ERO) and the pressure scales for the 23 – 27 year age group.

	IRO	ERO	PRESSURE	Family	Work	Intimate	University	Peer	Self
IRO Pearson Correlation	1	.790**	.700**	.630**	.531*	.532*	.448	.722**	.488
Sig. (2-tailed)		.000	.003	.009	.034	.034	.082	.002	.055
ERO Pearson Correlation	.790**	1	.624**	.378	.582*	.391	.513*	.651**	.438
Sig. (2-tailed)	.000		.010	.149	.018	.134	.042	.006	.089

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

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

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Examining the intrinsic religious orientation scale for 23 – 27 year aged

participants, significant correlations were found for overall pressure as well as for the family, work, intimate and peer relations. On the extrinsic religious orientation scale, significant results were found for overall pressure, work, university and peer relations.

Table 4.5. Correlations between intrinsic religious orientation (IRO), extrinsic religious orientation (ERO) and the pressure scales for the 28 – 32 year age group.

	IRO	ERO	PRESSURE	Family	Work	Intimate	University	Peer	Self.
IRO Pearson Correlation	1	.471*	.187	.215	.244	.025	.013	-.009	.218
Sig. (2-tailed)		.031	.418	.349	.287	.915	.956	.968	.342
ERO Pearson Correlation	.471*	1	.491*	.174	.363	.210	.404	.231	.659**
Sig. (2-tailed)	.031		.024	.449	.106	.361	.069	.313	.001

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

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

Examining the intrinsic religious orientation scale for 28 – 32 year aged participants, there were no significant correlations found for any of the pressure subscales. On the extrinsic religious orientation scale, the only significant correlation result founded was for the overall pressure..

Table 4.6. Correlations between intrinsic religious orientation (IRO), extrinsic religious orientation (ERO) and the pressure scales for the 33 – 37 year age group.

	IRO	ERO	PRESSURE	Family	Work	Intimate	University	Peer	Self
IRO Pearson Correlation	1	.728*	-.226	-.547	.258	-.379	.184	-.280	-.367
Sig. (2-tailed)		.041	.590			.354	.662	.502	.372
ERO Pearson Correlation	.728	1	-.122	-.585	.528	-.261	.152	-.417	-.065
Sig. (2-tailed)	.041		.773	.171	.179	.532	.719	.304	.878

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

Examining both the intrinsic religious orientation scale and the extrinsic religious orientation scale for 33 – 37 year aged participants, there were no significant correlations found for any of the pressure subscales.

Table 4.7. Correlations between intrinsic religious orientation (IRO), extrinsic religious orientation (ERO) and the pressure scales for the 38 and above year age group.

	IRO	ERO	PRESSURE	Family	Work.	Intimate	University	Peer	Self
IRO Pearson Correlation	1	.703	.333	.497	.385	.491	.334	.200	.162
IRO Sig. (2-tailed)		.185	.251	.094	.057	.401	.281	.100	.725
ERO Pearson Correlation	.703	1	.931*	.722	.854	.343	.855	.801	.595
ERO Sig. (2-tailed)	.185		.021*	.169	.001	.372	.005	.104	.280

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



Examining the intrinsic religious orientation scale for those aged 38 and above, there were no significant correlations for any of the pressure subscales. On the extrinsic religious orientation scale, the only significant correlation result found was for overall pressure

CHAPTER 5

DISCUSSION

5.1 Descriptive statistics and significant correlations

The purpose of this study was to investigate the relationship between religious orientation and pressure among university students. A sample of N = 100 participants of first year psychology students were surveyed to determine whether they are intrinsically or extrinsically religiously orientated in relation to the types of pressures they are experiencing in their lives.



The results of this study reported few significant differences between intrinsic and extrinsic religious orientation and the different types of pressures experienced. In a similar study conducted by Laher, (2007), similar findings were reported in relation to her study. Based on the literature, one expected significant negative correlations between intrinsic religious orientation and the pressure scales and significant positive correlations between extrinsic religious orientation and the pressure scales. In Laher's, (2007) study, she found that in the case of the Christian sample, and only for certain scales, that these expectations were supported. However in this study positive correlations were reported for the extrinsic religious orientation and some pressure scales which are consistent with the literature. However, positive correlations were also found between intrinsic religious orientation and the pressure scales, and this is not consistent with earlier arguments that suggest that religion, particular intrinsic religious orientation, may provide security and act as a buffer against stress. In addition recent research has found that those who are intrinsically religiously orientated appear to

perceive themselves as having less stress, than those who lack this quality (Pollard & Bates, 2004). On the other hand, it can also be said according to Bourguignon, 1992 religion may also promote stress by insisting on strict conformity to tradition. Much of the research on religion and stress has focused on religion as a coping mechanism, and research is lacking on the role of religion in the appraisal phase of stress (Pargament, 1997; Pargament, Smith, Koenig, & Perez, 1998).

5.2 The effect of age on IRO and ERO



Research has shown that age can have significant effects on both religious orientation and pressure with older people adopting a more intrinsic religious orientation as well as perceiving pressure less intensely than younger people (Masters, Hill, Kircher, Benson, & Fallon, (2004); Van Haitsma, 1986; Wieten, 1988). The finding that religion is more salient in the lives of older than younger people is robust and appears to be due to an increase in importance of religion as individual's age rather than a cohort effect (Johnson, 1995; Koenig, 1997). Correlation statistics were put forward to establish whether this literature is supported by the findings of this study, that older generations adopt a more religious life than the younger generation and thus experiences less stress. According to the results of this study, examining the IRO and ERO scale, significant correlations proved that those aged between 17 to 27 years experienced pressure in light of their family, work, intimate, peer, and university relations. On the opposing side, results for those aged between 28 and above years,

had no significant correlation with the pressure subscales proving that they experience less pressure than the younger counterparts.

5.3 Recommendations for future research

This study explored the concepts of religion and pressure, with the results showing few significant differences between IRO and ERO in relation to pressures felt by the participants. Generally, research has focused on acute mental and physical illness, and it is possible that the daily pressures/stress experienced by students may not be sufficiently stressful for them to turn to religion to cope. Furthermore, Pargament (1997) suggested that merely being religious may not be sufficient for retaining adjustment or protecting against distress when confronted with significant stressors. For future research to take place in understanding how religion shields against stress, it is suggested to investigate how individuals mobilize their religiousness and integrate their beliefs into their coping responses in order to reap the beneficial effects of religiousness.

Much research has gone into the question of whether religion is beneficial, detrimental, or neutral in relation to pressure. Attempts to consider religiosity as an overall positive, negative, or neutral force in people's lives is based on a mistaken conceptualization of religion as uniform in nature. It would be better for future research, to examine *in what way* a person is religious rather than *how* religious he or she is (Hackney & Sanders, 2003).

Apart from exploring Christianity in more depth, there is a need also to explore other religions thoroughly. Furthermore this research can be re-conducted using a larger more diverse sample in terms of religious affiliation, gender, race, and occupation.

In contrast to religion and mental health, physical health, and counseling interventions, little evidence supports the impact of spirituality on mental health, physical health, and interventions (Worthington; Wade; Hight; Ripley; McCullough; Berry, J; Schmitt; Berry, M; Bursley & O'Connor, 2003). It could be suggested that future research look at exploring the concept of spirituality.



5.4 Conclusion

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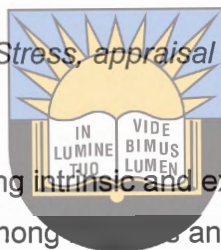
This study has been a preliminary, exploratory study into the relationship of religious orientation on pressure. It should be mentioned that the limitations with regard to sampling in the study, limits generalisability of the results. Despite these limitations, this study has demonstrated that religion does have some part to play in relation to pressure in a South African context. This study can form the basis for future research as different avenues for research has been highlighted. It is recommended that future studies continue to investigate the diversity of religion so that a better determination of what exact influence religious orientation has on pressure.

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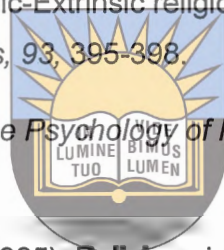
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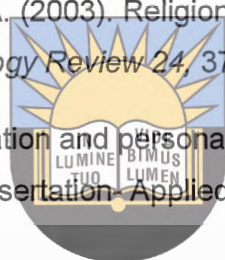
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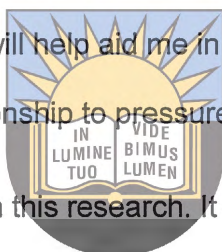


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Appendix (A)

Dear Student,

My name is Thirushni Sam. I am currently completing my Masters at the University of Fort Hare, East London Campus in Counselling Psychology and I am conducting a research into religious orientation and its relationship to pressure. As part of this research I would like to request your responses to the attached questionnaires. Your responses would be valuable, as they will help aid me in developing a South African understanding of Religion and its relationship to pressure.



I would like to invite you to participate in this research. It should take you 45 minutes to complete the questionnaires.

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Please note that at no time will I be able to link an individual to their responses, as no specific personal information is required from you in filling out the questionnaire.

Thank you for considering taking part in this research project.

Regards

Thirushni Sam

Appendix (B)

DEMOGRAPHIC INFORMATION

Please cross appropriate information

1. AGE: _____ years

2. GENDER: MALE FEMALE

3. RELIGIOUS AFFILIATION OF CHOICE: (religion that you currently subscribe to)

<input type="checkbox"/> CHRISTIANITY	<input type="checkbox"/> HINDUISM	<input type="checkbox"/> ISLAM	<input type="checkbox"/> JUDAISM
<input type="checkbox"/> AGNOSTIC	(nothing can be known about the existence of God)		
<input type="checkbox"/> ATHEIST	(does not believe in the existence of God)		
<input type="checkbox"/> OTHER	(please specify) _____		

PRESSURE INVENTORY

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For each item, please circle a number on the right to indicate whether you have experienced that pressure during the last 3 months and to indicate how severe the pressure was. If you have not experienced the pressure described in the item during the last three months – simply circle 0 (zero). This questionnaire does not list all of the pressures that people experience. Thus, for each set of relations, there is a blank item where you can list an editorial example of pressure that you have experienced in the last 3 months in that category of relationships. If you list an additional example of pressures in these blank spaces, please indicate the severity of the pressure by circling one of the numbers between 1 and 5 on the right.

	None	Mild	Moderate	Severe		
Example item. The 3 is circled indicating moderate.	0	1	2	③	4	5

FAMILY RELATIONS – I have been under pressure:

1. To spend more time with my parents or children	0	1	2	3	4	5
2. To conform to my parent's values and expectations	0	1	2	3	4	5
3. To take on a larger share of responsibilities or chores around the house.	0	1	2	3	4	5

	None	Mild	Moderate	Severe		
4. To become more independent from my parents or Family	0	1	2	3	4	5
5. To hide something from my parents (e.g. money problems)	0	1	2	3	4	5
6. To get along better with members of my family	0	1	2	3	4	5
7. To achieve success expected by my parents	0	1	2	3	4	5
8. Other (describe) _____	0	1	2	3	4	5

WORK/UNIVERSITY RELATIONS – I have been under pressure:

9. To get a job, or find a better job	0	1	2	3	4	5
10. To conform to my co-workers' values or expectations	0	1	2	3	4	5
11. To improve the quality of my work to satisfy co-workers or supervisors	0	1	2	3	4	5
12. To get more done at work in less time and to meet numerous deadlines	0	1	2	3	4	5
13. To get along better with co-workers or supervisors	0	1	2	3	4	5
14. To learn new job skills or to take on new work responsibilities	0	1	2	3	4	5
15. To be assertive with my co-workers	0	1	2	3	4	5
16. Other (describe) _____	0	1	2	3	4	5

INTIMATE RELATIONS – I have been under pressure:

17. To find or develop a new intimate relationship	0	1	2	3	4	5
18. To conform to the values or expectations of my spouse, boyfriend or girlfriend	0	1	2	3	4	5
19. To spend more time with my spouse, boyfriend or girlfriend	0	1	2	3	4	5
20. To impress my spouse, boyfriend or girlfriend with my competence, talent or success	0	1	2	3	4	5



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	None	Mild	Moderate	Severe		
21. To engage in sexual encounters more or less frequently	0	1	2	3	4	5
22. To improve the quality of my relationship with my spouse, boyfriend or girlfriend	0	1	2	3	4	5
23. To make a decision about divorce or breaking up with my boyfriend or girlfriend	0	1	2	3	4	5
24. Other (describe) _____	0	1	2	3	4	5

UNIVERSITY RELATIONS – I have been under pressure:

25. To get excellent marks or to improve my marks	0	1	2	3	4	5
26. To make a good impression on my lecturers/tutors	0	1	2	3	4	5
27. To impress my classmates	0	1	2	3	4	5
28. To complete lots of university work in little time	0	1	2	3	4	5
29. To conform to the expectations and values of classmates/lecturers/tutors	0	1	2	3	4	5
30. To make important decisions about my education	0	1	2	3	4	5
31. To earn a scholarship or to earn admission to another University	0	1	2	3	4	5
32. Other (describe) _____	0	1	2	3	4	5



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PEER RELATIONS – I have been under pressure:

33. To develop or find more or better friends	0	1	2	3	4	5
34. To provide help or emotional support to friends	0	1	2	3	4	5
35. To conform to values and expectations of my friends	0	1	2	3	4	5
36. To spend more time with certain friends	0	1	2	3	4	5
37. To maintain "appearance" for friends or neighbors	0	1	2	3	4	5
38. To achieve greater success in the eyes of my friends	0	1	2	3	4	5
39. To be clever or witty to impress others	0	1	2	3	4	5
40. Other (describe) _____	0	1	2	3	4	5

None Mild Moderate Severe

SELF IMPOSED PRESSURE-I have been under pressure:

	None	Mild	Moderate	Severe
41. To make more money or improve my social status	0	1	2	3 4 5
42. To do something to make myself more attractive (such as losing weight, changing hair. etc)	0	1	2	3 4 5
43. To change or improve my personality	0	1	2	3 4 5
44. To improve my self-control over everyday bad habits	0	1	2	3 4 5
45. To inhibit or hide emotions that I don't want others to see	0	1	2	3 4 5
46. To find more private time for myself	0	1	2	3 4 5
47. To be more efficient in my use of personal time	0	1	2	3 4 5
48. Other (describe) _____	0	1	2	3 4 5



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Appendix (C)

RELIGIOUS ORIENTATION SCALE

For each item, please circle a number on the right to indicate whether you agree with the statement or not, with 1 indicating strong disagreement with the item and 5 indicating strong agreement with the item.

	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
Example item indicating agreement with the statement	1	2	3	4	5
1. I try to carry my religion over into all my other dealings in life	1	2	3	4	5
2. What religion offers me most is comfort when sorrows and misfortune strike	1	2	3	4	5
3. Quite often I have been keenly aware of the presence of God or the Divine Being	1	2	3	4	5
4. One reason for my being a congregation member is that such membership helps me to establish myself in the community	1	2	3	4	5
5. My religious beliefs are what really lie behind my whole approach to life	1	2	3	4	5
6. the purpose of prayer is to secure a happy and peaceful life	1	2	3	4	5
7. the prayers I say when I am alone carry as much meaning and personal emotions as those said by me during services	1	2	3	4	5
8. it doesn't matter so much what I believe so long as, I lead a moral life	1	2	3	4	5



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9. if not prevented by unavoidable circumstances, I attend my house of worship	1	2	3	4	5
10. although I am a religious person, I refuse to let religious considerations influence my everyday affairs	1	2	3	4	5
	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
11. If I were to join a religious group I would prefer to join (1) a Bible study group or (2) a social fellowship (circle the appropriate choice and respond accordingly)	1	2	3	4	5
12. My house of worship is most important as a place to formulate good social relations	1	2	3	4	5
13. Religion is especially important to me because it answers many questions about the meaning of life	1	2	3	4	5
14. Although I believe in my religion, I feel there are many more important things in life	1	2	3	4	5
15. I read literature about my faith	1	2	3	4	5
16. I pray chiefly because I have been taught to pray	1	2	3	4	5
17. It is important to me to spend periods of time in private religious thought and meditation	1	2	3	4	5
18. A primary reason for my interest in religion is that my house of worship is a congenial social activity	1	2	3	4	5
19. Occasionally I find it necessary to compromise my religious beliefs in order to protect my social and economic well being	1	2	3	4	5
20. the primary purpose of prayer is to gain relief and protection	1	2	3	4	5



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THANK YOU FOR YOUR CO-OPERATION