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presented by

Jay Murray Terbush, IV

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of the requirements for

Ph.D. degree in Counseling Psychology

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AN INVESTIGATION OF THE RELATIONSHIPS  
BETWEEN ADULT RELIGIOUS ORIENTATION  
AND ERIKSONIAN PSYCHOSOCIAL DEVELOPMENT

by

Jay M. Terbush

A DISSERTATION

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## ABSTRACT

### AN INVESTIGATION OF THE RELATIONSHIPS BETWEEN ADULT RELIGIOUS ORIENTATION AND ERIKSONIAN PSYCHOSOCIAL DEVELOPMENT

by

Jay M. Terbush

This descriptive study investigated the relationship between adult intrinsic (I) and extrinsic (E) religious orientations and the eight psychosocial developmental tasks of Eriksonian theory. Previous research and theory with the religious orientations suggested that I and E were related to other aspects of personality development and developmental processes.

A randomly identified sample of 184 Protestant, religiously-affiliated adults completed the Religious Orientation Scales (ROS); the Assessment of Adult Adjustment Patterns (AAAP), which measures mastery of the eight Eriksonian stage tasks; and a demographic sheet. Subjects' scores on I and E were correlated with scores on the eight AAAP stages. Subjects were divided into four groups: Intrinsic (High I, Low E), Non-religious (Low I, Low E), Extrinsic (Low I, High E), and Indiscriminately Religious (High I, High E). Group means for the eight stages were compared utilizing ANOVAs. Presence or absence of self-reported

religious conversion, disillusionment with religious, and experience profoundly affecting one's life were studied in relation to scores on I and E and AAP stages.

Results support the conclusion that extrinsic religious orientation is a less-psychologically healthy way of being religious than intrinsic orientation. I is positively correlated to Stage 8 (wisdom). E is negatively correlated to Stage 2 (autonomy), Stage 5 (identity), Stage 6 (intimacy), and Stage 8 (wisdom). Intrinsic and Non-religious persons are higher on autonomous functioning (Stage 2) than Extrinsic and Indiscriminately Religious persons. Using a two-group analysis, the Low E group scored better on all eight stage tasks than the High E group. Extrinsic religiousness is related to less-healthy overall psychological or personality development and psychological functioning. The evidence suggests that Intrinsic and Non-religious persons enjoy better psychological functioning across all of the psychosocial characteristics studied. Conversion experience relates to increased I and lowered E. Both a period of disillusionment with one's religious faith and report of an experience profoundly affecting one's view of self, others, and life are related to higher I, lower E, higher Stage 8, and to a generally healthier functioning personality. Reflected-on experiences related to committed intrinsic religion and meaningful, purposeful living.

**DEDICATION**

**To Dad**

**He would be very proud**

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## CHAPTER I

### THE PROBLEM

Throughout the 100-year history of psychology as a science, theorists have held diverse attitudes about religion and religious people. Some psychologists and psychiatrists have regarded religion as generally unhealthy for people. Sigmund Freud, in his classic philosophical piece, The Future of An Illusion (1927), argues that religion is an illusion rising out of human beings' instincts, anxieties, wishes and feelings of helplessness. Freud contended that science and rationality were antithetical to and superior to religion. Interestingly, Albert Ellis (1980) has maintained much the same position, arguing that religiosity is opposed to rationality and emotional health. Ellis' perspective is that religious people are neurotic and he writes forcefully:

Religiosity is in many respects equivalent to irrational thinking and emotional disturbance . . . . The elegant therapeutic solution to emotional problems is to be quite unreligious . . . the less religious they are, the more emotionally healthy they will be. (p. 637)

In contrast to these theorists, Carl Jung had an essentially positive view of religion and spiritual growth broadly defined. Jung (1933) at one point wrote that of his patients over 35 years old ". . . there has not been one whose problem in the last resort was not that of finding a religious outlook on life." (p. 229). Victor Frankl (1962) developed

his concept of logotherapy from observations of survivors of the Holocaust. His own experience in a concentration camp led him to conclude that a will to meaning in life was basic to every person. Frankl believes that persons of faith often not only survive but grow and transcend the difficult, even devastating conditions of life.

Whether religion is healthy or unhealthy is not only a theoretical issue, but an empirical question as well. When one examines the published research which might bear on the broad question of the relationship between religiosity and mental health, the findings, not surprisingly, are mixed. Several reviews of the literature in the area of the psychology of religion have been completed in the last 20 years (Sanua, 1969; Becker, 1971; Stark, 1971; Argyle and Beit-Hallahmi, 1975; Bergin, 1983).

In a recent attempt to clarify the ambiguities present in many of the published studies, Bergin (1983) quantitatively combined the data across samples and studies through a meta-analytic procedure. He combined the results of all the studies he could locate that used at least one measure of religiousness and one measure of psychopathology or adjustment. Overall, his findings were statistically insignificant with only a marginal trend toward the positive effect of religion. When considering the general question of the relationship of religion to mental health, one can only give a highly equivocal answer.

In both the theoretical and empirical literature in the psychology of religion, there has been an increasing tendency to consider religion, not as a single factor, but as a phenomenon made up of several different factors. As Bergin (1983) has suggested, this is similar to the

conceptualization of intelligence as involving a general (G) factor and several specific (S) factors. Religion and its functions in an individual's life are complex and multidimensional. Various researchers have considered different ways of being religious, including religious beliefs, attitudes, practices, rituals, experiences, and affiliations. By considering various ways of being religious, it is possible to then ask if a particular way of being religious is more healthy than any other way.

A variety of conceptual models and research studies have attempted to factor out dimensions of religiousness and to relate those dimensions to measures of psychological health or pathology. One of the most promising frameworks for research is Gordon Allport's (1967) concept of an intrinsic (I) and extrinsic (E) orientation to religion. Meadow and Kahoe (1984), in a recent textbook entitled The Psychology of Religion, state that no other theoretical approach to religion in an individual's life has had a greater impact on the scientific study of the psychology of religion. Allport's Religious Orientation Scale (ROS), based on this I-E orientation distinction, is one of the most frequently used instruments for measuring religiousness in empirical studies (Donahue, 1985).

The use of this intrinsic and extrinsic distinction has generated a body of research (cf. Donahue, 1985) that, in general, supports the idea that religious persons who are extrinsically oriented are less psychologically healthy (i.e., more anxious, fearful, prejudiced) and that intrinsically oriented persons are more healthy (i.e., internal locus of control, sense of purpose in life). The research making use of

the Religious Orientation Scale will be discussed in more detail in Chapter 2.

In addition to approaching religion and attempting to factor out healthy and unhealthy ways of being religious, religion has also been studied as a developmental phenomenon (Allport, 1950; Goldman, 1964; Wilcox, 1980; Droege, 1978; Fowler, 1981; Bergin et al., 1988). Although the authors cited come from a variety of disciplines and theoretical perspectives, each would support the idea that a healthier religiousness is related to healthier personality development. Droege (1978) and Fowler (1981) specifically relate their theory of religious development to Erik Erikson's (1963, 1968) theory of healthy psychosocial development across the lifespan.

One interesting proposal made by Kahoe and Meadow (1981) is that the concept of extrinsic and intrinsic religious orientation is itself a developmental phenomenon. In their article, they state they specifically hope to stimulate research utilizing their developmental conceptual framework. Their model is consistent with Allport's (1950) original ideas about a mature and an immature religious sentiment. Allport and his associates later refined this theoretical idea into the intrinsic (mature) and extrinsic (immature) religious orientation (Allport & Ross, 1967).

### Purpose of This Study

There are two primary purposes of this research project. The first purpose is to study the construct of religious orientation as a developmental phenomenon. This study will attempt to find evidence in



adult religiously affiliated persons that an intrinsic orientation is related to successful sequential mastery of Erikson's psychosocial developmental tasks. Theories of religious development would lead one to expect that a person with an intrinsic orientation would be more highly psychologically developed than a person with either an extrinsic religious orientation or an indiscriminately religious person.

The second purpose of this study is to consider the relationship between religious orientation and psychological health as measured by the level of mastery of each of the individual Eriksonian psychosocial tasks. Both proposals made in the theoretical literature and the results of previous research with the Religious Orientation Scale lead to an expectation that the more a person's religious orientation is intrinsic (I) as opposed to extrinsic (E), the more likely that person is more psychologically healthy. The more successfully an individual resolves the individual Eriksonian developmental tasks, the healthier that person functions both intrapsychically and interpersonally.

#### Need For This Study

In a most general sense, this research project will build on and extend previous research utilizing the Religious Orientation Scale. Several recent psychology of religion textbooks have reviewed and summarized the research concerning the I-E orientation and have encouraged on-going research utilizing this instrument and conceptual framework (cf. Batson and Ventis, 1982; Donahue, 1985; Meadow and Kahoe, 1984). Donahue (1985), in summarizing his review of the I-E literature, writes that ". . . although this research is at an initial stage, the

findings currently available bode well for the potential of the I-E framework as a powerful explanatory tool in personality-social psychology" (p. 416).

This research will contribute to the small but growing body of knowledge in the psychological study of religion and of religious orientation specifically. It will contribute to an understanding of the differences in religious orientation.

A concern of many theorists in the study of religion has been to discriminate between "good" and "bad" religion (Bergin, 1983), that is, psychologically healthy and unhealthy religious faith, life, and practice. By employing a measure of religious orientation, this study will, it is hoped, further explicate the concept of healthy religiousness. This distinction has important implications for personality theory and research, for counselors and other mental health professionals working with religious clients, for religious educators, and for religious professionals (particularly ministers) who influence the directions of growth for religious people.

This study seeks to consider some aspects of the relationship between religion and developmental psychology. Although there have been several theoretical frameworks for religious development and its relationship to other aspects of personality development, there have been very few empirical studies of this hypothesized relationship. The small number of studies of religious adults and psychological developmental phenomena indicate a need both for refinement of theory and additional empirical study.

The concept of religious orientation has been hypothesized to be a developmental phenomena (Kahoe and Meadow, 1981; Chirban, 1980; Gorsuch & Venable, 1983), but to date the systematic study of this hypothesis has been scant (Venable, 1984). By relating religious orientation to a measure of healthy psychosocial development, this study will provide evidence related to this largely untested intuitive notion.

### Overview of Theory

#### Religion and Mental Health

At some point in his or her career, nearly every psychotherapist will treat a psychologically unhealthy, very religious person, for example, some one with a paranoid psychosis manifesting itself in part through grandiose religious delusions, or someone with a strongly restrictive family background who struggles with excessive and inappropriate guilt and intrapunitive thoughts, feelings, or behaviors, or someone who is anxious and rigid with constricted attitudes toward self, others, and life, lacking in spontaneity and an appreciation for the paradoxical in life.

Each of these clinical examples are manifestations of dysfunctional religion, a religious life that is clearly not healthy. William James (1961), in his classic work Varieties of Religious Experience, first published in 1902, described this type of religiousness as a "sick soul." Since James, many theorists have provided conceptual frameworks for describing the "sick soul"; that is, the religion which is psychologically unhealthy. Paul Pruyser's (1977) article entitled "The Seamy Side of Current Religious Beliefs," discusses from a psychodynamic

perspective five ways in which religious beliefs can (though not necessarily must) promote neurotic constriction. Pruyser argues that excessive religiosity can (1) distort reality testing; (2) trigger (or maintain) regression from rational cognitive functioning to fixation on archaic thought patterns and defense mechanisms; (3) lead to inadequate and inappropriate coping with aggression and anger; (4) condone infantile wishes; and (5) encourage helplessness and dependency by surrender of higher order ego functioning and autonomy to authoritarian demands. An experienced clinician could perhaps add to this list some of the following as characteristics of unhealthy religiousness: an overactive conscience or superego; excessive guilt; magical thinking that abrogates personal responsibility; and intolerance for ambiguity, which is symptomatic of narrowness, prejudice, and lack of creativity.

Clearly, pathology in religious beliefs, experiences or practices is related to pathology elsewhere in the life and personality of the individual (cf. Martin & Nichols, 1962; Stark, 1971). This observed relationship between religiousness and personality is one of correlation and not necessarily of causation. Different theoretical formulations might argue a direction of cause and effect. For example, a pathological religion causes pathology in the personality or behavior of the individual, or on the other hand, that unhealthy religion is symptomatic of an unhealthy personality. To put this in question form: Is the person sick because his or her religion is sick? Or is the person's religion sick because the person is? Developmentalists following James (Allport, 1950; Meadow & Kahoe, 1984; Darling, 1976; Aden, 1976) would probably argue the latter perspective, while acknowledging the interaction of

various factors making these questions extraordinarily complex. Though there are various ways to describe it theoretically and empirically, it does seem that there is a "sick soul", that is, an unhealthy way (or ways) of being religious. Later in this chapter and the next, many of these descriptions of unhealthy religiousness will come to be related to extrinsic religious orientation or an indiscriminately pro-religious orientation.

James (1961) also described a more satisfactory way of being religious. One that promoted a general sense of happiness and wellbeing, which he called the "religion of healthy-mindedness" (p. 85). As discussed earlier, some psychological theorists would question whether there is such a construct as a "healthy religion" or that very religious persons could also be mentally/psychologically healthy (Rokeach, 1960; Ellis, 1980). Of course, this issue can be addressed both theoretically and empirically by psychologists and others asking whether or not there is such a thing as healthy religiousness and, if so, what it looks like?

Certainly, the great religious teachers, organized religious groups, and religious people have answered questions about religion and mental health affirmatively. All religions claim to provide their followers with the good life. Even those religions which teach of a life after death, also claim that the benefits to believers are part of this life, not just the after life. In general, religious leaders claim to be teaching the best way to live, and imply, if they do not overtly state, that adherence to their beliefs, practices and lifestyle will promote life satisfaction and, more importantly, mental health.

There are several ways in which one might intuitively expect that religion could enhance personal growth and mental health and could, therefore, be considered as healthy ways of being religious. For example, first of all, religion can provide a philosophy of life, informing life events with a context of meaning and purpose. Religious faith is frequently concerned with ultimate issues of life and death, good and evil, and can address in a comprehensive fashion questions like: Who am I? and Why am I here? Religion can help to make sense of life. Second, most religious philosophies encourage the development of a system of values, ethics and morality, and can provide a framework of principles for living and for human relationships. The concepts of love for others, forgiveness, justice, fairness and equity in human relations are basic to most religions of the world. The teachings of religion address fundamental needs of individuals and societies. Organized religions and informal religious groups, could, it would seem, be healthy in a third way - by fostering a sense of belong and community. These groups could provide a place for the development of relationships with significant other people. The support and security of a religious group and belief in a benevolent god could lead to optimism (hope) and personal peace of mind, particularly in the face of personal suffering or tragedy. Fourth, at least some religious activities and behaviors might be therapeutic and promote psychological health; for example: prayer, meditation and contemplation; the discipline of self-reflection and introspection; and the activity of meeting with others for worship in a quiet, beautiful, and inspirational setting.

Given the claims of religion and both its teachers and adherents, it makes sense to consider scientifically the relationship between being religious and being mentally healthy. This relationship between religious variables and variables of psychological health or pathology is one of the overarching research questions and methodological challenges in the broad subfield called the psychology of religion.

During the decades of the 1930's through the 1950's, it was a common research paradigm to compare religious versus non-religious people on specific psychological measures. Diverse measures of religiousness were used, as were various measures of mental functioning. Reviews of these studies, interestingly, were often contradictory and, at best, inconclusive. Martin and Nichols (1962) summarized a dozen or so studies and conclude that religious believers are conforming, unintelligent, defensive, and emotionally distressed. Davis (1965) concluded that there was fairly consistent support for the claim of better mental health among those who were religious. Sanua (1969), in a review of empirical studies, concluded that most studies show no relationship between religiousness and mental health, and Wright (1972), after a comprehensive analysis of the literature on religion and mental health, felt that it was difficult to find any coherent or meaningful pattern in the data. Treating religiousness as a single dimension or variable produced few, if any, significant results between those who were "religious" and those who were not. Bergin's (1983) meta-analysis of empirical findings relating psychopathology and religiousness was statistically insignificant with only a trend toward "marginal support for a positive effect of religion" (p. 176).

A great many of the studies summarized by these researchers had one element in common: they tended to treat religiousness as a unidimensional concept, as a single unified factor or trait of a person (Bergin, 1983). Often the group being studied was a religiously conservative, Protestant one, but, in general, a person was considered religious or not-religious. In research on human behavior, religiousness does emerge as a single factor, if one studies a large heterogeneous population and limits the measurement of this factor to obvious indices of conformity to institutionalized religious traditions. The early research by Rokeach (1960) on prejudice correlating with very religiously conservative people is an example of the results of this approach to religion.

If, however, one chooses a more homogeneous sample of "religious" persons and includes measures of detailed variations in religiosity, several factors become apparent and the concept of "religion" becomes multi-dimensional. Religious persons (even those of a similar church affiliation or theological persuasion) differ on many aspects of religiousness: participation in organized religious activities, personal religious experiences, the functions of beliefs in one's life, etc. Spilka (1977), for example, found that over half of those persons who said that religion was very important to them indicated that religious beliefs had no real effect on their ideas or their conduct of their everyday lives. Several researchers have attempted to parcel the religious factor in various ways (cf. Spilka, Hood & Gorsuch, 1985; Meadow & Kahoe, 1984). King and Hunt (1972), in recognition of the multidimensional aspects of religious beliefs, commitments and practices,



have developed and validated scales for measuring such aspects of religiousness as creedal assent, church attendance, financial support of a church, religious knowledge, devotionism, orientation to religion and behavioral and cognitive salience. Later research in the area of prejudice differentiated subtypes of very religious people and found that religious people vary widely among themselves on measures of prejudice (Feagin, 1964; Allport & Ross, 1967).

It is against the background of the multidimensionality of religiousness that some theorists and researchers have attempted to formulate theoretical notions of psychologically healthy religion and to generate research to validate the concept.

#### Allport's Mature Religious Sentiment

Although several psychological theorists have written about a healthy religiousness (cf. Fromm, 1950; Clark, 1958; Allen & Spilka, 1967; McConahay & Hough, 1973; Droege, 1978; Fowler, 1981; Batson & Ventis, 1982), this writer has found the work of Allport particularly appealing as a starting point. Allport's (1950) concept of what he originally called the mature religious sentiment, and later labeled the intrinsic religious orientation, became a focus of a significant body of research looking at two distinct ways of being religious, one of which was posited to be more psychologically healthy than the other. A considerable body of research, some of which will be reviewed in Chapter 2, has both supported this theoretical distinction and modified it.

Allport's seminal work, The Individual and His Religion, was published in 1950. In the introduction to this work, he set forth his purpose and his perspective on the subject matter:

I am seeking to trace the full course of religious development in the normally mature and productive personality. I am dealing with the psychology, not with the psychopathology, of religion. The neurotic function of religious belief, its aid as an 'escape from freedom,' is indeed commonly encountered, so commonly that opponents of religion see only this function and declare it to dominate any life that harbors a religious sentiment. With this view I disagree. Many personalities attain a religious view of life without suffering arrested development and without self deception. Indeed it is by virtue of their religious outlook upon life -- expanding as experience expands -- that they are able to build and maintain a mature and well-integrated edifice of personality. (p. xiii)

Allport sets his conceptualization of the mature religious sentiment in the context of both personality theory and developmental psychology. His theory is cognizant that all the human psychological processes are involved (or at least can be involved) in the religiousness of a person. He treats religiousness as a developmental phenomenon which changes as the person changes, and places the mature religious sentiment at the apex of normal personality developmental processes, which begin in early childhood and culminate in adulthood.

Allport maintains that most criticisms of religion are directed at what he calls its "immature forms" (p. 61). Immature religion narrows the interest and experiences of the person. It is either impulsive and self-gratifying or constrictive, repressive and guilt producing. The immature religious sentiment is "unreflective" (p. 62) and provides no context of meaning in which to locate the self. Finally, for Allport, an unhealthy religion, the immature religious sentiment ". . . is not unifying in its effect upon the personality. Excluding, as it does, whole regions of experience, it is spasmodic, segmented, and even when

fanatic in intensity, it is but partially integrative of the personality" (p. 62).

In contrast to this immature religion which has in a sense not grown up, Allport delineated six characteristics of the mature religious sentiment. First, the mature religious sentiment is well differentiated and well thought out. Maturity of religion requires processes of reflection, doubt, honesty, and balance, and represents many successive discriminations and reorganizations. It implies the presence of critical thinking and abstraction which Piaget termed formal operations. There is an openness to new experiences and contradictory evidences as opportunities for reevaluation. In contrast, undifferentiated immature religion accepts uncritically with no reflection what is taught by parents, political ideologues, or religious institutions or leaders. "In compulsive religion there is a defensive ruling out of disturbing evidence" (p. 73).

A second characteristic of the mature religious sentiment is that it is dynamic in spite of its derivative nature. By derivative, Allport means that religiosity arises developmentally from a complex of intrapsychic and interpersonal factors including biological drives, infantile needs, patterns of learning, and socialization. Both James (1961) and Maslow (1964) speak of the "instinctual" bases of religiousness in life. Immature religion, in a sense, gets stuck at this level of basic needs and egocentrism. The focus is on concern for the comfort of self, self-justification, and magical thinking in impulse and wish fulfillment. The religion that is dynamic moves beyond this to become "functionally autonomous" (p. 72); that is, it functions largely

independently of its origins. In a sense, the religious sentiment becomes the master motive, exercising influence over all of the life of the individual and able to direct it toward goals which are no longer wholly self-interest.

The third attribute of mature religion is that it produces a consistent morality. The relationship between religion and morals is often independent, and for Allport this would characterize an immature religiosity. For him, religion should steadily and persistently influence conduct. Not that there will never be moral conflict or difficult choices or morally ambiguous and confusing situations, but the mature religion is able to tolerate the ambiguity without becoming sporadic or impulsive. Though some would not agree with him, Allport believes that "ethical standards are difficult to sustain without idealism; and idealism is difficult to sustain without a myth of Being" (p. 75).

Mature religion is also comprehensive: it brings order to all of life. The religion provides a philosophy which covers all the aspects of existence which are important to the person. Mature religion serves an integrative function as it conveys intelligibility and direction to behavior.

The demand that one's religious sentiment be comprehensive makes for tolerance. One knows that one's life alone does not contain all possible values or all facets of meaning. Other people too have their stake in truth. The religion of maturity makes the affirmation "God is," but only the religion of immaturity will insist, "God is precisely what I say He is." (p. 78)

A fifth characteristic closely related to its comprehensive nature is what Allport discusses as the integral nature of the mature religious

sentiment. This is a life-long process of evolving a harmonious pattern making sense of life experiences. Particularly troublesome is the problem of evil and suffering in human experience, and developing a consistent approach to this problem opens one to greater toleration for the ambiguous and paradoxical in life.

The final characteristic of mature religion is that it is fundamentally heuristic. Religious faith is held tentatively and subject to revision, but it serves as the person's "working hypothesis" (p. 81). Religion helps the person find answers to life's tough questions, but ultimately those who have faith are risk takers. In mature religion, doubt is possible concerning the tenets of the faith and certainty is impossible. Certitude is sufficient for guiding one's life.

### Religious Orientations

Following the publication of The Individual and His Religion (1950), one of Allport's primary research interests was the relationship between religion and ethnic prejudice (Allport, 1954, 1959, 1963, 1966; Allport & Ross, 1967). This interest encouraged Allport and his associates to refine the theoretical constructs of mature and immature religion and to attempt to operationalize them for measurement purposes. Although in earlier formulations Allport (1954) discusses "two kinds of religion," which Allport labeled "interiorized" and "institutionalized", and their different ways of manifesting prejudice, a sharpening of these constructs occurred toward seeing two ways of being religious or two different religious outlooks (Allport, 1959, 1966, 1967). The labels intrinsic (I) and extrinsic (E) were first introduced in 1959. In two articles

published shortly before his death, "The Religious Context of Prejudice" (1966) and "Personal Religious Orientation and Prejudice" (Allport & Ross, 1967), Allport gives the most succinct discussion of these two different "orientations" or "motivations" (p. 434). What was being described is not "religion" per se, or certain behaviors that could be classified as religious, but rather the motivation associated with a person's religious practices or beliefs.

Allport conceptualized I and E as opposite ends of a bipolar continuum. Intrinsic and extrinsic religious orientations are "two polar types of religious affiliation" (Allport, 1966, p. 451). Perhaps, in part, because of the earlier developmental framework, it was hypothesized that "most people, if they profess religion at all, fall upon a continuum between these two poles" (Allport & Ross, 1967, p. 434). The simplest and most often quoted way to characterize this intrinsic and extrinsic distinction is that "the extrinsically motivated person uses his religion, whereas the intrinsically motivated lives his religion" (Allport & Ross, 1967, p. 434).

Several extended quotations will serve to define these two religious orientations. Regarding the extrinsic orientation, Allport (1959) writes,

. . . religion is not the master motive in the life. It plays an instrumental role only. It serves and rationalizes assorted forms of self-interest. In such a life, the full creed and teaching of religion are not adopted. The person does not serve his religion; it is subordinated to serve him (p. 264).

About the intrinsically oriented religious life, he writes

. . . dogma is tempered with humility . . . . A religious sentiment of this sort floods the whole life with motivation and meaning. It is no longer limited to single segments of self-interest. And only in such a widened religious sentiment does the teaching of brotherhood take root. (1959, p. 265)

Allport (1966) explained that he borrowed from axiology the concepts of extrinsic and intrinsic values because the distinction helped to separate religiously affiliated people whose church membership "supports and serves other non-religious ends" from those people "for whom religion is an end in itself -- a final, not instrumental, good" (p. 454). In contrast to the intrinsic religious person who is oriented to faith as a supreme, integrating value in life, which leads to unification of being and transcendence of self, the extrinsic type have

. . . no true association with the religious function of the church . . . they feel no obligation to attend church regularly nor to integrate religion into their way of life . . . most extrinsics are casual and peripheral churchgoers . . . a type of religion that is strictly utilitarian: useful for the self in granting safety, social standing, solace, and endorsement of one's chosen way of life. (Allport, 1966, p. 454-5)

Allport and Ross (1967) give the following as formal definitions of these two orientations:

Extrinsic orientation: Persons with this orientation are disposed to use religion for their own ends. The term is borrowed from axiology, to designate an interest that is held because it serves other, more ultimate interests. Extrinsic values are always instrumental and utilitarian. Persons with this orientation may find religion useful in a variety of ways -- to provide security and solace, sociability and distraction, status and self-justification. The embraced creed is lightly held or else selectively shaped to fit more primary needs. In theological terms, the extrinsic type turns to God, but without turning away from self.

Intrinsic orientation: Persons with this orientation find their master motive in religion. Other needs, strong as they may be, are regarded as of less ultimate significance, and they are, so far as possible brought into harmony with the religious beliefs and prescriptions. Having embraced a creed the individual endeavors to internalize it and follow it fully. It is in this sense that he lives his religion. (p. 434)

These definitional ideas about religious orientation, while clearly related to the earlier construct of ~~mature-immature~~ religion, have been refined, and of necessity, simplified. Table 1.1 lists some of the key concepts related to each of these orientations. Consistent throughout the development of this religious orientation was an understanding that the intrinsic religious orientation was the preferable orientation, the way of being religious that was also more psychologically healthy (Donahue, 1985a).

In research with religious orientation and prejudice, Allport and others developed scales to measure "religious orientation" (Wilson, 1960; Feagin, 1964; Allport & Ross, 1967). They had noted repeated evidence in the research on prejudice that some of the very religiously conservative people were consistently free of prejudice, open, liberal socially and democratic as opposed to authoritarian. They hypothesized that differences in religious orientation were being confounded in studies treating religiousness as a simple single factor. In a series of studies using scales to measure prejudice and religious orientation, these researchers demonstrated significant differences in prejudice for the two religious orientations. Intrinsically religious persons were significantly less prejudiced than extrinsically religious persons, and the extrinsically religious persons accounted for most of the variance



Table 1.1  
Components Associated with Intrinsic and Extrinsic Religious  
Orientations\*

<u>Intrinsic</u>	<u>Extrinsic</u>
1. Relates to all of life, floods life with meaning, other needs brought into harmony with religious beliefs.	1. Compartmentalized, not integrated into life.
2. Ultimate, master motive, meaning endowing, integrative, unifying, religion as "end", self- transcending.	2. Instrumental, utilitarian, religion as means, self-serving.
3. Unprejudiced, tolerant, universal.	3. Prejudiced, exclusionary of those unlike oneself.
4. Mature, makes for mental health.	4. Immature, dependent, seeks comfort, security, defensive.
5. Regular church attendance, involvement for fellowship and deeper values of faith.	5. Irregular church attendance, affiliation for sociability and status.

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\* Chart based on Hunt and King (1971) pp. 342-343; and Donahue (1985a), p. 401.

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between religious persons and non-religious persons (cf. Feagin, 1964; Allport & Ross, 1967). Of interest was the finding that the I and E orientations, as measured by a refined Religious Orientation Scale, were not bipolar but were separate and interactive (Feagin, 1964). Allport had expected religious people to be relatively consistently either extrinsic or intrinsic, but found some subjects "provokingly inconsistent. They persist in endorsing any or all items that to them seem favorable to religion in any sense" (Allport & Ross, 1967, p. 437). He called these

persons "indiscriminately religious", and they were the most prejudiced of all.

This partitioning of religious people into intrinsic, extrinsic and indiscriminately religious categories and the concept of greater or lesser degrees of the intrinsic and extrinsic religious orientations has generated a large body of research that, in general, supports the original ideal of Allport that one way of being religious is more healthy than the other. Support for this statement will be presented in the literature review in Chapter Two. Suffice it at this point to quote the conclusion of Meadow and Kahoe (1984) after a review of many of the empirical studies utilizing religious orientation as a variable.

The disorder-health distinction is evident among correlates of intrinsic and extrinsic religious orientations. In general, the intrinsic orientation has been positively related to variables that psychologists have deemed to indicate positive personality attributes (internal control, responsibility, achievement). Similarly, it has either been independent of or negatively related to most undesirable psychological traits (prejudice, dogmatism, extrinsic motivation). Likewise, extrinsic religion tends to be related to such negative personality characteristics as authoritarianism, dogmatism, external control, and lower levels of education and academic aptitude. (p. 298)

### Religious Orientation in Developmental Perspective

Allport himself never explicitly stated a developmental relationship between extrinsic and intrinsic religious orientation. However, the evolution of the I-E distinctions from the earlier "mature-immature religious" developmental scheme would imply that extrinsic is a less mature and intrinsic a more mature, highly developed orientation toward religious life. Several researchers have noted "the developmental

sequence implied in Allport's writings" on the I-E distinction (Hood, 1985, p. 415; cf. Brown, 1964; Kahoe & Meadow, 1981; Gorsuch & Venable, 1983; Spilka et al., 1985). Gorsuch and Venable (1983), noting that the sequencing of I after E developmentally is "implied in much of the I-E literature" (p. 186), revised the Religious Orientation Scale to allow its use with children and adolescents. According to Hood (1985), Allport repeatedly emphasized "intrinsic faith in a hard won process of maturity . . . achieved relatively late in life, as a final overcoming . . . of earlier selfish, extrinsic commitments" (p. 416).

In its simplest formulation, an extrinsic orientation would precede an intrinsic orientation, with the intrinsic orientation the developmental achievement of a mature personality (Hood, 1985; Gorsuch & Venable, 1983). One would then posit either a chronological age relationship between E and I (with I increasing and E decreasing as a function of age) or else a relationship between E and I and other developmental processes and constructs. In this latter understanding, an intrinsic religious faith would grow out of and be related to more healthy psychological developmental experiences, while an extrinsic religious orientation would be related to less successful (less healthy, more dysfunctional) psychosocial developmental processes.

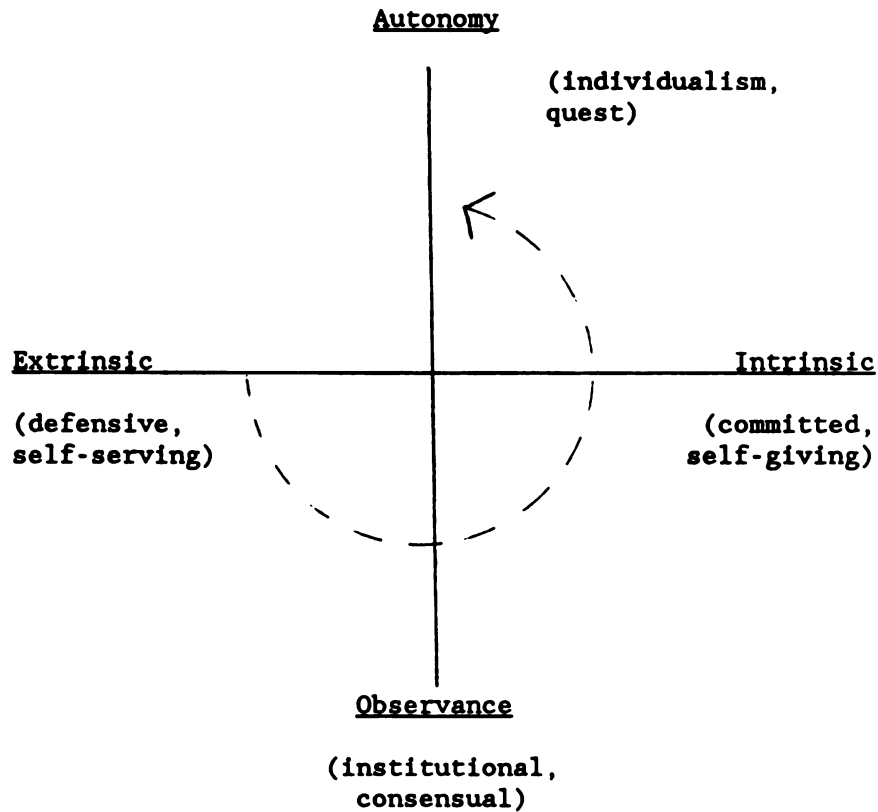
Kahoe and Meadow (1981) have proposed a model which combines the idea of religious orientation as discussed here with some related conceptualizations that have been proposed as alternatives or modifications to the intrinsic-extrinsic religious orientations (Allen & Spilka, 1967; Fleck, 1976; Batson, 1976). These various conceptualizations have been combined by Kahoe and Meadow into a

two-dimensional developmental model. Their model is reproduced in Figure 1.

This model is actually a revision of a two-dimensional model of religious faith proposed by Brown (1964). One dimension of the Brown model used the intrinsic and extrinsic religious orientations of Allport, whereas the other dimension contrasted an outward orientation to institutional religion and an inward orientation to individual conscience and judgment. In their discussion of this revised model, Kahoe and Meadow (1981) attempt to show how persons would be characterized at any particular point on the model in terms of their religious development. They hypothesize that all persons move through (or have the potential to move through) the two dimensional space of the model in a specific order: extrinsic religiousness ---> observance religiousness ---> intrinsic religiousness ---> autonomous religiousness.

Kahoe and Meadow believe, as did Allport, that while a mature religion may become intrinsically motivated by its own inner drives, religious faith and practices are extrinsic in their origins. They recall Allport's (1950) characterization of mature religion as "derivative yet dynamic" (p. 71). Religion in the life of the individual and for humankind is derived from basic fears and anxieties, whether physical, psychological, social or existential. Religion for the child (or the adult who has never grown up), in addition to its habitual elements of belief and practice, is essentially egocentric and self serving.

Because of involvement with an institution and its religious system, most religious people will develop an observance (or institutional,




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Figure 1: Hypothesized process of development within religious orientation dimensions (source: Kahoe and Meadow, 1981, p. 10)

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\*-----> indicates the direction of movement.

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consensual) orientation. At this level, involvement with the religious institution and its activities and identification with this social group and its defining religious system become important. Loyalty to the institution or group is fostered by the individual's needs being met within that context (i.e., loneliness, anxiety about death, etc.). Kahoe and Meadow distinguish the social or affiliative activities of observance religion, which are closer to the extrinsic orientation, from the conformity to the doctrinal or belief system, which is more closely

aligned with the intrinsic orientation. The social aspect (at least as an end in itself) they regard as more primitive psychologically. The relative strength of either of these aspects "may be influenced by both the psychological characteristics of the individual and the emphases of the religious institution. It may also be affected by the individual's stage of religious development" (Meadow & Kahoe, 1981, p. 10). The shift to an observance religion means that the person must move away from the purely self-serving extrinsic orientation.

Some people, of course, will not continue through the developmental paradigm, but for those who do, there is a further turning away from self, as beliefs and values become more internalized and lived out. All of the higher religions advocate that their adherents give themselves in devotion to religious ideals and causes. However, many factors, according to Kahoe and Meadow, mitigate against a person developing an intrinsic orientation. Some religious groups or leaders may not encourage this growth process, while "individual differences" (p. 11) may make it less likely that a particular person becomes intrinsically oriented. Kahoe and Meadow (p. 11) state, "A general disposition toward intrinsic motivation may be a precondition to intrinsic religiousness." The implication is that religious orientation is strongly related to other personality or psychosocial developmental variables.

The final step in this developmental scheme is autonomous religiousness, an orientation that few people reach, in part because this orientation tends to be antagonistic to the interests of organized religion. This is particularly the case when the institutional religion requires conformity to rules and regulations and emphasizes externalized

authority. An intense personal religious experience, greater abstract reasoning ability, higher education and training in critical thinking and self-reflective disciplines may be related to development of this autonomous religiousness. Persons who need the security of and identification with the religious group and/or its beliefs and practices, will be unlikely to move toward this most independent, functionally autonomous of religious orientations.

Kahoe and Meadow (1981) see religious development as a continuum with specific "psychometrically identifiable and 'characteristic' orientations along the way" (p. 15). They avoid utilizing the label "stages" because of the implication that religious experience functions uniquely at each stage. Though acknowledging the difficulty of depicting this, they believe that each new level in this model encompasses all of the previous levels, suggesting that a three-dimensional model with an upward spiral would be better at illustrating this encompassing of earlier levels. In this regard, this model is similar to Erikson's epigenetic theory of psychosocial development in which higher stages build on and in some ways recapitulate the developmental tasks of earlier stages.

Although specifically stating that they hope their model will stimulate research, these authors do not present empirical evidence in support of the model. They hypothesize that this development schema does have "an intuitive validity" (p. 12) in part because of its convergence with several other developmental theorists. Both in the original article (1981) and in their textbook (1984), Kahoe and Meadow briefly discuss conceptual parallels between their theory of religious development and other theorists, including Loevinger, Kohlberg, Maslow, Erikson, and

Fowler. In Table 1.2, an attempt is made to diagrammatically represent the relationships between their model of religious development and these other developmental frameworks. Table 1.3 presents the eight stages of Erikson's theory, the task of each stage, the virtue or strength which results from a positive resolution of the task, and a dimension of religious faith related to each of the eight stages. After a consideration of some of these hypothesized relationships, Meadow and Kahoe (1984) state, "The developmental levels of our model almost surely interact with a religious person's general personality development -- especially in cognitive stages, moral judgment, ego development, motivational style and socialization." (p. 327)

### Summary

The concept of religious orientation has been discussed with attention to two separate but related emphases in the theoretical literature. The first emphasis is the relative psychological health of an intrinsic and an extrinsic religious orientation. The theory posits that an intrinsic religious orientation is more healthy and an extrinsic religious orientation less psychologically healthy. The second emphasis in the preceding theoretical discussion was on a developmental sequencing for the two religious orientations with an extrinsic orientation being an earlier developmental phenomenon and an intrinsic orientation being a later, more mature developmental phenomenon. This theoretical overview has provided a basis for hypothesizing the relationships between intrinsic and extrinsic religious orientations and normal (or healthy) psychosocial developmental tasks.



Table 1.2

Hypothesized Relationships of Models of Development

<u>Age</u>	<u>Erikson</u> Psychosocial Development	<u>Fowler</u> Faith Development	<u>Kohlberg</u> Moral Development	<u>Loevinger</u> Ego Development	<u>Maslow</u> Needs Hierarchy	<u>Kahoe/Meadow</u> Religious Development
0-2	I. Trust	Undifferen- tiated Faith		Symbiotic	Physiologi- cal/Safety Needs	Extrinsic
2-6	II. Autonomy	1) Intuitive- projective faith	Preconven- tional level	Impulsive Self- Protective	Love and Belonging	
	III. Initiative					
7-12	IV. Industry	2. Mythic- literal faith	1. Heterono- mous morality (punishment and obedience  2. Instrumental Exchange (hedonistic)	Conformist	Self Esteem (other)	Observance
13-20	V. Identity	3. Synthetic- Conventional faith	Conventional level  3. Mutual interpersonal relations ("good boy"/ "nice girl")	Self Aware	Self Esteem (self)	Intrinsic
20-35	VI. Intimacy	4. Individua- tive faith	4. Social system and conscience (law and order)	Conscien- tious	Self- Actualiza- tion	
35-60	VII. Genera- tivity	5. Conjunc- tive faith	Post conven- tional principled level  5. Social Contract/ individual rights	Individu- alistic  Autonomous	Meta Needs	Autonomy
60+	VIII. Wisdom	6. Universal- izing faith	6. Universal ethical principles/ loyalty to being	Integrated		

Sources: Meadow & Kahoe (1984), pp. 65, 325; and Fowler (1981), pp. 52, 113.

Table 1.3  
Erikson's Psychosocial Stages and Faith Dimensions

<u>Stage</u>	<u>Trust or Conflict</u>	<u>Virtue or Strength</u>	<u>Faith</u>
1. Trust or mistrust	Trust own perceptions and other goodness	Hope	Trust
2. Autonomy or shame/doubt	Gain impulse control	Will/power	Courage
3. Initiative or guilt	Self-guidance and self-punishment	Purpose/direction	Obedience
4. Industry or inferiority	Acquire rudiments of technology	Competence, skill	Assent
5. Identity or role confusion	Integrate all one's personal identifications into one	Devotion, fidelity	Identity
6. Intimacy or isolation	Make commitments, accept obligations	Love, bonding	Self-surrender
7. Generativity or stagnation	Become teacher and guide of next generation	Care, production	Unconditional caring
8. Integrity or despair	Acquire post-narcissistic love of the human ego	Wisdom renunciation	Unconditional acceptance

Sources: Aden (1976), Erikson (1963, 1968), and Meadow & Kahoe (1984)

#### Statement of Hypotheses in Broad Research Form

The following are the major hypotheses to be tested in this study. At present, these hypotheses will be stated in a broad, general way, to give

the reader an idea of the direction the research will take and to guide the reader through the material in the early chapters of this dissertation. In Chapter 3 the research hypotheses will be restated in a more detailed and testable form.

- I. The Intrinsic Religious Orientation will be positively related to an adult's mastery of the Eriksonian psychosocial developmental tasks. The Extrinsic Religious Orientation will be negatively related to an adult's mastery of the Eriksonian psychosocial developmental tasks.
- II. The Intrinsic Religious Orientation will be positively correlated with an adult's resolution of the individual Eriksonian psychosocial developmental tasks. The Extrinsic Religious orientation will be negatively correlated to an adult's resolution of the Eriksonian psychosocial developmental tasks.
- III. Persons who are Intrinsically Religious will master in order more of the Eriksonian psychosocial developmental tasks than persons who are Extrinsically Religious or Indiscriminately Religious.
- IV. Persons who are Intrinsically Religious will demonstrate better resolution of each of the individual Eriksonian psychosocial developmental tasks than persons who are Extrinsically Religious or Indiscriminately Religious.

### Overview of the Dissertation

In Chapter 2, there is a review of the empirical literature involving religious orientations with a focus on studies that utilized the Religious Orientation Scales and other measures of psychological health

or development. Because of its bearing on this study, the research will be summarized that relates to correlates of I and E, as well as correlates using a four-fold typology based on scores on the two scales.

Chapter 3 will present the design of this study including sampling procedures and a description of the demographic sheet and the two instruments to be used (the Religious Orientation Scales and the Assessment of Adult Adjustment Patterns). The hypotheses will be restated in testable form and a specification of the data analysis procedures will be given.

In Chapter 4, the results of the analysis of the data will be presented. Each hypothesis will be stated with a statement of acceptance or rejection of the null hypothesis.

Chapter 5 will discuss the results of this study, drawing conclusions and implications for future research.

## CHAPTER II

### LITERATURE REVIEW

#### Introduction

This chapter will review the empirical studies utilizing the Religious Orientation Scale (ROS). It will begin with a discussion of the orthogonal nature of the two subscales I and E and two different analytical procedures that have been used by researchers: correlational studies and typology studies. Research will then be summarized under two broad headings relating religious orientations to psychological health and to developmental phenomena.

#### Religious Orientation: Bipolar or Orthogonal?

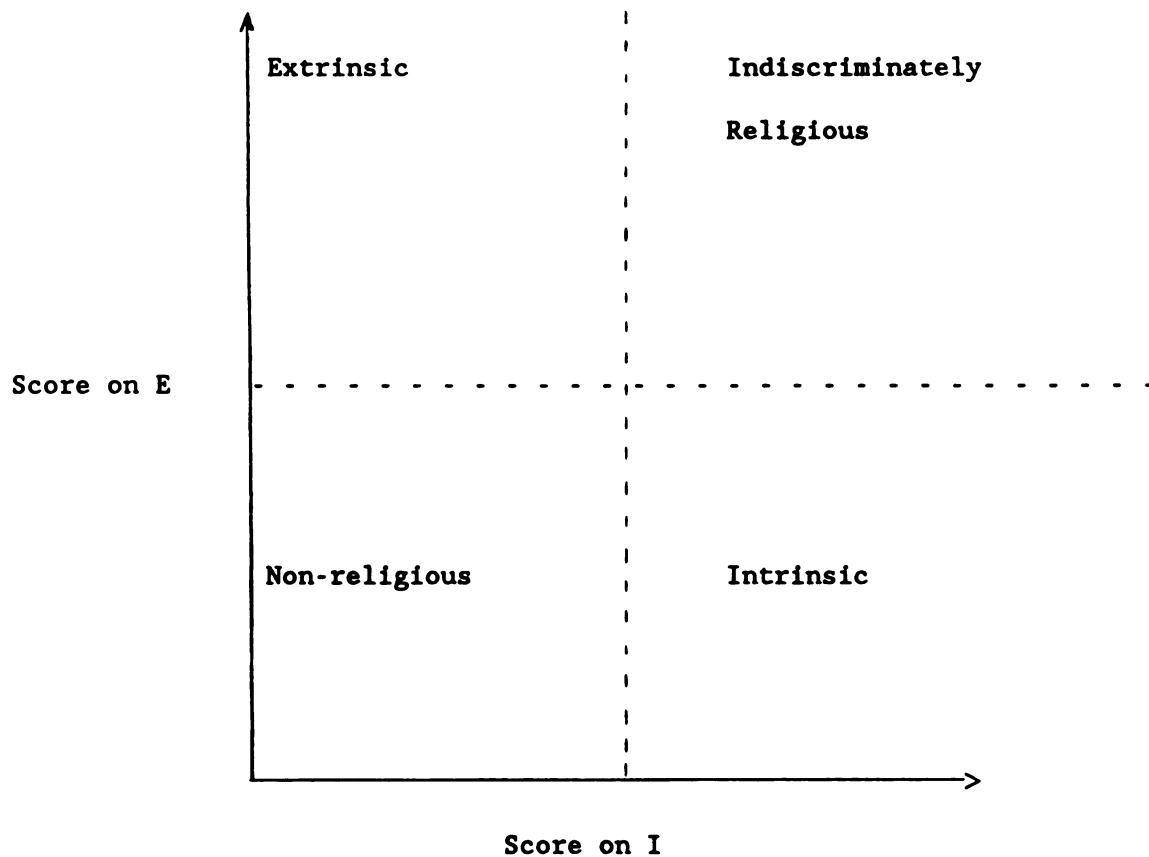
Allport's original theoretical conceptions of intrinsic and extrinsic religious orientations had placed these two constructs as opposite ends of a continuum (1950, 1954, 1959, 1963). The early empirical studies utilizing this conceptualization initially attempted to measure these unidimensionally (Wilson, 1960; Feagin, 1964) to differentiate between persons who were "religious." This attempt was based on Allport's (1967) assertion, "To know a person is in some sense 'religious' is not as important as to know the role religions plays in the economy of his life" (p. 442).

The earliest research, however, casts doubt on the construct validity of the bipolar conception of I and E. Feagin (1964), in a factor analysis of his religious orientation items, reported loadings on two separate, orthogonal scales. He concluded that Allport's hypothesis of different ways of being religious was "substantiated" but that the I-E orientations were separate dimensions, not unidimensional, and that the extrinsic subscale was somewhat more useful than the intrinsic scale at making the differentiation. Virtually all of the studies since (cf. Allport & Ross, 1967; Hunt & King, 1971; Hood, 1970) have corroborated this finding that I and E are separate orientations. Interestingly, Allport himself began to notice a subgroup of religious people he called "muddleheads" because they "refuse to conform to our neat religious logic" (1966, p. 6). Despite Allport's attempt to construct a scale to represent polar opposites, these persons agreed with items on both ends of the continuum.

It had been expected that I and E would be strongly negatively correlated and, therefore, bipolar; but, in fact, Allport and Ross (1967) found I and E only somewhat negatively correlated. Donahue (1985a), in a meta-analysis of reported correlations between I and E, calculated an insignificant correlation of  $-.06$  (although the range is from  $.24$  to  $-.58$ ). Further, Donahue presented data suggestive that the population value of the E-I correlation is close to zero (p. 404). Apparently when the sample consists of evangelical or very conservative religious persons the correlation becomes strongly negative (cf. Dodrill et al., 1973; Bolt, 1977; Shoemaker & Bolt, 1977) but when the sample is more broad based the observed I-E correlation is low (cf. Hoge & Carroll, 1973; Patrick, 1979).

If I and E are uncorrelated in the general population, then I and E are representing orthogonal constructs.

In response to his empirical findings, Allport modified his bipolar approach making it a fourfold typology (Allport & Ross, 1967; Hood, 1970). In this approach, I and E are treated as two separate unipolar dimensions of religious orientation and can be considered simultaneously to generate a fourfold classification: Intrinsics (high I, low E), Extrinsics (low I, high E), Indiscriminately Religious (high I, high E), and Indiscriminately Anti-religious (henceforth "Non-religious") (low I, low E). Diagrammatically, this typology is:



Hood (1970) proposed forming the above categories on the basis of median splits from the research sample. This is the procedure most researches have used who have incorporated this typology into this studies. As will be discussed, this distinction has produced some interesting results, although for this researcher the category that has been labeled "indiscriminately anti-religious" is both conceptually and empirically mislabeled. Better and probably less affectively laden is "non-religious" or perhaps "less-interested-in-religion." Unless the sample is very broad, it is inaccurate to label those persons who score relatively lower on both I and E as "anti-religious." Bergin (1987) noted that the fourfold typology made no sense on his sample of very religiously active students who scored very high on I and very low on E. Though much of the research that is summarized here will report a "non-religious" category, this caution must be kept in mind when interpreting the findings.

Research using the Religious Orientation Scales has provided those interested in the psychology of religion with a useful tool for discriminating between differing ways of being religious. Some researchers have chosen to subdivided their sample into two or more of the subgroups of the Hood-Allport fourfold typology. Others have used the I and E subscales and correlated these measures with other measures. Still other studies have utilized the ROS in both ways.



## Religious Orientations and Psychological Health

### Correlational Studies of I and E

Two recent correlational studies illustrate the value of separately relating the I and E scales to other psychological constructs and also indicate some of the weaknesses of much of the I-E research literature. Baker and Gorsuch (1982) considered the question of the relationship between religious orientation and trait anxiety as measured by the IPAT Anxiety Scale and five of its subscales. They cited confusion in the literature over the relationship between religion and anxiety, with some studies showing a positive relationship between religious persons and anxiety and other studies showing no relationship. They argued that the discriminant power of the ROS and previous research would lead to prediction of significant differences between the two religious orientations and trait anxiety. Their results provided strong support for their prediction. On the total scale trait anxiety was significantly negatively correlated with intrinsic ( $-.33$ ) and significantly positively correlated with extrinsic ( $.35$ ). Three of the five subscales repeated these statistically significant findings, while the other two had trends in the same directions. A measure of state anxiety showed no significant results. Baker and Gorsuch argued that trait anxiety manifesting itself in suspiciousness of others, frustration intolerance, guilt and a weakened ego unable to balance emotional forces within oneself is an indication of less psychological adjustment for those with a more extrinsic orientation. Intrinsicness, they argued, is apparently associated with greater ego strength, less insecurity, and less anxiety.

There are several weaknesses in the report of this study. There is no clear description of the sample. Subjects are described as "taken from a religious wilderness camping organization . . . which offers stressful backpacking trips" (p. 120). Age, denominational affiliation, gender, and any other relevant demographic data are omitted, despite the fact that these may have an influence on the results. A more serious weakness is that Baker and Gorsuch do not report the scores on the I and E subscales. Though they indicate the two scales are significantly negatively correlated ( $-.32$ ), they do not provide mean, median, or standard deviation for either scale. This omission (common to many of the published studies using ROS) make comparisons across studies much less possible. Given the strong negative correlation of I and E they report, it is likely that I was fairly high and E fairly low, meaning that the correlations performed were with a very range-restricted measure. This latter criticism is also true for the next study.

Bergin et al. (1987) also approached their study against the backdrop of previous research suggestions that, in general, I is related to better psychological functioning and E is negatively related to better psychological functioning. They studied undergraduate psychology students at a Mormon college giving them, in addition to the ROS, the California Personality Inventory, the Beck Depression Inventory, the Ellis Irrational Beliefs Test, the Manifest Anxiety Scale, and the Self Control Schedule. Different classes of students were given somewhat different combinations of these measures, so that sample sizes vary across the instruments. A detailed discussion of all the correlational results is beyond the scope of this summary. However, in general, I was

negatively correlated with anxiety and positively correlated with self control and such other characteristics as sense of well being, responsibility, tolerance, and intellectual efficiency (subscales of the CPI). E was positively correlated with anxiety and negatively correlated with psychologically more healthy traits such as sociability, sense of well being, responsibility, tolerance, achievement, and intellectual efficiency. A striking result as one examines the non-significant trends is that most of them consistently show I tending to correlate with positive personality traits, whereas E shows the opposite tendency.

This study has several weaknesses that temper the generalizability of the results. For several of the subgroups, a small sample size of 32 was used. In addition, the use of undergraduates and the sampling of a very religiously committed and conservative group moderate any broad conclusions drawn from this study. Bergin et al. do report the mean I (38) and E (24) scores, but without standard deviations on either scale. These means are very high for I and very low for E, indicating a strong negative correlation between them and a very restricted range of scores on the ROS. In discussing this sample, Bergin et al. are careful to apply the results only to an intrinsically religious orientation, but their assumption "that the magnitude of the reported correlations was underestimated due to the restricted range of scores on the I and E subscales" (p. 199), while possible, is one that requires empirical validation. Bergin et al. had originally intended to also classify their samples using the fourfold typology. However, using the midpoints of the two subscales as the dividing point, which is the procedure Donahue (1985a) recommends, yielded 98.6% of their sample being classified as

intrinsic. Further, because their subjects' scores were so skewed on both I and E, the use of the observed medians of this sample to form the fourfold classification would have tended to "grossly distort the meaning of the classifications" (p. 199). This writer has argued above that the labels of the four quadrants, especially "non-religious," are applicable only when the sample is very broad based.

A detailed summary of all of the other studies which considered correlations between I and E as separate, unipolar dimensions is beyond the scope of this literature review. However, some generalizations can be made that are relevant to the present study. When the relationship between other measures of religiousness and I and E are made, a consistent pattern is observed. Whether the variable is self-reported importance of religion (cf. Batson, 1976) or religious beliefs, practices, and experiences (cf. Dodrill et al., 1978; Spilka et al., 1968; Hood, 1978), I is significantly more positively correlated than is E. This is what would be expected on the basis of the conceptual and empirical definitions of E as a type of religious commitment that treats religion as only one of the many influences in life and seeks religious identification as social support or for its own comfort.

Allport's original research interest was the construct of prejudice and its relation to religious people. A number of studies have considered this relationship. Donahue (1985a), in summarizing all of the available studies on prejudice, found mean correlations with I of  $-.05$  and with E of  $.34$  (p. 406). For the extrinsic orientation, this is supportive of Allport's (1966) conceptualization that E would be related to prejudice. But I is essentially uncorrelated with measures of

prejudice, while Allport's writings expected a negative correlation. A similar prediction based on Allport's writings would be made for dogmatism and its relationship to I and E. The implication would be that I would be openminded and E relative more closeminded, dogmatic, and authoritarian. As with prejudice research, Donahue (1985a) has computed mean correlations across five studies utilizing a measure of dogmatism or authoritarianism as the dependent variable and found I essentially uncorrelated (mean correlation = .06) and E rather strongly positively correlated (.36). These studies represent the use of ROS and a variety of measure of prejudice and dogmatism, and their generalizations appear rather clearly established in the literature: E is related to being more rigid, closeminded, suspicious, and fearful of other people, more defensive and prejudiced; whereas I is not related to such variables in any meaningful way. Put another way, E is a less socially, psychologically desirable trait, while no specific conclusions can be drawn about I on the basis of these groups of studies. When this review turns to a consideration of studies utilizing the fourfold typology, the relationship between I and prejudice and dogmatism will be clarified further.

If an intrinsic religious orientation is one that serves as a pervasive motivator in life, it would be expected that I would be able to provide assistance in persons dealing with broad existential questions about life and death, while E would not serve in this way. There is considerable support for these predictions across several different ROS studies. I has been shown to be related to a sense of meaning and purpose in life (Bolt, 1975; Crandall & Rassmussen, 1975) as measured by

Crumbaugh's Purpose in Life test. The facing of death raises the most profound questions for human beings, not only about an after life, but about reasons for existence, loneliness, and generalized anxiety about life ending. Relating ROS scores to a variety of fear of death measures has been another fruitful line of study for several researchers (cf. Spilka et al., 1968; Bolt, 1977; Patrick, 1979). The pattern emerging from these studies indicates that E is positively correlated to fear of death, anxiety about life ending, and the losses associated with dying, while I appears to be negatively correlated with these same constructs. In one recent study involving terminally ill cancer patients, Acklin et al. (1983) found a positive relationship between intrinsic religious orientation and life meaning attribution and that I was associated with lower levels of despair, social isolation, and anger-hostility.

/ Other sets of constructs that have received considerable attention in the ROS literature are those of internal-external locus of control and intrinsic-extrinsic motivations (cf. Strickland & Schaffer, 1971; Kahoe, 1974, 1975, 1985; Morris & Hood, 1981). The positive relationships between I and internal locus of control and intrinsic motivation and between E and extrinsic motivation are so strong that Kahoe (1975, 1985) has argued that the religious orientations may have pervasive personality bases that emerge in the course of psychosocial development.

Worth mentioning as questions not satisfactorily addressed by the empirical research is the relationship of I and E to gender and social desirability. Despite the fact that gender differences in religiousness are frequently reported in the literature, only a very few published studies report I and E scores broken down by gender (cf. Strickland &

Schaffer, 1971; Alker & Gavin, 1978). There is some evidence that women tend to score higher on I than men, with no gender differences on E (Donahue, 1985a). With regard to social desirability, the evidence is slim but consistent. Though Donahue makes a case that social desirability is not related to religious orientation, I appears to be somewhat positively related to measures of social desirability (Batson et al., 1978; Watson et al., 1984). The confounding effects, if any, of the relationships of I to gender and social desirability have not been explored in the literature.

#### ROS and the Fourfold Typology

As has been discussed above, when I and E are considered simultaneously, a fourfold classification system is formed of extrinsics, intrinsics, indiscriminately religious, and non-religious persons. The use of this typology by researchers has increased the explanatory power of the construct of religious orientation. When considering I and E simultaneously, the two categories of intrinsic and extrinsic are relatively pure, whereas the other two quadrants are mixtures of these two variables. This approach, though not without its conceptual and methodological problems as discussed elsewhere, does clarify some of the results which are obtained from the correlational research involving I and E. Intrinsic religiousness, it will be shown, may fail to correlate with some non-religious variables because it confounds two distinct types. Persons who score high on I may be either pure intrinsics (low in E) or they may be indiscriminately religious (high on E).

Allport and Ross (1967) were the first to propose this typology and apply it to research in prejudice. The scoring procedure they used only produced extrinsic, intrinsic, and indiscriminately pro-religious groups. Their data show highly significant differences, however, among these three groups with the intrinsics less prejudiced than the extrinsics who, in turn, are less prejudiced than the indiscriminates. This pattern of relationships will be seen in other research involving the ROS and many other psychological constructs.

In passing, it may be interesting to note the pattern that emerges when the dependent variable is some other religious measure and the ROS is used to split respondents into the four groups. When this is done, the result is a main effect for I, no effect for E, and no interaction (Cf. Hood, 1970; Tate & Miller, 1973; Dodrill et al., 1973). The results of these studies show that whether the dependent variable is religious experiences, beliefs, practices, or values, the intrinsics and the indiscriminates are equivalent and both score significantly higher than the extrinsics or the non-religious group.

The pattern is different, however, when the dependent variable is non-religious and it resembles that first observed by Allport and Ross (1967). A study by Thompson (1974) is illustrative of the discriminant power of this typology and of the general pattern of relationship that emerges when the fourfold classification is used. Thompson surveyed a large (n=532) sample of high school students and their parents, giving them the ROS and Rokeach's Dogmatism Scale. In three separate ANOVAs for adolescents, their mothers and fathers, the same pattern emerged. Those who were classified as indiscriminately religious were the most dogmatic,



followed by the extrinsics. The least dogmatic were the intrinsics and non-religious (Thompson called this group "indiscriminately anti-religious"), and there was no differences between these two groups. The pattern that emerges is intrinsic - non-religious < extrinsic < indiscriminately pro-religious. Joe et al. (1977) report a similar pattern. A one way ANOVA showed the intrinsics significantly less likely to devalue a rape victim than the other three groups. The ordering of mean scores was intrinsic < non-religious < extrinsic = indiscriminates.

Rice (1971) designed a study specifically to consider the relationship of religious orientation to mental health, following Allport's hypothesis that an intrinsic orientation is facilitative of psychological health and an extrinsic orientation is not. He administered the ROS, Barron's ego-strength scale, and a measure of psychosocial adjustment to a sample of 151 men from six religious bodies (churches). Using the fourfold typology, Rice hypothesized that the ordering of mental health (as defined by ego strength and adjustment) would be intrinsic > extrinsic > indiscriminately pro-religious - indiscriminately anti-religious. His initial analysis of the data showed the relationship to be indiscriminately anti-religious the healthiest with the intrinsics similar although scoring lower on most of the dependent variables and the extrinsics and indiscriminately pro-religious least healthy. Rice questioned the utility of the ROS for classifying into the focus categories as Allport labeled them, particularly with his sample of religiously affiliated persons. He chose to reclassify his subjects, eliminating the indiscriminately anti-religious category. With this reclassification Rice found the

intrinsic the most psychologically healthy on both measures and the order was intrinsic > extrinsic  $\geq$  indiscriminately pro-religious.

Some studies have not chosen to utilize all four of the types in their comparison. For example, McClain (1978) compared intrinsically religious students with non-religious students and found the intrinsic respondents higher on factors of personal and social adequacy, self control, and stereotyped femininity and lower on egocentric sexuality and restlessness. Alker and Gavin (1978) found intrinsic healthier than extrinsic on measures of psychological well being. Wiebe and Fleck (1980) found that intrinsic personality profiles on the 16 PF were significantly different than those of extrinsic and non-religious subjects which were similar to each other. Intrinsic subjects tended to be more conscientious, responsible, sensitive, dependent, empathic, and open to their emotions. They also tended to be more conservative and traditional which can be indicative of rigidity and neurosis. Extrinsic and non-religious subjects tended to reflect greater self-indulgence, undependability, and skepticism, but also tended to be more flexible, self-reliant, innovative, and analytic. Extrinsic and non-religious subjects tended to be less rigid. This study tends to moderate the results of some of the other studies summarized here, as Wiebe and Fleck comment that "the question of the relationship between pathology and religiosity remains difficult to solve" (p. 187).

Two studies attempting to utilize the fourfold typology reported that the typology was not able to distinguish respondents on the dependent variables being studied. Gibbs and Achterberg-Lewlis (1978) found "no statistical relationships of import obtained for the religious

orientation variable" (p. 566) when studying fear of death in terminally ill cancer patients, though other measures of religiousness were related to positive coping with terminal illness. The lack of significance within the fourfold typology is probably explained in part because 94% of their sample was high on I (50% intrinsic, 44% indiscriminately religious) and only 6% were extrinsics. This skewed sample distribution supports the perspective argued elsewhere in this proposal that the fourfold typology is perhaps most appropriate when scores on I and E are more broadly distributed. Kraft et al. (1986) also report that the fourfold typology did not differentiate levels of assertiveness. One possible explanation for this is that the median split reported for the I subscale was 22, a value that is lower than the theoretical mean score for I (27) and is much lower than the median reported on all other studies examined by this writer. This study by Kraft et al. of undergraduate psychology students may be in general less intrinsically religious than most studies (median split on E was 31, which compares favorably to other studies), so that the fourfold typology may be skewed toward the less religious end. This analysis is speculative at this point, though it is consistent with the analysis of previous studies using the fourfold typology.

### Summary

In general, as one considers the body of research with ROS, a clear pattern emerges. Across most studies, I is related to better psychological health than E. Whether studies use correlations with I-E scores or the fourfold typology, this generalization holds true. There

are some indications that I and E may be related to other pervasive personality variables, which may be a function of developmental processes. The explanatory power of the ROS argue for its utility in continuing research with religious people. This study sought to build on this empirical literature, for example, by utilizing a measure of psychological health, by sampling to get a broad based adult subject pool on I and E, by collecting careful demographic information, and by utilizing a measure that includes socially desirable responding.

#### Religious Orientations as Developmental Phenomena

As discussed in the theoretical overview in Chapter I, a developmental sequencing of intrinsic after extrinsic, with an intrinsic religious orientation emerging out of an earlier extrinsic orientation has been hypothesized (Hood, 1985). Gorsuch and Venable (1983) comment that this developmental sequence of I after E is "implied in much of the I-E literature" (p. 186). This sequencing was formalized in a model of religious orientation development proposed by Kahoe and Meadow (1981). Though this hypothesized relationship has been a part of theoretical conceptualizations of religious orientation since Allport's seminal discussions of the mature religious sentiment (1950) and the intrinsic/extrinsic religious orientations (1966, 1967), few empirical studies have directly addressed this issue.

Two studies (Chirban, 1980; Ernsberger & Manaster, 1981) have considered intrinsic and extrinsic religious orientation and their relations to two other sets of developmental constructs: faith developmental stage and moral development. These studies provide

interesting suggestive support for the idea that E and I are related to other aspects of personal development, which is the thrust of this research project.

Chirban (1980) studied the relationship between intrinsic and extrinsic religious motivation and the stages of Fowler's (1981) faith development paradigm. Fowler has proposed a structural developmental theory of faith development which explicitly parallels the work of Erikson in psychosocial development, Kohlberg in moral development, and Piaget in cognitive development. Fowler proposes that there is a universal, invariant, hierarchical sequence of stages through which persons develop throughout the life cycle as they seek to structure their lives in relationship to the ultimately meaningful (that is, "faith"). The six stages and their conceptual relationship to other developmental theories can be seen in Table 1.2 in Chapter I. Assignment of a person to a particular stage is made on the basis of a very lengthy structured research interview called the Faith Development Interview (FDI).

Chirban discerned in Fowler's work (and in the developmental theories which it parallels) a shift from a more extrinsic religiousness (security-seeking, protective, affiliative, utilitarian, defensive, dependent) to a more and more intrinsic religiousness (inner directed, personal, committed, autonomous). After reviewing the conceptual idea of I and E and some of the empirical literature measuring I and E through the Religious Orientation Scale, Chirban concluded that an alternative to the ROS subscales would be worth developing. He developed a scoring procedure for rating verbal responses from an interview as extrinsic or intrinsic in their religious orientation and trained raters in the

scoring procedure. The raters then analyzed previously completed Faith Developmental Interviews for I and E responses. He found that I positively correlated with Faith Stage and that E negatively correlated with Faith Stage. Intrinsic religious responses were much more characteristic in the three highest Fowler stages which are the stages which correspond to adulthood. Chirban also found both I and E present at all stages and comments that these two constructs are "structurally different at different stages" (p. 80). An obvious weakness of this study as it relates to the present study (or any other research utilizing religious orientation) is that Chirban's operationalization of I and E may or may not have construct and criterion validity with I and E as measured by the ROS. Nevertheless, this study is suggestive of some developmental correlates for intrinsic and extrinsic religiousness.

In a study which primarily focused on Kohlberg's levels of moral development and effect of a particular church's denominational moral teaching, Ernsberger and Manaster (1981) include some evidence that bears on the issue of I and E as developmental phenomena. In a theologically moderate church, intrinsic religious orientation was found to significantly correlate with the presence of the higher levels of moral reasoning. However, in two theologically conservative churches, this relationship was not observed. The author's explanation for this difference was that moral reasoning at the conventional level was strongly socially reinforced through the teaching of these religiously conservative churches.

Another way to study I and E in a developmental sequence is to hypothesize changes in relative strength of I and E as a function of

chronological age. A study by Thompson (1974) offered some support to this idea. His study was focused on the constructs of dogmatism and openmindedness. He sampled a large number of Catholic adolescents and their parents and reports on median scores on I and E for these groups, as follows:

	<u>Intrinsic</u>	<u>Extrinsic</u>
Adolescents	29.5	36.7
Parents	32.2	29.5

He reports the differences on E are statistically significant. Although other interpretations of these data are possible, he suggests that E may decrease as a function of age.

In order to test the hypothesis of a change in I and E as a function of age, Gorsuch and Venable (1983) developed an "age-universal" I-E scale by taking the Religious Orientation Scale (ROS) and re-writing the items in simpler language. They studied the reliability and validity of the use of this instrument with children in fifth grade and older. After demonstrating its strong psychometric properties which are similar to those of the original ROS, Venable (1984) administered the I-E scale to groups of children in fifth, seventh, ninth, and twelfth grades, expecting to find that relative score on I increased and E decreased as grade level increased. His results did not support this hypothesis. Rather the mean scores for I and E were not statistically different across the ages. Spilka et al. (1985), in commenting on these results and the proposal that I and E are developmental phenomena, write that "a

social psychological model may be preferable to a cognitive developmental model" (p. 72).

This comment is consistent with the suggestion made by Hunt and King (1971) that these two religious orientations have pervasive personality bases. Evidence supporting this idea comes from a study of job motivation by Kahoe (1974). In his study, Kahoe has shown that intrinsic religious orientation is strongly correlated with intrinsic job motivation, while extrinsic religious orientation correlates with extrinsic job motivation. In discussing these results, Kahoe (1985) suggests that "intrinsicness and extrinsicness probably have different sources within the developing personality" (p. 411).

These studies and their conclusions suggest a different way of approaching the issue of religious orientation as a developmental phenomenon. Rather than linking E and I to specific chronological age, these results would imply that extrinsic and intrinsic religious orientations may develop separately in the personality. Instead of an E then I sequence, in which these two orientations are located on a unidimensional developmental continuum, it may be that different personality and developmental processes within the individual produce either a more extrinsic or intrinsic religious orientation. This would support the idea developed elsewhere in this chapter that separate personality correlates of I and E may be expected, as well as expecting differences in subjects classified as intrinsic, extrinsic, and indiscriminately religious on measures of other personality or developmental variables.



### Summary

The paucity of studies directly relating to religious orientation and developmental measures as dependent variables, despite the presence of theoretical suggestions of a relationship, make the study proposed here an important one in examining the relationship between religious orientation and psychosocial development. In addition, further research is warranted to understand the relationship of religious orientation to other measures of psychological health.

## CHAPTER III

### METHODOLOGY

In this chapter, the process for obtaining a sample of subjects is described, and the instruments used in the study are discussed. The design of the study and the method of analysis is presented. The hypotheses are restated in testable form.

#### Sample and Data Collection Procedures

The population under consideration for this study is adults (over 18) who are church affiliated. Several churches in the greater Lansing area agreed to allow their members to be approached to participate in this study. The ministers' support of this research was, in each case, confirmed by a vote of an elected lay leadership committee from the church. It is likely that this official "endorsement" of participation increased the response rate one might otherwise have expected from an anonymous, lengthy, mailed survey. The churches that agreed to participate are: First Congregational Church of St. Johns; Christ Episcopal Church of Owosso; Plymouth Church of Lansing; Congregational Christian Church of Maple Rapids; University Baptist Church, East Lansing; and River Terrace Christian Reformed Church, East Lansing.

The researcher was allowed to utilize each church's mailing list from which the sample was obtained. A random sampling technique identified the persons from the mailing lists to be approached for participation in this research. It is expected that a sample obtained in this way will be representative of the church's population (membership).

A mailing was done to each person who had been randomly identified from each participating church's mailing list. A packet of materials was mailed containing the following items:

1. Cover letter explaining the research and enlisting participation of the recipient, signed by a church official as well as this researcher. The cover letter served to inform respondents of the nature of the research and their participation. It indicated that by filling out the questionnaires and returning them, the respondent was giving consent to participate.
2. Demographic information sheet.
3. Religious Orientation Scales.
4. Assessment of Adult Adjustment Patterns.
5. Stamped, addressed envelope for returning the materials.

Copies of the materials are in Appendix A.

The recipients of these packets were asked to complete all of the materials and return them in the envelope provided. Because of the length of the instruments, participants were instructed that they could complete the forms in a couple of sittings. It was anticipated that approximately an hour to an hour and a half would be needed by the average person to complete these materials. Participants who chose not to fill out the instruments were asked to mail the blank materials back,

so that they could be reused. Participants were assured that they were free to not participate.

The anonymous nature of the responses to the questionnaires was stressed in the cover letter. To ensure anonymity, no list of names of people who were sent materials was kept by the researcher, nor were the forms coded in any way. All respondents received the exact same materials. Respondents were specifically asked not to put their names on any of the questionnaires or answer sheets when they were returned to the researcher.

Publicity concerning the on-going research was handled through announcements in the church newsletter, the Sunday bulletin, and the announcement section of the Sunday worship hour. These announcements encouraged participation, mentioned that the researcher had been supported by an official board/committee of the church and the minister, and stressed the anonymous nature of responses to the questionnaires. Two weeks after the original mailing of materials, a follow-up post card was sent to all persons who received the initial mailing of questionnaires. Because the researcher had no way to know who had and who had not returned the questionnaires, the follow-up post card served two purposes: (a) to thank people who had returned their questionnaires, and (b) to encourage people who had not responded to do so as soon as possible. The researcher had prepared a second follow-up letter; but, due to the high response rate, this second reminder was not mailed.

The initial mailing of material went to 373 persons, of which 184 completed all of the items and returned the questionnaires to this researcher. This represents a response rate of over 49%--a very high

return rate for this type of survey, probably facilitated by the publicity about the research in each of the participating churches. The original mailing went to 206 women (55%) and 166 men (45%). Of the completed and returned materials, 118 (64%) were from women and 66 (36%) were from men. Women were more likely to return these materials. One can only speculate about the reasons for this difference: a greater interest in religion, a greater willingness to take the time to participate in this research or more available time to complete the materials, or, perhaps, a greater willingness to be self-disclosing about a variety of personal issues. The sample was 99.5% Caucasian. One subject marked "other" for race.

The mean age of the sample obtained was 49.8 years, with a range from 24 to 86 years. The median age for the sample was 45 years. The sample represents a broad distribution of ages, as can be seen in Table 3.1

Table 3.2 summarizes the highest educational level completed by the subjects, which ranged from only completing grade school (1%) through doctoral-level education (7%).

Several questions were asked about the subjects' religiousness, including personal theological orientation, degree of interest in religion, self-reported religiousness, and frequency of church attendance. In general, the subjects' responses indicate a fairly religious sample as was expected, given the population from which the potential subjects were drawn. On a seven-point Likert scale, on the question "How religious are you?" in which "1" was "not religious," "7" was "very religious" and "4" was a midpoint between those two self-ratings, the mean, median, and mode were all "5." More than 92%

**Table 3.1**  
**Age of Subjects**

<u>Age</u>	<u>Frequency</u>	<u>Percent of Sample</u>
24-29	12	7
30-39	47	26
40-49	45	24
50-59	23	13
60-69	31	17
70-79	21	11
80-86	5	3

**Table 3.2**  
**Educational Level of Subjects**

<u>Level</u>	<u>Frequency</u>	<u>Percent of Sample</u>
Grade School	2	1
High School	32	17
Some College	57	31
Bachelor's Degree	51	28
Master's Degree	29	16
Doctorate/Professional Degree	13	7

(170) of the subjects described themselves as "moderately" or "very" interested in religion. The subjects adhered to a wide variety of personal beliefs and religious practices from fundamentalist to liberal,

as can be seen in Table 3.3, and were diverse in their report of the frequency of attending a church worship service, as seen in Table 3.4.

Table 3.3  
Personal Theological Orientation of Subjects

<u>Theological Orientation</u>	<u>Number</u>	<u>Percent of Sample</u>
Fundamentalist	7	4
Evangelical	18	10
Conservative	46	25
Moderate	73	40
Liberal	28	15
Other	12	6

Table 3.4  
Frequency of Self-Reported Attendance at a Church Worship Service

<u>Frequency</u>	<u>Number</u>	<u>Percent of Sample</u>
Rarely	7	4
Infrequently	8	4
Occasionally	13	7
Once a Month	20	11
Two or Three Times a Month	47	26
Once a Week	71	39
More than Once a Week	18	10

Three of the questions on the demographic sheet were utilized in a variety of post hoc analyses, because of interest in their possible explanatory power in the results. Subjects were asked whether they had ever had (a) a religious conversion experience, (b) a period of disillusionment with their religious faith, and (c) an experience that profoundly affected their view of self, others, and life. If they answered "yes" to any of these questions, the subjects were asked to give the age at which the experience occurred and to briefly describe what happened and how it affected them. In tabulating subjects' responses to these three questions, four possible responses were observed and recorded. Subjects were asked to check "yes" or "no" and then to explain any "yes" answers. However, some subjects did not answer the question at all, and others who checked "yes" offered no explanation. The researcher chose to separate these two responses from those of subjects who checked "no" or who checked "yes" and provided some specific details about the nature of the experience and its affect on them. The four possible responses, then, to these questions were (a) no answer to the question, (b) "no," (c) "yes," and (d) "yes" with explanation or detail.

In response to the question about having a religious conversion experience, one-third of the sample indicated they had had such an experience (see Table 3.5). The mean age of conversion was 26.4 years, and for 50% of this sample their religious conversion occurred before age 21. However, conversion experiences were reported from ages 8 to 73 (see Table 3.6).

Subjects were also asked to state whether they had ever gone through a period of being disillusioned or disenchanted with their religious



Table 3.5  
Subjects' Report of Religious Conversion Experiences

<u>Answer</u>	<u>Number</u>	<u>Percent of Sample</u>
No Answer	0	0
No	132	67
Yes	39	21
Yes with Details	22	12

Table 3.6  
Age of Religious Conversion (for those who indicated such an experience)

<u>Age of Conversion</u>	<u>Number</u>	<u>Percent of Sample</u>
Under Age 10	3	5
Age 11 - 19	24	41
Age 20 - 29	13	22
Age 30 - 39	7	12
Age 40 - 49	9	15
Age 50 - 59	0	0
Age 60+	3	5

faith and practice. Of those who answered this question, 78 persons (43% of the sample) indicated they had been disillusioned about their personal faith at some time in their lives. The average age for this disillusionment was 28.3 years. . Interestingly, the mean and median ages (both 25 years) for this experience were a few years older than for conversion experiences. Tables 3.7 and 3.8 summarize the report of disillusionment and the age for the reported experience.

**Table 3.7**  
**Subjects' Disillusionment with Religion**

<u>Answer</u>	<u>Number</u>	<u>Percent of Sample</u>
No Answer	8	4
No	20	53
Yes	49	27
Yes with Details	29	16

**Table 3.8**  
**Age of Disillusionment (for those who indicated such an experience)**

<u>Age of Disillusionment</u>	<u>Number</u>	<u>Percent of Sample</u>
Under Age 10	0	0
Age 11 - 19	20	27
Age 20 - 29	27	37
Age 30 - 39	14	19
Age 40 - 49	5	7
Age 50 - 59	6	8
Age 60+	2	4

The course of a person's life and development is often dramatically influenced by a particular event. Subjects were asked to indicate if they had ever had an experience of whatever nature that profoundly affected their views of self, others, or life. Nearly half of the sample (90 persons) reported that they had, in fact, had such a profound, life-changing experience. The nature of these profound experiences

varied from adoption at age three to the positive influence of a music teacher to the death of a spouse and to the loss of physical health. These experiences tended to occur on average at a slightly older age than the disillusionment with religion experiences (mean = 29.4, median = 30). Tables 3.9 and 3.10 summarize the subjects' responses and ages of the profound experiences.

Table 3.9  
Experience Profoundly Affecting One's View of Self, Others, and Life

<u>Answer</u>	<u>Number</u>	<u>Percent of Sample</u>
No Answer	20	11
No	74	40
Yes	59	32
Yes with Details	31	17

Table 3.10  
Age of Experience Profoundly Affecting One's View of Self, Others, and Life

<u>Age of Experience</u>	<u>Number</u>	<u>Percent of Sample</u>
Under Age 10	6	8
Age 11 - 19	6	8
Age 20 - 29	25	32
Age 30 - 39	29	37
Age 40 - 49	8	10
Age 50 - 59	1	1
Age 60+	4	5

## Instrumentation

### Demographic Sheet

The "data sheet" which was developed for this research project asked respondents for such standard information as gender, age, race, and level of education. In addition it asked for information which may be either (a) confounding variables in the analysis of the results or (b) relevant variables on which specific comparisons can be made.

In the latter category are identifiers like theological orientation and interest in religion which have been utilized in other research with ROS and found in some cases to produce differential comparisons in subsamples (cf. Spilka et al., 1985; Batson & Ventis, 1982). The question regarding recent major loss was included to assess the effect, if any, on the pattern of scores on ROS for those persons adjusting to a significant loss.

Much of the literature of the psychology of religion focuses on the experience of conversion and its antecedents as well as its consequences. Though the evidence is mixed and the theoretical perspectives varied on the relationship between conversion experiences and mental health (cf. James, 1961, chapters 8-10; Hiltner, 1966; Conn, 1986), there is some recent evidence that those persons with a continuous religious development were more healthy than those who had a more discontinuous religious development (Bergin et al., 1988). Bergin et al. define a continuous religious development as one in which the young adult identifies with the denomination of his or her parents, was educated in their religious traditions as a child, has not had a conversion experience leading to a change of religious identification, and reports

mild rather than intense religious experiences. It was felt that some of these variables might confound the results obtained on the ROS or the AAAP, so brief questions were asked on the data sheet regarding religious conversion or disillusionment experiences, religious education, and profound experiences affecting one's view of self, others, and life.

### Religious Orientation Scales (ROS)

More than 70 published studies have used the Religious Orientation Scales (ROS) to address questions of the relationships between religion and other personality and behavioral constructs, and it has been called one of the most frequently used psychometric measures of religiousness (Donahue, 1985a). The 20-item ROS was developed by Gordon Allport and some of his students to measure orientation or motivation toward personal religion. Allport's ROS is a subset of a 21-item religious orientation scale first used by Feagin (1964). There are two subscales to the ROS: an extrinsic religious orientation scale of 11 items and an intrinsic religious orientation scale of 9 items. There have been somewhat different scoring procedures used by researchers with these items including a four-choice response, a true-false format, and a reverse scoring for the intrinsic subscale, so that the lower the score, the more highly intrinsic the response (see Meadow and Kahoe, 1984; Donahue, 1985a). This has made comparisons of results across studies somewhat difficult, but recently there has been a trend toward standardization of the scoring procedure (Donahue, 1985a) with each item having a five point response (from "I definitely disagree" to "I definitely agree") and both

subscales scored so that the greater the sub-scale score, the greater the presence of that orientation.

Interestingly, neither Allport and Ross (1967) nor Feagin (1964), whose original set of religious orientation items was used by Allport (with the exception of one item) report internal reliability coefficients. Several later researchers have reported their scale reliabilities which are summarized in Table 3.11.

Table 3.11  
Internal Reliability Coefficients for I and E

	Batson (1976)	Spilka et al. (1977)	Griffin & Thompson (1983)
Intrinsic Scale	.76	.91	.81 - .93
Extrinsic Scale	.70	.85	.69 - .82

The item to total scale correlations have not been as good, ranging from .28 to .58 for the Intrinsic scale and .18 to .50 for the Extrinsic scale (Hunt & King, 1971; Robinson & Shaver, 1973). Several researchers have found that by eliminating a few items the reliabilities of the scales can be improved (McConahay & Hough, 1973; Patrick, 1979; Donahue, 1985b). Feagin's (1964) early study factor analyzed a subset of an original 21 items he used and generated two six-item subscales. Feagin's shorter scales have better item-to-total scale correlations (.54 to .71 for I, and .48 to .68 for E). Most researchers have chosen to use the Allport and Ross (1967) 20-item Religious Orientation Scale (cf. Meadow &

Kahoe, 1984). Donahue (1985b) in his recent report on the status of research with ROS strongly recommends use of the ROS plus the one item of Feagin's not used by Allport and Ross. He then urges researchers to score both the longer and the shorter versions and decided which version has a higher reliability with their sample. This study included all 21 of Feagin's items, and before comparisons were made with other measures, an analysis of the scale reliabilities was done to determine which version (the shorter or longer version) would be used in the analyses.

For the present sample, intrinsic and extrinsic sub scales were computed in the two ways described. E1 and I1 designate the six item shorter versions, and E2 and I2 designate the longer Allport and Ross versions most commonly used in research. Table 3.12 summarizes the scale reliabilities for each of these subscales. Based on an evaluation of these scale statistics, the researcher chose to utilize E2 and I2, the longer versions. Although the E2 item to total scale correlations were lower than for E1, the standardized item alphas for both E2 and I2 were higher than for E1 and I1. Of particular significance was the fact that the internal reliability coefficients for E2 and I2 were higher than for E1 and I1. Alphas of .69 for E2 and .82 for I2 compare favorably with those of other researchers, as summarized in Table 3.11. The item to total scale correlations for E1 and I1 for this sample are lower than those reported by Feagin (1964), whereas the item to total scale correlations for the longer versions (E2 and I2) compare with or are better than those reported by other researchers cited above.

It may be of interest to note in passing that the correlations between the two methods of computing extrinsic and intrinsic for this

Table 3.12  
Subscale Statistics for Extrinsic and Intrinsic Religious Orientations

	<u>Internal Reliability Coefficients</u>	<u>Standardized Item Alpha</u>	<u>Range of Correlations for Items to Total Scale</u>
E1	.6763	.6780	.29 - .54
E2	.6887	.6910	.23 - .45
I1	.7502	.7615	.34 - .59
I2	.8162	.8212	.37 - .66

sample are very high. For E1 and E2,  $r = .74$  ( $p = .000$ ); and for I1 and I2,  $r = .96$  ( $p = .000$ ). The relationship between these two different orientations has been of interest, as detailed in Chapter Two. For this sample, I2 and E2 have a negative correlation ( $-.25$ ) which is similar to the original report by Allport and Ross (1967). Based on the above statistical evidence for the two methods of computing intrinsic and extrinsic scales, this researcher chose to use the longer version (E2 and I2), hereafter labeled simply E and I.

The validity of the intrinsic and extrinsic orientations, although not unchallenged (Hunt & King, 1971), does seem to have support from a variety of sources. Probably the most important evidence to determine the type of religiousness that E and I are measuring is to look at their relationship to other religious measures. Across a variety of studies using various measures of religiousness, including church involvement, financial support, knowledge of church teachings, personal growth in faith, salience of beliefs, etc., I and E exhibit significantly different patterns of relationships. In a summary of six studies (Batson, 1976; Batson & Ventis, 1982; Dodrill et al., 1973; Hoge & Carroll, 1973; King &



Hunt, 1972; Spilka et al., 1968), Donahue (1985a) reported intrinsic religious orientation correlated .39 with such measures (.59 if one study was eliminated), and the extrinsic religious orientation correlated .16. The theory underlying these two ways of being religious would predict these empirically observed differences. Even more striking evidence of the concurrent validity of I and discriminant validity for E comes from four studies in which the relationship between these two scales and the respondents' rating of the importance of religion or religious commitment in their lives (Batson, 1976; Batson & Ventis, 1982; Jackson, 1981; Spilka et al., 1968). I correlated .76 with rating of the importance of religion and for E the correlation was .03.

Additional support for the validity of these two constructs comes from a study by Hoge (1972) who sought to validate the distinction between religion as ultimate (intrinsic) versus religion as instrumental (extrinsic) and to refine a measurement instrument for this conceptual distinction. Hoge utilized persons nominated for his studies by ministers who were asked to identify persons from their congregations who were either intrinsically or extrinsically oriented after being given a summary of these religious orientations. Using all of the ROS items plus many new items, Hoge sought to develop a more reliable and valid measure of intrinsic religiousness by using ministers' judgments of parishioners' orientations as the concurrent validity standard. His Intrinsic Religious Motivation (IRM) scale had better item-to-total scale correlations than the ROS ranging from .48 to .80 and a scale reliability of .90. Interestingly, though this scale appeared to have somewhat better psychometric properties than the ROS, this researcher could find

no study, since Hoge's was published 16 years ago, to use this IRM scale. Perhaps, in part, this is due to the very high correlations that the IRM exhibited with the Allport ROS (.87 total ROS; .86 intrinsic subscale; .71 extrinsic subscale). Hoge's study does provide evidence that ministers were able to select, with some degree of reliability, those who were extrinsic or intrinsic. In part, Hoge was responding to criticisms by Hunt and King (1971) that the definition of intrinsic had included several theoretical components and that scale construction had involved several factors rather than a single I factor. These criticisms of I have been considerably moderated since Hunt and King's paper was published. In part, this has been because of the evidence presented in Chapter II, in which a large number of studies have found results in the direction predicted. As Meadow and Kahoe (1984, p. 294) comment, "We . . . evaluate the religious orientations by how they work."

Recent reviews of the ROS, while taking into account the difficulties discussed above, encourage the use of this measure of orientations or motivations toward religion (Batson & Ventis, 1982; Meadow & Kahoe, 1984; Donahue, 1985a). This research involved use of the scores on the two subscales in both ways that previous researchers have used them. First, the separate subscale scores for I and E were correlated with the scores on the psychosocial developmental measure (AAP). Second, the scores for both scales were used to form the four-fold typology which was discussed in Chapter II. The sampling procedure was designed to produce subjects with a range of scores on both I and E, so that four groups could be formed: Intrinsic (high I, low E), Extrinsic (low I, high E), Indiscriminately Religious (high I, high E), and Non-religious (low I,

low E). The typology was formed in two ways: first, by splitting the sample using the theoretical midpoint of the I and E subscales as Donahue (1985a) suggests. Then, for the sake of comparison, the typology was also formed using the sample medians, which is the standard practice of most previous research using the ROS.

For the E subscale, scores could theoretically range from 11 to 55, with a midpoint of 33. The sample in this study had a range of scores from 11 to 42, with a mean of 26.0, a standard deviation of 6.1, and a median of 26. Crosstabs for the fourfold typology using the theoretical midpoint would be 11-33 and 34-55 and using the sample median were 11-26 and 27-42.

For the I subscale, scores could theoretically range from 9 to 45, with a midpoint of 27. The sample in the study had a range of scores from 16 to 45, with a mean of 33.8, a standard deviation of 6.7, and a median of 35. Crosstabs for the fourfold typology using the theoretical midpoint would be 9-27 and 28-45 and using the sample median were 9-34 and 35-45.

The fourfold split of the sample was constructed using the theoretical midpoints and the sample medians for both E and I. Results of these procedures are summarized in Table 3.13. It was decided that the use of the theoretical midpoint of the subscale to form the four religious orientation types (at least for this sample) would make further comparison and statistical analyses invalid. The small cell size for Extrinsic (6) and Indiscriminately Religious (17) make the results of statistical procedures questionable. The sample median split, however, generated ample numbers in each of the four cells for valid statistical

**Table 3.13**  
**Fourfold Split of the Sample with the Number of Subjects in Each Category**

Non-Religious	Religious Orientation Type			
	Intrinsic	Indiscriminately Religious	Extrinsic	
	High I Low E	High I High E	Low I High E	Low I Low E
Median Split of Sample	59	35	55	35
Theoretical Midpoint of ROS Scales	126	17	6	35

analyses. The four religious orientation subtypes referred to in Chapters Four and Five are based, then, on median splits of this sample.

#### Assessment of Adult Adjustment Patterns (AAAP)

The AAAP is a recently developed instrument designed to objectively measure an individual's degree of mastery of each of the eight psychosocial developmental tasks postulated by Erik Erikson (1963, 1968). It is an objective, self-report measure consisting of 320 items which includes items for each of the eight Eriksonian developmental tasks, as well as two validity scales. One of the validity scales is a Likert form of the Crowne-Marlow (1960) social desirability index. The other validity scale is an unusual response scale patterned and named after the F-scale on the MMPI. Each item consists of a statement on which respondents are asked to rate themselves using a four-point Likert scale as follows:

- 1 - Definitely true of me
- 2 - True of me
- 3 - Not true of me
- 4 - Definitely not true of me

If an item does not apply to a respondent, the instructions direct that the item be left blank on the scoring sheet. Items are presented either "positively", meaning that endorsing the item as "True of me" indicates mastery of the stage to which the item corresponds, or "negatively", meaning that non-endorsement of the item ("Not true of me") is an indication of mastery of that stage. The test is scored by giving the respondent four points for an item when it is answered in the direction most supportive of mastery of the stage, three points if the respondent has endorsed the response next most indicative of mastery and two points or one point for the least supportive statements. If a respondent leaves an item blank (meaning "Does not apply to me"), the item is scored with no points. Individual item scores which pertain to a given stage are then summed to yield a stage score.

Mastery levels for each of the stages have been established so that the eight stages exhibit the characteristics of Guttman scales, that is, that the stages are mastered in hierarchical order of difficulty, beginning with Stage 1 and continuing in order through Stage 8, the last one to be mastered. If the score on a given stage is above the cutoff point, it indicates that the respondent has answered a substantial proportion of that stage's items in the direction of mastery. This being the case, the individual is presumed to have resolved the psychosocial task of that particular stage. The necessary mastery levels are: Stage

1 - 67%; Stage 2 - 78%; Stage 3 - 69%; Stage 4 - 78%; Stage 5 - 85%; Stage 6 - 80%; Stage 7 - 73%; Stage 8 - 84% (Azar, 1982). Several studies have utilized the AAAP and the mastery level indicated (Picciotto, 1987; Arulpragasam, 1986). Other studies have chosen to ignore the stage mastery level and compare subjects' relative scores on each stage (Valdez, 1984; Scabbo, 1984). Presumably, the higher the individual's score on a particular stage, the more complete or successful the mastery of that developmental task. The eight developmental stages of the AAAP have relatively high internal consistency as measured by Cronbach's alpha. Table 3.14 summarizes the means, standard deviations, and reliability data for several studies, including the present one. Originally normed (Azar, 1982) on a population of university staff and faculty who ranged in age from 19-69, the AAAP has been used with college students (Valdez, 1984), alcoholics (Athy, 1986), normal adults (Arulpragasam, 1986; Kalikow, 1987), cocaine and heroin abusers (LeBlanc, 1988), psychiatric inpatients (Azar, 1982), and handicappers (Scabbo, 1984). In general, its results have been in the anticipated direction for these diverse populations.

The modified Crowne-Marlow social desirability scale has been found to correlate highly with the original Crowne-Marlow when administered at the same time (Farquhar et al., 1983). Factor analysis of the instrument identified twenty-three factors that are consistent with Erikson's theory and are shown to be moderately reliable (see Table 3.15). Construct validity was established originally by comparing a normal and a psychiatric population (Azar, 1982). The means for each stage were significantly higher for the normal population than for the psychiatric

Table 3.14

Means, Standard Deviations and Reliabilities for the Eight Stages of the AAP Across Several Studies  
(NOTE: The data centered below each line of numbers are the statistics for the present study.)

Stage Scale	Means			Standard Deviations						Cronbach's Alpha		
	Azar	Athy	Valdez	Azar	Athy	Valdez	Azar	Athy	Valdez	Azar	Athy	Valdez
I. Trust	74.40	72.77	71.20	6.45	7.46	7.48	6.45	.83	.83	.88	.83	.83
		74.69			8.74							
II. Autonomy	110.30	108.50	107.67	10.17	9.98	10.71	10.17	.91	.87	.89	.87	.85
		108.71			10.34							
III. Initiative	76.49	76.25	72.84	7.81	8.37	7.12	7.81	.87	.87	.79	.87	.85
		77.02			8.65							
IV. Industry	193.14	191.42	183.47	18.72	17.55	19.09	18.72	.95	.91	.94	.91	.93
		191.81			23.41				.95		.95	
V. Identity	103.44	102.40	103.87	9.73	10.57	11.20	9.73	.90	.88	.90	.88	.90
		103.41			10.67				.86		.86	
VI. Intimacy	88.34	87.95	93.11	10.74	11.29	10.20	10.74	.90	.91	.90	.91	.90
		89.42			12.11				.90		.90	
VII. Generativity	84.84	83.02	84.27	10.62	10.30	9.74	10.62	.89	.87	.85	.87	.86
		89.00			11.78				.88		.88	
VIII. Integrity	74.75	76.15	77.16	8.64	8.08	8.26	8.64	.85	.85	.85	.85	.85
		74.87			9.02				.82		.82	

Sources: Valdez, 1984; Athy, 1986; Arulpragasam, 1986.

Table 3.15  
Factors Emerging from the AAAP

<u>Erickson State</u>	<u>Name of Factor</u>	<u>Cronbach's Alpha</u>
I. Trust	Basic Trust	.88
II. Autonomy	Will to be oneself	.89
	Solitude	.82
	Holding on, letting go	.82
III. Initiative	Self-punishment, guilt	.86
	Anticipation of roles by parents	.81
IV. Industry	Apply self to task	.92
V. Identity	Trust in peers	.86
	Ideological thought	.79
	Molding identity	.84
	Fidelity tests	.79
VI. Intimacy	Commitment to affiliation	.90
	Fusion with another	.68
VII. Generativity	Establishing and guiding the next generation	.88
	Charity	.84
VIII. Integrity	Order and meaning	.83
	Accepting one's life cycle	.80

\* Source: Azar, 1982.

population with the exception of Stage 6. Additional construct validity comes from Athy's (1986) study in which means for several of the stages for an alcoholic sample were lower than for a normal comparison group. Arulpragasam (1986), as part of her study of the construct of "hope", planned a criterion validation hypothesis on the AAAP. As expected by Erikson's theory, persons who mastered through Stage 7 were significantly older than persons who mastered Stage 4 but not Stage 7. She found



further that for her sample there was no relationship between education level and mastery of Eriksonian stages.

Because the AAAP is a new instrument, additional studies need to be completed to further establish its criterion validity. The construct validity of Stage 6 is questionable, given its lack of discrimination between a normal and psychiatric population (Azar, 1982). There is no test-retest reliability data. However, given the good internal consistency of the stage scales and the evidences of construct validity, the use of the AAAP as a measure of psychosocial development was supported for this study. The AAAP appeared to be useful as a measure of psychological health in adults and as a developmental measure, which were the types of comparisons the present study was undertaking. In addition, the AAAP scores were utilized in both ways that previous researchers have found helpful. First, the individual respondent's scale score for each of the eight stages were used in some analyses. Second, the highest stage mastered in order (based on the mastery levels established by Azar, 1982) were used for other comparisons.

The use of the AAAP in the present study was also based on consideration of two other available measures of Eriksonian psychosocial development. These are the only other instruments in the literature which attempt to access all eight of Erikson's stages. Many researchers (Constantinople, 1969; Rosenthal et al., 1981) have attempted to develop instruments which measure some of the Eriksonian developmental tasks. Typically, as with the studies just cited, the interest is in psychosocial development of young adults and focuses on identity (Stage 5) and intimacy (Stage 6). Boyd and Koskela (1970) developed the Self

Description questionnaire as an objective format, self-report instrument. Consisting of 160 items, it asked subjects to respond on two Likert scales for each item: "Like me - unlike me" and "of concern - of no concern to me". Despite its interest in measuring all eight of Erikson's stages, the normative sample was college undergraduate and graduate students with a restricted age range and which was inappropriate for the two highest stages. The researchers concluded that the instrument did provide support for Erikson's theoretical notion that the stages are ordered chronologically. Relatively high test-retest reliability and internal consistency scores for this instrument were reported. However, no control for social desirability was performed and the validity of this instrument is somewhat uncertain without using a less homogeneous sample.

A recently published study describes the development of the Modified Erikson Psychosocial Stage Inventory (Darling-Fisher & Leidy, 1988). This instrument was a modification of one developed by Rosenthal et al. (1981) which measured successful and unsuccessful resolution of Stages 1-6. New scales were created for the final two stages, as well as modifications of the existing items. An 80-item instrument using a 5-point Likert scale for responses to short sentences, which represented either successful or unsuccessful resolutions of each stage crisis, was evaluated for its psychometric properties. A convenience sample of 168 adults whose ages ranged from 19-86 was administered this instrument. The alpha reliabilities for the eight subscales are good (.75 - .88) and construct validity was supported by positive relationships between chronological age and mean scales on the last two stages. This new

measure appears promising; however, there have been no studies which have demonstrated its predictive or criterion validity. In addition, the very restricted range of scores for each stage (total stage scores range from 1-5) would make this instrument somewhat less useful in the present primarily correlational study.

### Design of the Study

This study was descriptive in nature. It was concerned with the relationship between religious orientation and Eriksonian psychosocial development. The independent variables were religious orientations and the dependent variables were scores on the Eriksonian stages as obtained from the AAAP and highest stage mastered on the AAAP. While causality is not within the scope of this correlational study, the research provides information on religiousness and development that may enable future research and theory development.

### Hypotheses in Testable Form

The specific hypotheses to be tested in this study were divided into two clusters: (A) those hypotheses that concern the use of separate scores on I and E and their relationship to outcomes on the Eriksonian measure; and (B) those hypotheses that concern the groups of subjects determined on the basis of the Religious Orientation typology using each subject's scores on both scales as a basis of assignment to an Intrinsic, Extrinsic, Indiscriminately Religious or Non-religious group. Each of the research hypotheses are restated in testable form, including the null hypothesis and its alternative.

## Set A: Hypotheses With Scores on I and E

## Hypothesis 1

- $H_{01}$ : Scores on the Intrinsic Scale will be uncorrelated with scores for each of the eight Eriksonian stages on the AAAP.
- $H_{A1}$ : Scores on the Intrinsic Scale will be positively correlated with scores for each of the eight Eriksonian stages on the AAAP.

## Hypothesis 2

- $H_{02}$ : Scores on the Intrinsic Scale will be uncorrelated with a subject's highest Eriksonian stage mastered in order.
- $H_{A2}$ : Scores on the Intrinsic Scale will be positively correlated with a subject's highest Eriksonian stage mastered in order.

## Hypothesis 3

- $H_{03}$ : Scores on the Extrinsic Scale will be uncorrelated with scores for each of the eight Eriksonian stages on the AAAP.
- $H_{A3}$ : Scores on the Extrinsic Scale will be negatively correlated with scores for each of the eight Eriksonian stages on the AAAP.

## Hypothesis 4

- $H_{04}$ : Scores on the Extrinsic Scale will be uncorrelated with a subject's highest Eriksonian stage mastered in order.
- $H_{A4}$ : Scores on the Extrinsic Scale will be negatively correlated with a subject's highest Eriksonian stage mastered in order.

## Set B: Hypotheses Using the Religious Orientation Typology

## Hypothesis 5

- $H_{05}$ : There will be no difference between the mean scores on each of the Eriksonian stages for the Intrinsically Religious group, the Extrinsically Religious group, the Indiscriminately Religious group, and the Non-religious group.
- $H_{A5}$ : The mean scores of the Intrinsically Religious group for each of the Eriksonian stages will be equal to or higher than the mean stage scores of the Non-religious group, which will be higher than the scores for the Extrinsically Religious groups, which will be higher than scores for the Indiscriminately Religious group.

Diagrammatically, this hypothesis looks like:

		Mean Scores on Eriksonian Stage							
		I	II	III	IV	V	VI	VII	VIII
Religious Orientation Type	Intrinsic								
	Non-religious								
	Extrinsic								
	Indiscrim- inately Religious								

#### Hypothesis 6

- H<sub>06</sub>: There will be no difference between the Intrinsic, Extrinsic, Indiscriminately Religious and Non-religious groups in the frequency distribution of the number of Eriksonian stages mastered in order.
- H<sub>A6</sub>: There will be a difference between the Intrinsic, Extrinsic, Indiscriminately Religious, and Non-religious groups in the frequency distribution of the number of Eriksonian stages mastered in order.

#### Data Analysis Procedures

Hypotheses 1 through 4 were analyzed by computation of the Pearson product moment correlation coefficient. For Hypotheses 1 and 3, eight separate correlation coefficients were generated, corresponding to each of the eight Eriksonian stages. The use of the table of critical values for  $r$  involves the assumption that the sample is chosen at random and that the two measures are distributed normally. Because of the sample size, these two assumptions were met.

Hypothesis 5 was analyzed utilizing multivariate analysis of variance (MANOVA) which is often used for research designs in which multiple outcome measures are collected. MANOVA allows the data to be seen in multivariate perspective and simultaneously analyze the nature of multiple influences. MANOVA produces one probability statement for the entire set of variables, allowing a thorough analysis of complex data. MANOVA offers two distinct advantages over performing multiple ANOVA for this hypothesis. First, by utilizing a single alpha level, it controls for an increase in experiment-wise Type I error rate which preserves statistical power. As the number of dependent variables increases, the use of multiple ANOVAs increase the Type I error rate, also increasing the Type II error rate and thereby decreasing power. Second, by analyzing all of the comparisons simultaneously, MANOVA takes into consideration possible intercorrelations between the dependent variables. If the result of the MANOVA is statistically significant, then a series of one-way analysis of variance (ANOVA) are performed to determine where the differences are significant between the four groups on the eight stages.

Hypothesis 6 was analyzed through the construction of a frequency distribution of highest stage mastered within each religious orientation category. A chi-square test of distribution, with degrees of freedom equal to one less than the number of groups, was performed to determine if there were significant differences between the four religious orientations. The assumption of chi-square is independent sampling for each group, that is, that assignment of a subject to one group does not effect assignment of any of the other subjects.

For all statistical procedures the probability level for significance was set at .05. The influence of relevant demographic variables upon score on the ROS or on stage scores of the AAAP was examined using analysis of variance and other statistical procedures.

### Summary

In Chapter III, the nature of the sample and the procedures for data collection were described. Each of the instruments to be used in this study were presented, including a discussion of their psychometric properties, their validation and the techniques for scoring each of them. Two sets of hypotheses were presented, the first set having to do with correlations between the I and E scales and the stage scores and highest stage mastered on the AAAP; and the second set of hypotheses relating the religious orientation groups (types) to the stage scores and highest stage mastered on the AAAP. The methods of analysis of the data were reviewed. In Chapter IV, the results of the analyses will be presented.

## CHAPTER IV

### RESULTS

This chapter will present the results of the data analysis. The first section of the chapter will restate the original hypotheses and present the results of the analyses presented in the previous chapter. The rest of this chapter will present post hoc analyses using demographic information and other subject information along with the results on the ROS and AAAP as a way to understand and explain relationships between religious orientation and healthy psychosocial characteristics.

#### Results for the Original Hypotheses

##### Hypotheses 1-4

The original hypotheses were organized into two sets. The first set consisted of four hypotheses considering relationships between (a) a subjects' score on the Intrinsic and Extrinsic religious orientation subscales and (b) the stage scores and the highest stage mastered in order on the AAAP. Table 4.1 presents a summary of the Pearson correlations that were the statistical procedures for testing the first four hypotheses.



Table 4.1  
Pearson Correlation Coefficients for Relationships Among ROS Subscale Scores and AAP Stage Scores and Highest Stage Mastered in Order

	AAP Stage								Highest Stage Mastered in Order
	1	2	3	4	5	6	7	8	
ROS Subscale	Intrinsic								
	-.032 p=.332	-.097 p=.095	-.074 p=.158	-.094 p=.102	.071 p=.169	-.002 p=.491	.054 p=.234	.144 p=.025	.003 p=.485
ROS Subscale	Extrinsic								
	-.046 p=.267	-.167 p=.012	-.056 p=.225	-.105 p=.078	-.174 p=.009	-.143 p=.026	-.043 p=.283	-.133 p=.036	-.132 p=.037

Hypothesis 1

$H_{01}$  Scores on the Intrinsic scale will be uncorrelated with scores for each of the eight Eriksonian stages on the AAAP.

$H_{A1}$  Scores on the Intrinsic scale will be positively correlated with scores for each of the eight Eriksonian stages on the AAAP.

Hypothesis 1 is really eight separate hypotheses and eight separate correlations between the subjects' scores on the Intrinsic religious subscale and each of the eight stage scales of the AAAP. As the results in Table 4.1 indicate, it was not possible to reject the null hypothesis for AAAP Stages 1-7. For Stage 8 the null hypothesis was rejected and the alternative hypothesis accepted. A subject's score on the Intrinsic religious subscale is significantly positively correlated ( $p < .05$ ) with that subject's score on Stage 8. With the exception of Stage 8, all of the correlation coefficients are very small and near zero, with some slightly negative and some slightly positive. The Stage 8 correlation coefficient is not particularly large, but, given the large sample size ( $n = 184$ ), is statistically significant and does indicate that the higher a subject's score on I, there is a tendency for that subject's score on Stage 8 to be higher as well.

Hypothesis 2

$H_{02}$  Scores on the Intrinsic scale will be uncorrelated with a subject's highest Eriksonian stage mastered in order.

- $H_{A2}$  Scores on the Intrinsic scale will be positively correlated with a subject's highest Eriksonian stage mastered in order.

The results of the correlation between the subjects' Intrinsic scores and the highest stages mastered in order ( $r = .003$ ;  $p = .485$ ) were not significant and did not allow the rejection of the null hypothesis. There is no relationship in this sample between a subject's mastery in order of the Eriksonian stages as measured by the AAAP and his/her degree of Intrinsic religiousness.

### Hypothesis 3

- $H_{O3}$  Scores on the Extrinsic scale will be uncorrelated with scores for each of the eight Eriksonian stages on the AAAP.

- $H_{A3}$  Scores on the Extrinsic scale will be negatively correlated with scores for each of the eight Eriksonian stages on the AAAP.

As with Hypothesis 1, Hypothesis 3 is really eight distinct comparisons between the subjects' degrees of Extrinsic religiousness and their scores on each of the eight stages of the AAAP. The results of the correlations are reported in Table 4.1. As predicted in the alternative hypothesis, each of the correlations was negative; however, four of the

eight were not statistically significant. The results do not allow the rejection of the null hypothesis for Stages 1, 3, 4, and 7.

Though the relative size of the Pearson correlation coefficient is small in each case, given the sample size ( $n = 184$ ), there is a statistically significant relationship between a subject's Extrinsic score and his/her scores on Stages 2, 5, 6, and 8. The results allow the rejection of the null hypothesis for Stages 2, 5, 6, and 8 and the acceptance of the alternative hypothesis. For this sample, there is an inverse relationship between Extrinsic religiousness and the degree of successful resolution of the tasks of Stage 2 (autonomy), Stage 5 (identity), Stage 6 (intimacy), and Stage 8 (wisdom). As a subject's score on E increases, there is a corresponding tendency for that subject's scores on each of those stages to be lower.

#### Hypothesis 4

$H_{O4}$  Scores on the Extrinsic scale will be uncorrelated with a subject's highest Eriksonian stage mastered in order.

$H_{A4}$  Scores on the Extrinsic scale will be negatively correlated with a subject's highest Eriksonian stage mastered in order.

The Pearson correlation coefficient for the relationship between a subject's Extrinsic score and the highest stage mastered in order ( $r = -.132$ ;  $p = .037$ ) allowed the rejection of the null hypothesis and the acceptance of the alternative hypothesis. As a subject's degree of

Extrinsic religiousness increases, that is, the score on E increases, there is a tendency to master fewer stages in Erikson's developmental order.

#### Hypotheses 5-6

The second set of hypotheses utilized a fourfold typology of religious orientations determined by a median split of the sample based on scores on both the Extrinsic and Intrinsic scales. The four religious orientation types were Intrinsic (High I, Low E), Extrinsic (Low I, High E), Indiscriminately Religious (High I, High E), and Non-religious (Low I, Low E).

#### Hypothesis 5

$H_{05}$  There will be no difference among the mean scores on each of the Eriksonian stages for the Intrinsically religious group, the Extrinsically religious group, the Indiscriminately Religious group, and the Non-religious group.

$H_{A5}$  The mean scores of the Intrinsically religious group for each of the Eriksonian stages will be equal to or higher than the mean stage scores of the Non-religious group, which will be higher than the scores for the Extrinsically religious group, which will be higher than scores for the Indiscriminately Religious group.

Three separate multivariate analyses of variance (MANOVAs) were computed, and their results are reported in Table 4.2. Each of these MANOVA tests was significant ( $p < .05$ ), and univariate analyses of variance (ANOVAs) were run to determine the source of significance. Table 4.3 summarizes the results of the ANOVAs for each of the mean stage scores by each of the four religious orientation types. Significant differences ( $p < .01$ ) were found among the four religious orientation groups' mean scores on Stage 2 (autonomy). Results on Stage 4 (industry) approach statistical significance ( $p = .06$ ). Results for the other stages (1, 3, 5, 6, 7, 8) were not statistically significant. Table 4.4 summarizes the mean stage scores on Stages 2 and 4 for each of the religious orientation groups.

Table 4.2  
Multivariate Analyses of Variance Utilizing Four Religious Orientation Groups and Mean Scores for Eight Stages of the AAAP

<u>Test Name</u>	<u>Value</u>	<u>Approximate F</u>	<u>Significance</u>
Pillais	.217	1.704	.020
Hotellings	.241	1.723	.018
Wilks	.796	1.714	.019

**Table 4.3**  
**Univariate Analyses of Variance for Mean Stage Scores by Religious Orientation Groups**

	<u>F Value</u>	<u>Significance</u>
Stage 1	.983	.402
Stage 2	4.195	.007
Stage 3	1.234	.299
Stage 4	2.501	.061
Stage 5	2.098	.102
Stage 6	1.599	.191
Stage 7	1.661	.177
Stage 8	.811	.489

**Table 4.4**  
**Mean Scores on Stage 2 and Stage 4 by Religious Orientation Group**

<u>Religious Orientation</u>	<u>Mean Stage 2</u>	<u>Mean Stage 4</u>
Non-religious	111.14	199.06
Intrinsic	110.29	193.03
Extrinsic	108.73	190.67
Indiscriminately Religious	103.57	184.23

The mean stage scores for both Stage 2 (autonomy) ( $p < .01$ ) and Stage 4 (industry) ( $p = .06$ ) are different across the religious orientation groups in the direction predicted in the alternative hypothesis. The Non-religious and Intrinsically religious groups are higher than the Extrinsically religious group which, in turn, is higher than the Indiscriminately Religious group. For this sample, Non-religious persons

and Intrinsically religious persons report more autonomous functioning than Extrinsically religious or Indiscriminately Religious subjects. There is a strong tendency, though not statistically significant, for these same subjects (Non-religious and Intrinsically religious) to report a greater sense of industry and competence than those who are Extrinsic and Indiscriminately Religious.

#### Hypothesis 6

H<sub>06</sub> There will be no difference among the Intrinsic, Extrinsic, Indiscriminately Religious, and Non-religious groups in the frequency distribution of the number of Eriksonian stages mastered in order.

H<sub>A6</sub> There will be a difference among the Intrinsic, Extrinsic, Indiscriminately Religious, and Non-religious groups in the frequency distribution of the number of Eriksonian stages mastered in order.

The chi-square computed for the frequency distribution of the highest stages mastered in order by the four religious orientations was 24.921 ( $p = .410$ ). This non-significant result did not allow the rejection of the null hypothesis. There was no difference in the frequency distribution for the highest stage mastered in order by the Intrinsic, Extrinsic, Indiscriminately Religious, and Non-religious groups. This chi-square statistical test was actually invalid, given a large number of cells either with no subjects or with an expected frequency of less than five.



### Post Hoc Analyses

#### AAAP

Several analyses were done to assess the influence of the demographic variables of gender and age on the stage scores of the AAAP. The differences among mean stage scores for male and female subjects were compared using t-tests. Significant differences ( $p < .05$ ) were found between the average stage scores for men and women on Stage 1 and Stage 4. On both stages male scores were higher than female scores, indicating a greater degree of mastery of these early developmental tasks of (a) basic trust in self and confidence about life and (b) sense of competence, skill, and ability to apply oneself to a task. The other t-tests for differences between men and women were not significant for Stages 2, 3, 5, 6, 7, 8, and highest stage mastered in order.

Age differences on the stage scores were studied in two ways. First, the sample was split into two groups at the median age: 24-44 ( $n = 87$ ) and 45-86 ( $n = 97$ ). The mean stage scores for each of the AAAP stages for these two age groups were compared. There were no age differences found for Stages 1, 3, 5, 7, and highest stage mastered in order. There were statistically significant differences ( $p < .05$ ) for Stages 2, 4, 6, and 8. In each of these cases, the younger age group scored significantly higher (better) on the stage. Assuming that a higher stage score indicates a healthier person or a better resolution of the task/crisis of that stage, then for this sample, younger persons were more independent (autonomous), more task oriented and felt more competent, placed more importance on intimacy and commitment to a person

of the opposite sex, and had a deeper sense of meaning and purpose in life.

The second method for analysis of the differences in stage scores based on age was to split the sample into three groups: younger adults, 24-40 ( $n = 64$ ); middle age adults, 41-60 ( $n = 65$ ); and older adults, 61 and older ( $n = 55$ ). ANOVAs for each of the stages found non-significant results for the mean stage scores across these three age groups for Stages 1, 3, 4, 5, 7, 8, and highest stage mastered in order. On Stage 2 and Stage 6, significant ( $p < .05$ ) differences were found across the three age groups. In each of these comparisons, the oldest group had the lowest mean stage score. Table 4.5 records the rank order of the three age groups for the mean scores for the eight AAP stages. As noted above, only two of these rank orderings (Stages 2 and 6) represent statistically significant differences in the mean stage scores across the three age groupings, the pattern of these rank orderings is interesting to observe. The Stage 8 results are opposite of what would be predicted on the basis of the theory, since for this sample the youngest adults scored highest on this stage and the oldest adults scored lowest. Consistently across seven of the eight stages and the highest stage mastered in order, the oldest group of adults scored lowest. This pattern of results is contrary to what one would predict on the basis of the Eriksonian developmental theory.

Consideration was given to the concept of mastery of the stages using the procedures developed by Azar (1982) and discussed in Chapter III. Table 4.6 lists the AAP stages and (a) the percentage of subjects who mastered each of the stages regardless of chronological order and (b) the



percentage of subjects for whom the particular stage was the highest stage mastered in order.

Table 4.6  
Percentage of Subjects Who Mastered Each Stage, Regardless of Chronological Order, and Percentage of Subjects Who Mastered up to Each Stage in Order

	<u>Percentage Mastered</u>	<u>Percentage Mastered in Order</u>	<u>Cumulative Percentage in Order</u>
No Stage	16	16	16
Stage 1	84	51	67
Stage 2	34	3	70
Stage 3	76	4	73
Stage 4	42	13	86
Stage 5	20	.5	87
Stage 6	52	1	88
Stage 7	64	4	92
Stage 8	17	8	100

Considering the mastery of any stage regardless of the order, several observations appear contrary to the theoretically expected outcome. The sample for this research was drawn from a normal population assumed to be psychologically healthy, and yet 16% of this sample did not master any of the AAAP stages at all. It would be expected from Eriksonian theory that fewer persons would master the higher stages, since successful completion of later psychosocial tasks is based on successful resolution of earlier crises and the development of earlier competencies. However, fewer of

this sample's subjects mastered Stages 2, 4, and 5 than mastered Stages 6 and 7.

When consideration is given to the mastery of stages in order, the evidence presented in Table 4.6 again appears contrary to what would be expected theoretically. Eriksonian theory would predict that a decreasing number of subjects would master successive stages and that a population of normal adults would have a large percentage of persons who have completed the issues related to childhood and adolescence. However, for this sample 67% only mastered up to Stage 1 (trust), and 86% only mastered through Stage 4 (industry)--both tasks of childhood, according to Eriksonian theory. Said somewhat differently, this would mean that a large portion of the subjects in this sample was dealing unsuccessfully with psychosocial tasks from childhood. These results from this sample will be discussed in the next chapter, where consideration will be given to questions of the construct validity of the AAAP based on these results.

In part because of the preceding observations and analyses of the AAAP stage scores and highest stage mastered in order, this researcher considered each subject's total stages mastered regardless of order in several post hoc analyses. Looking at each subject's total stages mastered allowed the stage scores to represent healthy personality characteristics without considering them as sequentially acquired. Subjects' total stages mastered ranged from none (16% of sample) to eight that is, all of the stages (8% of sample). When total stages were correlated with subjects' scores on I and E as was done for Hypotheses 1-4, the results were similar to the results reported earlier and

predictable given those results. No correlation was found between I and total stages mastered; however, a negative correlation was found for E and total stages mastered ( $r = -.16$ ;  $p = .015$ ). As a subject's Extrinsic religiousness increases, there is a tendency to master fewer of the stages.

### Religious Orientation Scale

Post hoc analyses were conducted on the ROS subscales to consider the relationship between certain demographic variables and the I and E subscales. Additional analyses sought to understand the relationship between I and E and subjects' self report of conversion experience, disillusionment with religion, and experience profoundly affecting life.

Spearman non-parametric correlations were run between the ROS subscales and various self-reported religious measures. In terms of frequency of church attendance, I is positively correlated ( $r = .43$ ,  $p < .001$ ) and E negatively correlated ( $r = -.19$ ,  $p < .01$ ) to a subject's attendance at church worship services. Subjects were asked the straightforward question, "How religious are you?" and their responses on a four-point Likert scale from "not at all" to "very religious" were highly related to religious orientation. I was significantly positively related ( $r = .57$ ,  $p < .001$ ) and E negatively related ( $r = -.33$ ,  $p < .001$ ) to this self-described degree of religiousness. Subjects were asked to label their own personal theological orientation and these descriptors on a continuum from "fundamentalist" to "liberal" were not significantly related to E but were negatively related to I ( $r = -.27$ ,  $p < .001$ ), indicating that I is correlated to a more conservative theological

orientation. These results are consistent with those summarized in Chapter II. The higher a score on I the more likely the person will see him/herself as very religious, be a frequent church attendee, and be more conservative theologically. The higher the subject's score on E, the more likely the person will be a less-frequent church attendee and see him/herself as less religious.

Male and female differences were found on the Intrinsic subscale but not on the Extrinsic subscale. The t-tests for differences between group means were not significant ( $t = -.24$ ,  $p = .81$ ) for males and females on E. However, it was found that the women's scores on I were significantly higher than men's scores ( $t = -2.98$ ,  $p = .003$ ). This finding, consistent with some previous research with ROS (Donahue, 1985a) would indicate that women tend to have a religious faith which is more integrated into their whole life and which forms a more central core for their identity, experiences, and relationships than men.

When ROS subscale scores were correlated with level of education, the Spearman coefficients were not significant. For this sample there was no relationship between either I or E and a subject's educational level. Some previous research with ROS had found that I may tend to be related to socially-desirable responding on self-report measures (Batson et al., 1978; Watson et al., 1984), though Donahue (1985a) has argued that religious orientation is not related to social desirability. Pearson correlations between I and E and the social desirability subscale of the AAAP were both insignificant. The results from this sample support Donahue, although the relationship of I to social desirability obviously requires further analysis beyond the scope of this study.

Another demographic variable of interest is the subject's age and its relationship to religious orientation. An initial correlational analysis was performed which found a positive relationship between both age and E ( $r = .16$ ,  $p = .01$ ) and I ( $r = .21$ ,  $p < .01$ ). As a subject's age increased the subscale scores on I and E both tended to increase. Further specification of the relationship of age to religious orientation lead to additional tests. As was done with the AAAP, the subjects were divided first into two age groups, 24-44 ( $n = 87$ ) and 45-86 ( $n = 97$ ), and then into three groups, 24-40 ( $n = 64$ ), 41-60 ( $n = 65$ ), and 61+ ( $n = 55$ ). T-tests and ANOVAs were then run with the main effect of age being considered in the analysis.

When two age groups were used, the mean score for the older group was significantly higher on both I ( $p = .02$ ) and E ( $p = .04$ ). When three age groupings were used, the ANOVA for E was not significant ( $p = .30$ ), although the mean score for the oldest age group was highest and the youngest age group was lowest. Using three age groupings for the ANOVA and I mean scores was significant ( $F = 6.45$ ,  $p < .01$ ) and the difference was between the oldest age group which was significantly higher than the other two age groupings. These results indicate that both Extrinsic and Intrinsic religiousness increase as a function of age, although the relationship is much stronger for I than for E.

#### Conversion, Disillusionment, and Profound Experiences

There were three sets of questions that became the focus for many post hoc analyses. These questions asked each subject whether or not s/he had (a) a religious conversion experience, (b) a period of disillusionment



with personal religious faith, and (c) an experience which profoundly affected his/her view of self, others, and/or life. If a person answered "yes" to these questions, s/he was then requested to state the age of the experience and to briefly describe what happened and how the particular experience affected him/her. Some statistical procedures utilized two groups for each of these questions: those who said "no" and those who said "yes." For other post hoc procedures, respondents who said "yes" were subdivided into two groups, one in which the person checked "yes" but did not elaborate and one in which the person not only reported the experience but wrote some detail about the way in which it affected his/her life. For some analyses, there were three respondent groups: "no," "yes," and "yes with detail." The distinction between "yes" and "yes with detail" was a judgment made by the researcher based upon his assessment of the quality of the subject's written response. If a subject only checked "yes" and gave no written response or if the written response about the experience was not specific about the nature of the event or clear about its subsequent effect, that subject's response was coded as "yes." A "yes with detail" response required that the subject provided specific information about the event and about the quality of the influence it had on the subject. This three-way distinction, it was hypothesized, would provide potentially meaningful differences. As will be seen in the following results, this distinction between "yes" and "yes with detail" was not particularly meaningful and provided fewer significant results than the two group analyses.

A set of ANOVAs (with three groups--"no," "yes," and "yes with detail") and t-tests (with two groups--"no" and "yes") were performed

with scores on E and I as dependent variables and the independent variables being conversion experience, disillusionment experience, and profound experience. Presence or absence of a disillusionment experience did not significantly affect a person's I or E scores. The same result (for both t-tests and ANOVAs) was true for report of an experience profoundly affecting one's life. Profound experience or lack of it had no affect on a subject's I or E score. Apparently a person's religious orientation is not influenced either by the experience of having been disillusioned with one's religious faith or by a life event regarded by the person as profoundly affecting one's view of life.

However, ROS scores were significantly different when the presence or absence of a conversion experience was the variable of interest. The mean E score was significantly lower ( $t = 3.82, p < .000$ ) for those persons who reported a conversion experience than for those who did not report a religious conversion. When the "yes with detail" group was created, the results were also significant ( $F = 8.45, p < .001$ ). Persons who clearly described the way(s) in which their religious conversion(s) had affected their lives had significantly lower E than members of the subject group who only checked "yes," who in turn were lower on E than members of the group that reported they had not had religious conversions. In addition, the mean I score was significantly higher ( $t = 5.61, p < .001$ ) for those persons who reported religious conversion experiences than for those who did not report conversion experiences. Utilizing the three-group comparison also generated significant results ( $F = 13.56, p < .001$ ). Subjects who described the way(s) their conversions influenced their lives ("yes with detail") had higher mean I

scores than those who only reported conversions ("yes"), who in turn were higher on I than those who reported not having conversion experiences.

An attempt was made to understand the relationship, if any, between these three types of experiences (religious conversion, disillusionment with religious, and profound experience affecting life) and the stage scores on the AAAP. When using the three response groups ("no," "yes," and "yes with detail"), no significant differences were found for the mean scores for any of the Stages 1-7. Conversion experience also did not significantly affect Stage 8 scores. However, ANOVAs were statistically significant for disillusionment experience and Stage 8 mean scores ( $F = 7.68$ ,  $p < .001$ ) and for profound experience and Stage 8 mean scores ( $F = 5.84$ ,  $p < .01$ ). In both cases, the mean Stage 8 scores were ordered as follows: "yes with details" > "yes" > "no."

Comparisons were also made utilizing two groups by combining the two "yes" responses into a single group. When t-tests for the differences between mean stage scores for each of the eight AAAP stages were computed, several statistically significant differences were found. The group that had conversion experiences scored significantly lower on Stage 3 ( $t = 2.36$ ,  $p = .02$ ) and on Stage 7 ( $t = 2.23$ ,  $p = .03$ ) than the group that did not have conversion experiences. All other stage scores were not significantly different; however, for Stages 1, 2, 4, 5, and 6, the mean conversion group scores were lower than for the no conversion group. Taken by itself, this result would indicate that a dramatic religious conversion experience may be associated with less-healthy psychosocial development, particularly in relationship to the ability to

care and guide others (Stage 7) and the presence of guilt or self-punishing attitudes (Stage 3).

When the variable of interest is simple presence ("yes" plus "yes with details") or absence of disillusionment with religion, non-significant t-test results were obtained for mean stage scores for Stages 1, 3, 5, 6, and 7. Barely statistically-significant results were obtained for Stage 2 ( $t = 2.09$ ,  $p = .04$ ) and Stage 4 ( $t = 2.01$ ,  $p = .05$ ) with members of the group that reported disillusionment experiences scoring higher. Presence of a reported period of disillusionment with one's personal religion is apparently related to higher scores and, therefore, better resolution of the tasks of autonomy (Stage 2) and industry (Stage 4). Results for Stage 8 ( $t = 3.97$ ,  $p < .001$ ) were highly statistically significant, with the disillusionment group's mean stage score higher than the no disillusionment group's. Presence of a disillusionment experience is related to a higher Stage 8 score and more satisfactory mastery of the task of wisdom (Stage 8).

When the variable of interest is the presence ("yes" and "yes with details") or absence ("no") of the report of an experience profoundly affecting one's view of self, life, or others, the t-test is insignificant for the differences between groups in each stage mean score for all stages except Stages 5 and 8. Stage 5 mean scores are barely statistically significant ( $t = 1.95$ ,  $p = .05$ ), indicating that experiences when reflected upon and integrated into one's life can have a positive effect on one's sense of self and one's identity in relationship to one's peers. More meaningful perhaps is the result for Stage 8 ( $t = 3.30$ ,  $p = .001$ ). The presence of a profound experience affecting one's

life is related to a higher score on Stage 8 and a better resolution of the task of developing wisdom and a coherent philosophy of life.

Based on the above results, it was predicted that persons who reported both disillusionment experiences and profound life experiences would score higher on I and the eight stages of the AAAP and lower on E. Three groups were created based on subjects' report of these two experiences: a group of subjects who reported they had had both of these experiences ("yes" on both,  $n = 54$ ), a group that reported only one of these experiences ("yes" on one/"no" on one,  $n = 52$ ), and a group of subjects who reported they had not had either of these types of experiences ("no" on both,  $n = 56$ ). Those persons who failed to answer one or the other of these questions were dropped from these analyses.

ANOVA procedures were run using these three groups as independent variables and the ROS scale scores and AAAP stage scores as dependent variables. The results were significant for scores on E ( $F = 3.25$ ,  $p = .01$ ) with the "yes on both experiences" group scoring significantly lower on the Extrinsic religious scale. Results for I were in the predicted direction with the "yes on both experiences" group scoring higher; however, the  $F$  test was not statistically significant. The ANOVA results for Stages 1-7 were not statistically significant, though it may be noted that for five of the seven stages, the mean stage score for the "yes on both experiences" group was higher than the other two groups, with the "yes on one experience" group's mean stage score the second highest on five of the seven stages. The results on Stage 8 were highly significant ( $F = 5.51$ ,  $p < .001$ ) and in the direction predicted. Those subjects who reported both disillusionment experiences with their religious faith and

also experiences profoundly affecting their lives scored significantly higher on Stage 8 than those who reported they had neither experience.

#### Four-fold Religious Orientation Typology

As presented earlier in the results of univariate analyses of variance for hypotheses on the mean stage scores for each of the four religious orientation groups, one was statistically significant (Stage 2) and one approached significance (Stage 4). Both of these results were in the predicted direction. An examination of the mean stage scores for each of the religious orientation groups found an interesting pattern emerging. Though it must be borne in mind that the data for the other six stages were not statistically significant, they reflected a very similar pattern of relationships as those that were significant. Table 4.7 summarizes the rank ordering of the mean stage scores across the four religious orientations. The table also includes the rank ordering of mean highest stage mastered in order and mean total stages mastered. In six of the eight stages, the Non-religious group scored highest, followed by the Intrinsic group in each case. On the two stages, in which the Non-religious group's mean score was second highest, the Intrinsic religious group scored the highest mean score. For highest stage in order, the Intrinsic religious group is highest, followed by the Non-religious group; and for total stages mastered the Non-religious group is highest, with the Intrinsic group second. In no case were the Extrinsic and Indiscriminately Religious groups rank ordered higher than third.

**Table 4.7**  
**Rank Order of the Mean Stage Scores for Each of the Four Religious**  
**Orientation Groups**

<u>ROS Group</u>	<u>AAAP Stage</u>								<u>Highest Stage Mastered in Order</u>	<u>Total Stages Mastered</u>
	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>		
Non-religious	2	1	1	1	1	2	1	1	2	1
Intrinsic	1	2	2	2	2	1	2	2	1	2
Extrinsic	3	3	3	3	4	3	3	4	3	3
Indiscriminately Religious	4	4	4	4	3	4	4	3	4	4

A common factor in the Non-religious group and the Intrinsically religious group was the presence of low E. A common factor in the Extrinsically religious group and the Indiscriminately Religious group is high score on E. Consistent with the original hypotheses, the presence of a high Extrinsic religious orientation appeared to be related to less-healthy psychosocial characteristics and personality functioning. From the four religious orientations, two separate groupings were formed. First, two groups were formed on the basis of scores on I: high Intrinsic group (n = 94) and low Intrinsic group (n = 90). None of the t-tests for differences between two group means was significant for any of the eight stages of the AAAP. Two groups were formed on the basis of scores on E: high Extrinsic group (n = 90) and low Extrinsic group (n = 94). When t-tests for differences in group means were calculated, five of the eight comparisons were statistically significant, and two others approach significance ( $p < .10$ ). Table 4.8 summarizes the mean stage scores, standard deviations, and the t-test and its significance level

for the eight AAAP stages. The differences between the high Extrinsic and low Extrinsic groups for Stages 2, 3, 4, 5, and 7 are statistically significant. In each case the low Extrinsic group scored better (higher) on the AAAP stage score. For two other stages (6 and 8), the differences are not statistically significant, but approach significance ( $.05 < p < .10$ ) and are in the same direction, that is, the low Extrinsic group mean scores were higher.

### Summary

This chapter has presented the results of the analyses for the hypotheses originally proposed for this study in Chapter 3. Additional analyses were performed post hoc which considered questions of the validity of the AAAP as a developmental measure, the ROS scales in relation to subjects' demographic information, the relationships of conversion, disillusionment, and profound experiences to ROS scores and AAAP stage scores, the four-fold religious orientation groups' rank orderings and the generation of analyses of high Extrinsic and low Extrinsic groups.



**Table 4.8**  
**Means, Standard Deviations, T-values, and Significance Levels for the Eight AAP Stages by the High Extrinsic and Low Extrinsic Groups**

		<u>Mean</u>	<u>Standard Deviation</u>	<u>T-Value</u>	<u>Level of Significance</u>
Stage 1	High Extrinsic	73.90	8.61	1.20	p > .10
	Low Extrinsic	75.45	8.85		
Stage 2	High Extrinsic	106.72	9.71	2.62	p < .005
	Low Extrinsic	110.61	10.41		
Stage 3	High Extrinsic	75.93	8.33	1.69	p < .05
	Low Extrinsic	78.06	8.77		
Stage 4	High Extrinsic	188.17	24.38	5.74	p < .001
	Low Extrinsic	195.28	21.83		
Stage 5	High Extrinsic	101.58	9.85	2.31	p < .025
	Low Extrinsic	105.17	11.21		
Stage 6	High Extrinsic	88.16	10.49	1.41	p < .10
	Low Extrinsic	90.64	13.35		
Stage 7	High Extrinsic	87.37	10.20	1.87	p < .05
	Low Extrinsic	90.56	12.92		
Stage 8	High Extrinsic	73.82	8.80	1.55	p < .10
	Low Extrinsic	75.87	9.18		

## CHAPTER V

### SUMMARY AND CONCLUSIONS

In this chapter a summary of the study is presented. The limitations to the study are discussed. The major conclusions based on the results obtained in this study are listed and discussed. Finally, implications for future research and improvements in the design of this research project are discussed.

#### Summary of the Study

This study was a descriptive study attempting to understand the relationships between adult intrinsic and extrinsic religious orientations and the psychosocial development tasks of Eriksonian theory.

A body of theory and research over the past 25 years has delineated differences between an intrinsic and an extrinsic religious orientation. These orientations are different ways of being religious or attitudes toward one's personal religious faith. An intrinsic religious orientation views religious faith as an integrative, master motive to all of life, giving meaning and purpose to life and unifying the self. Intrinsic religiousness is autonomous, inner directed, tolerant, self transcending, personal, and committed. In contrast, the extrinsic religious orientation is more self serving and utilitarian. Extrinsic

religious orientation leads to a more compartmentalized religious life from the rest of the person's life. The extrinsic orientation tends to be dependent, defensive, security seeking, and prejudicial. Religion for the extrinsically oriented is useful as a means to other ends.

Previous research by others with the ROS had indicated that the extrinsic scale was positively correlated to a variety of less desirable or healthy psychological traits (i.e., anxiety, prejudice, external motivation) and that the intrinsic scale was positively related to some psychologically desirable traits (i.e., self-control, sense of well being, responsibility) and uncorrelated or negatively related to undesirable or unhealthy traits (i.e., dogmatism, prejudice, fear of death). There was some research evidence that the intrinsic and extrinsic religious orientations were related to other aspects of personality development and considerable speculation about the developmental nature of these orientations.

Building on this previous theorizing and research, the present study considered the relationship of the two religious orientations as measured by subjects' scores on the Religious Orientation Scales (ROS) to the Eriksonian psychosocial developmental tasks as measured by the subjects' scores on the eight stages of the Assessment of Adult Adjustment Patterns (AAAP). A demographic sheet was developed for this study which asked information from the subjects such as conversion experience; education level; profound experience affecting one's view of self, others, and life, which it was thought might be variables influencing the outcome on either the ROS or AAAP.

A random sample of 373 religiously affiliated adults was obtained from several Lansing area churches. These persons were asked to complete and anonymously return the demographic sheet, the ROS and the AAAP. The subjects were told that the study was concerned with normal adult development and ways of being religious. Of those who received these materials by mail, 184 completed and returned all three of the instruments.

After the data were collected, the AAAP scores for each of the eight Eriksonian stages were computed. The highest stage mastered in order on the AAAP was determined for each subject. These were the dependent variables in this study. Each subject's score on the I and E subscales of the ROS were computed, and these scores were the independent variables utilized in the analytic procedures. Subjects were divided on the basis of their scores on both I and E into a four-fold religious orientation classification. The four groups thus formed were Intrinsic (High I, Low E), Non-religious (Low I, Low E), Extrinsic (Low I, High E), and Indiscriminately Religious (High I, High E). The original hypotheses were clustered according to whether they utilized the I and E scores for each of the subjects or the four-fold classification of the subjects into religious orientation groups.

Hypothesis 1 concerned the correlation between the subjects' scores on the intrinsic religious scale and on each of the eight stages of the AAAP. No significant relationship was found for Stages 1-7. For Stage 8 (wisdom), however, a statistically significant positive relationship was found with I. A higher score on I tends to be related to a higher score on the Stage 8 task of wisdom.

Hypothesis 2 concerned the relationship between a subject's intrinsic religious score and the highest stage mastered in order on the AAAP. This correlation was not statistically significant.

Hypothesis 3 considered the correlation between subjects' scores on the extrinsic religious scale and on each of the eight stages of the AAAP. Non-significant results were obtained for Stages 1, 3, 4, and 7, although each of these correlations was in the predicted negative direction. There was a statistically significant negative relationship between a subject's score on E and score on Stage 2 (autonomy), Stage 5 (identity), Stage 6 (intimacy), and Stage 8 (wisdom). As a subject's on E increased, there is a tendency for that subject to score lower on Stages 2, 5, 6, and 8.

Hypothesis 4 concerned the relationship between a subject's extrinsic religious score and the highest stage mastered in order on the AAAP. This correlation was significant, indicating that as a subject's score on E increased, there was a tendency for that subject to master in order fewer of the AAAP stages.

Hypothesis 5 considered the four religious orientations groups and the mean stage score for each of the eight AAAP stages. Statistically significant differences across the four religious orientation groups were found on Stage 2 (autonomy) and the differences approached significance ( $p = .06$ ) on Stage 4 (industry). On both of these stages, the results were in the predicted direction with the Non-religious and Intrinsic groups scoring higher than the Extrinsic group which, in turn, scored higher than the Indiscriminately Religious group.

Hypothesis 6 concerned the differences among the four religious orientation groups and highest stage mastered in order. The results were not significant.

Several post-hoc analyses were performed to provide additional understanding of the results obtained for the original hypotheses and to explore additional questions which emerged as the data were analyzed.

A cluster of post hoc analyses were performed utilizing the AAAP. Several of the analyses using subjects' ages and AAAP stage scores found that younger age groups in this sample had higher mean stages scores than the oldest age group. In addition, it was observed that a large percentage of this sample had only mastered through the earliest stages associated with infancy and childhood.

The demographic variables were considered in relation to subjects' scores on I and E. I correlates with the other measures of religiousness and with a tendency toward more conservative theology. E is unrelated or negatively related to these other religious measures. Neither E nor I is related to social desirability or educational level. Women score higher than men on I, while there is no gender difference on E. Both I and E were found to increase with subject's age.

Presence of a religious conversion experience appeared to lower the stage scores on the AAAP for Stages 1-7, although only the differences on Stages 3 and 7 were statistically significant. For subjects who reported they had had religious conversions, E scores were lower and I scores were higher.

The reported presence or absence of an experience of disillusionment with one's personal religious faith did not affect the subject's score on

E and I or on Stages 1, 3, 5, 6, and 7 of the AAAP. However, subjects who had gone through a period of disillusionment with their religious faith scored higher on Stage 2 (autonomy), Stage 4 (industry), and Stage 8 (wisdom).

Subjects' report of an experience profoundly affecting their view of life did not affect scores on E or I. On the AAAP stage scores, subjects who reported profound experiences scored higher on Stage 5 (identity) and Stage 8 (wisdom) than those who did not report such experiences. No significant differences were found for the other AAAP stages.

For subjects who reported both disillusionment experiences and profound experiences affecting their life, scores on E were significantly lower, and scores on Stage 8 were higher than those who reported only one of these experiences or neither of them.

When two groups were formed based on subjects' scores on E, the group that was low on E scored better (higher) on all of the eight stages of the AAAP than the High E group, with five of the eight comparisons statistically significant. No significant differences were observed when High I and Low I groups were formed.

### Limitations of the Study

#### Limitations of AAAP

As the data for this study were being analyzed, several results taken together seemed to call into question the use of the AAAP as a chronologically sequenced psychosocial developmental measure. These results will be discussed relative to their implications for the construct validity of the AAAP.

When two age groups were formed, the younger age group was significantly higher than the older group on Stages 2, 4, 6, and 8. When three age groups were formed, the mean stage scores for Stages 2 and 6 were significantly different. In each of these comparisons, the oldest group had the lowest mean stage score. What may be being observed in a lower Stage 2 score is a loss of independent and autonomous functioning by older adults, as some of them become more dependent. The differences in Stage 6 (intimacy) scores may also reflect for the oldest adults the loss of their life partners to death and a lower stage score due to non-endorsement of these stage items on the AAAP. The construct validity of the AAAP's Stage 6 (intimacy) was already called into question by Azar's (1982) results finding no difference between a normal and a psychotic population. The difference on Stage 4 (industry) may reflect changes in the productivity level of an older person or a lessened importance of work -related task accomplishments or a lowered sense of competence due to aging effects. The difference on Stage 8 contradicts the Eriksonian notion of wisdom and the acceptance of one's life cycle as a developmental task of older adults.

The results of this study add further evidence that the AAAP Stage 6 is of questionable validity in the context of a measure of psychosocially related developmental tasks. Beyond this, however, the age-related differences on stage scores raise questions about the usefulness of the AAAP as a developmental measure.

Table 4.5 records the rank order of the three age groups for the means scores for the eight AAAP stages. Though only two of these rank orderings are statistically significant, the pattern of these rank



orderings is interesting and suggestive. It is difficult to explain these results based on Eriksonian theory. As previously noted, the Stage 8 results are opposite of what would be predicted by the theory. Stage 8 is the task of older adults, and it would be expected that they would score higher on that stage and that younger adults would be lowest. For this sample the youngest adults score highest and the oldest adults score lowest. It would also be predicted by the theory that a sample of healthy older adults would manifest mastery of a greater number of the developmental stages in order than younger adults, but, again, this is not the case for this sample.

It is possible that what is being observed is a cohort effect of this cross-sectional research design, in which older adults at present will score lower on the AAAP and that if this study were repeated in 30 years the older adult group at that time would score much higher across the stage scores. It may be that what occurs developmentally is a peaking of stage scores (and their related developmental task competencies) more toward middle life with a gradual diminution of those stage-related competencies over time. Eriksonian theory does not consider this possibility, particularly for psychologically healthy development across the life span. Rather, developmental theory would posit that basic life tasks of trust, industry, identity, and the like once accomplished are typically maintained and become the building blocks for later developmental tasks.

In Table 3.14, a summary was presented of the mean stage scores for this research sample and several other studies. Examination of these averages across the studies demonstrates a high degree of similarity.

The samples include adults from age 19 to 69 (Azar, 1982) and a sample of college-aged students, aged 18-22 (Valdez, 1984). The stage score means for the college-aged sample are not particularly different from those of the other, broader age-span samples. The college-aged sample, according to the theory, has not yet struggled with the crises of Stages 7 and 8 and has only begun to work through the issues of Stage 6. How is it that their Stages 7 and 8 scores, then, are so similar to those of a broader-based and older sample? This is a similar question to that which was raised above in discussing this research sample and the observation that young adults scored higher than older adults on several stages.

When we consider the concept of mastery of the stages using the procedure developed by Azar (1982) and discussed in Chapter III, there are additional challenges to the use of the AAAP as a psychosocial developmental measure. Table 4.6 lists the AAAP stages and (a) the percentage of subjects who mastered each stage regardless of the chronological order and (b) the percentage of subjects for whom the particular stage was the highest stage mastered in order.

Considering the mastery of any stage regardless of the order, several observations appear contrary to the theoretically expected outcome, if the AAAP is indeed a developmental measure. The sample for this research was drawn from a normal population assumed to be psychologically healthy, and yet 16% of this sample did not master any of the AAAP stages at all. It would be expected from Eriksonian theory that fewer persons would master the higher stages, since successful completion of later psychosocial tasks is based on successful resolution of earlier crises and the development of earlier competencies. However, fewer of this

sample's subjects mastered Stages 2, 4, and 5 than mastered Stages 6 and 7.

When consideration is given to the mastery of stages in order, the evidence from this sample does not support the utility of the AAAP as a measure of developmentally sequenced tasks. Eriksonian theory would predict that a decreasing number of subjects would master successive stages and that a population of normal adults would have a large percentage of persons who have completed the issues related to childhood and adolescence. However, for this sample 67% only mastered up to Stage 1 (trust), and 86% only mastered through Stage 4 (industry)--both tasks of childhood, according to Eriksonian theory. Said somewhat differently, this would mean that a large portion of the subjects in this sample was dealing unsuccessfully with psychosocial tasks from childhood.

The preceding analysis leads this researcher to question the use of the AAAP as a chronological developmental measure. The results with this sample do not support this use of the AAAP; and, based on the observed similarities with other samples using the AAAP, it would be expected to find the same phenomena with those samples as well. The AAAP clearly needs refinement and modification before its continued use as a research tool and developmental measure. The directions that this additional research might take would include the establishment of age-related norms for each AAAP stage; modification of the mastery levels; longitudinal research to assess any cohort effects; reexamination of the items utilized for each stage for their content, relevance to Eriksonian theory, and relationship to each other.

Having discussed this major limitation in the AAAP, it is necessary to ask what is being measured by the stage scores of the AAAP. The scale reliabilities for each of the stages are very high (see Table 3.14), and the item-to-total scale reliabilities are relatively high (Azar, 1982). These scale properties would suggest that the stage scores are measuring some characteristic personality trait or psychosocial task. Rather than measuring the sequential acquisition of these characteristics, this researcher concludes that these Stage scores can be understood better as measuring aspects of a normal or healthy adult personality. It will be in this way that the subsequent discussion of results will be treating the stage scores.

#### Other Limitations

There are several other important limitations to the present study which must be kept in mind as one considers the results of the data analysis and attempts to draw conclusions about the meaning of the results.

1. The sample of this study was composed of adults who were religiously affiliated. The sample was somewhat narrow. It was an essentially all white, Protestant, middle-class sample, in general better educated than the general population of the country, state, or local area. Conclusions reached from this study's results apply only to this type of population: white, middle class, and Protestant church affiliated. Having said this, it is nonetheless true that the results reported for AAAP scores and ROS scores of this sample compare favorably

with results from other research studies summarized in Chapters II and III on diverse populations.

2. A major limitation to these results and their interpretation is the cross-sectional nature of the design of the study. With a cross-sectional study, the differences across the age groupings may be cohort effects, reflecting the cultural and historical situation of that age group. For example, the generally lower AAAP stage scores or the increase in E scores observed in the older age grouping of this sample, may be a cohort effect. Our culture may be promoting better psychological health and a more healthy religiousness so that when the younger age group becomes the older age group (a generation from now), they will score higher than the older age group of this study. There have been no longitudinal studies with either of the major instruments of this design and without longitudinal data one can never be certain that any observed differences are not a cohort effect. Age-related results must be considered with this caution in mind.
3. The study is primarily descriptive in nature. In this type of survey research, specific statements of causation are not possible, although descriptions of apparent effects of variables on other variables are possible.
4. The correlational statistics for the original hypotheses, though considered statistically significant, are not especially large. The relationships between variables in those cases may not be particularly meaningful or

interpretable. When this is the situation, collaborative evidence must be found to support specific conclusions and/or any conclusions drawn must be qualified.

5. A relatively large number of different types of analyses were conducted after the original hypotheses were tested, and few of these post hoc results were statistically significant. There is an increased probability of a Type II error as the number of analyses increases. That is, it is possible that some of the significant results are the result of chance and do not represent true significant results. Alternatively, the small number of significant results may be related to the measurement problems and validity considerations which were discussed concerning the AAAP, or they may be related to the sampling procedure utilized and/or some unknown measurement difficulty with the ROS scales or four-fold typology. Whatever the reason, the fact that few of the analyses reached a statistically significant level requires caution about the interpretation of the results and the conclusions drawn from the study.

Having stated that few significant results are a limitation to this study and its results, it is nevertheless the case that none of the results obtained either for the original hypotheses or for the additional analyses when utilizing ROS and AAAP scores were significant in the opposite direction from that which was predicted on the basis of theory or previous research with the exception of the age-related

considerations with the AAAP. While one must be very cautious about drawing conclusions on the basis of "trends" in the pattern of results or results that "approach significance," the pattern of results from this study do conform to the general pattern of expected results.

6. A final limitation of the present study was in the general formulation of the underlying theory and original hypotheses. The theoretical and research underpinnings to the present study did not allow for a detailed specification of the relationship between the independent and dependent variables, particularly when consideration is given to the Eriksonian stages. The broad sweep of the hypotheses was not able to take into account either individual differences or nomothetic changes across the life span on the manifestation of either religious orientation or successful resolution of the psychosocial developmental tasks. The present stage of research in the psychology of religion in general and the developmental sub-specialty of the psychology of religion in particular does not have a sufficient body of knowledge upon which to be more specific than the early chapters of this dissertation; however, the general nature of the hypotheses did require some additional attempts to analyze the results, to explain the findings, and to search for relationships.

### Discussion

The results of this study indicate that intrinsic religious orientation is unrelated to the specific normal or healthy psychosocial characteristics which are measured by the AAAP. This result could be an artifact of the measurement difficulties discussed regarding the AAAP. It may be that scores on the stages became distributed in such a way that differences between subjects are flattened out at the healthy end of the scales. The scope of this study does not allow for the exploration of measurement issues.

However, a reexamination of the original hypotheses regarding a positive correlation between I and each of the stages of the AAAP would lead to a different prediction of the relationship between the two sets of variables. As stated, the original hypotheses 1 and 2 imply that higher I is positively related to better than average, that is, more psychologically healthy personality characteristics of trust, autonomy, identity, and so forth. Presence of High I would be expected to be related to a higher than average functioning person. Intrinsically religious persons according to the hypotheses were expected to do better than the general population of adults. When the previous research utilizing ROS is re-considered it shows that most studies have drawn comparisons between different subgroups of religiously affiliated or religiously identified populations. So the comparisons were between religious persons' scores on I and E and some other variable(s) of interest and not between I and a normal population not identified or classified as to degree of religiousness or church affiliation (Meadow & Kahoe, 1984; Donahue, 1985a; Bergin et al., 1988). Across many of the



studies summarized in Chapter II, E was positively correlated to less desirable or healthy characteristics, and I was often uncorrelated with either less desirable traits or more healthy traits. In this regard, then, non-significant results with I are consistent with previous research utilizing other independent variables of interest.

In addition, the nature of the correlational statistical procedure meant that the I score was indirectly confounded with the subjects' score on E. Persons could score high on both I and E. These subjects, identified as Indiscriminately Religious, would be expected to be the least healthy and to be lowest on the stage scores, which was generally the case. These subjects' lower scores would tend to cancel out any positive correlation between high I and high stage score, if this relationship existed for subjects with high I and lower E.

On one stage of the AAAP, there was a significant positive relationship with I. The higher a subject's score on I, the higher that subject's score on Stage 8 (wisdom). These two scales and the constructs they are measuring appear to be related. An item analysis of both Stage 8 items and I items did not reveal similar content, which would have then explained this relationship.

It seems intuitively that an intrinsic religious faith and Stage 8 (wisdom) would be similar or related. Intrinsic religious orientation represents an attempt to integrate one's faith into one's life. For this person religious or personal faith is a way of living, of viewing life, of making sense of the world. Faith, God, religion are regarded as personally relevant. It can be said that with an intrinsic orientation to one's religion, one has a philosophy of life. I may be associated

with the development of the wisdom of Stage 8. Though an intrinsic orientation may be associated with a more rigid or inflexible person, conservative theologically and even indiscriminate in religious preferences, it still issues in a relatively consistent orientation to life and the events of life. So high I may help a person to make sense of life and its varied events. Alternatively, it may be that persons who have a general sense of the meaning of their lives and an acceptance of their life processes may be drawn to a more intrinsic expression of religious faith.

When consideration is given to an extrinsic religious orientation by itself, a different picture emerges. For both the original hypotheses and the post hoc analyses, more statistically significant results were obtained. The results from this study were consistent with previous research in which E was related to less healthy or desirable traits (Meadow & Kahoe, 1984; Donahue, 1985a). In this study, E was negatively correlated with scores on Stages 2, 5, 6, and 8. While it may be that these results and/or the non-significant results are related to some unknown measurement problem of the AAAP, such as the variability of subject responses and the range of scores on a particular stage, there are theory-based explanations of these significant results that make sense.

E is described as a more dependent and immature religious orientation, and this may contribute to a less independent personality, one in which the individual struggles with the will to be oneself. Persons who are less autonomous, less individuated may not be able to develop a more committed faith which requires them to stand alone. It

may be that E is related to the less healthy (and frequently caricaturized) aspects of some very religious persons and denominations: self-punishing, self-critical, experiencing shame or guilt and doubts about oneself and one's worth. I, by contrast, would represent a movement beyond these primitive intropunitive measures to self-acceptance, forgiveness, and empowerment.

Relative to Stage 5 (identity), extrinsic religiousness appears related to a lowered self confidence in both the internal experience of the person and in the interpersonal realm. Extrinsic religiousness has been described as defensive, security-seeking, prejudicial, intolerant, utilitarian, uncommitted. This sounds much like a description of a person of low self concept and with little comfort about his/her identity. A lack of clarity about oneself may lead to either hesitation and uncertainty in one's commitments and involvements (religious or otherwise) or else chagrin about one's participations and involvements. Both of these are characteristic of higher E. Additionally, it may be that lacking a clear sense of self leads to the adoption of a looser, less-coherent religious philosophy.

Significant results for Stage 6 must be very cautiously discussed because of the discriminate validity problem of stage 6 on the AAAP found in the original research. Since Azar (1982) found that Stage 6 scores were not different between a normal and a psychiatric population, any conclusions regarding Stage 6 must be qualified. Having said this, the negative relationship between high E and lower score on Stage 6 was consistent with that predicted on the basis of theory. Persons with high E may tend to begin less satisfactory relationships with others or create

them out of their own neediness. Extrinsic religious orientation tends to be more egocentric, self-serving, self-absorbed, and manipulative. Clearly these traits are unlikely to facilitate a warm interpersonal bond. Building on the results discussed above for Stages 2 and 5, developmental theory would posit the need for a sense of independence and identity before one can enter into an intimate, long-term, faithful relationship with another person. One must be in relationship to oneself before one can be in relationship to others. Stages 2 and 5 are concerned with intrapersonal and interpersonal competencies and unsuccessful resolutions. These would be predictive of unsuccessful resolution on Stage 6. Interestingly, the non-significant results of Stages 3 (initiative) and 4 (identity) are consistent with and supportive of this interpretation. Those two "stages" have to do with tasks related to a sense of competence in work and productivity not so much in interpersonal relationships.

Stage 8 (wisdom) was found to have an inverse relationship to E. As E becomes higher, score on Stage 8 tends to become lower. E is a more fragmented or compartmentalized approach to religion, such that personal faith is not a motivator in the individual's life. Extrinsic religious orientation is also less reflective or introspective and related to a less examined life. So that a lack of a more committed, individualized, personalized religious faith may lead to a reduced ability to develop a meaningful philosophy of life. Alternatively, it may be that the lack of a sense of coherence about life in general, a lack of acceptance of one's life course may lead to a more detached, compartmentalized, extrinsic religion. As with the discussion of the previous significant results,

these two aspects of personality appear to be intertwined and mutually reinforcing.

Using the four-fold typology, only one comparison was statistically significant. On Stage 2 (autonomy), the Non-religious and Intrinsic groups scored higher than the Extrinsic and Indiscriminately Religious. These differences were in the direction predicted on the basis of the religious orientation theory. Several of the different analyses using Stage 2 were significant, and this may indicate that as a measurement issue, "autonomy" is easier to operationalize than some of the other AAAP characteristics. It requires a certain level of independence, a capacity to choose for oneself and the ability to act on one's choices. Intrinsic religiousness could develop out of a personality in which Stage 2 issues were successfully resolved. Persons who are intrinsic in their religious orientation would have ways to deal with failures that would not lead to a sense of shame, guilt, or self-doubt, but could be viewed as self-renewing, since mistakes and failures are forgiven and acceptance is unconditional in an intrinsic orientation. It could be argued then that it would tend to promote personal responsibility and autonomous functioning.

### Conclusions

The major conclusions to be drawn from this study are the following.

1. Intrinsic religiousness is relatively unrelated to normal/healthy psychosocial development as described by Eriksonian theory and measured by the AAAP.

2. Intrinsic religiousness does appear to be positively related to the task of Stage 8 (wisdom). Intrinsic religiousness tends to be related to higher scores on Stage 8 of the AAAP. Intrinsic religiousness is an attempt to integrate the personal faith and beliefs into the whole of a person's life and experiencing and is, therefore, consistent with the tasks of developing a philosophy of life, finding meaning and purpose in life, and accepting one's life cycle.
3. Extrinsic religiousness by itself is not related to the psychosocial tasks or traits of basic trust (Stage 1), initiative and purpose (Stage 3), industry and competence (Stage 4), and generativity (Stage 7).
4. Extrinsic religiousness considered by itself appears to be negatively related to the psychosocial tasks of autonomy (Stage 2), identity (Stage 5), intimacy (Stage 6), and wisdom (Stage 8). The greater the presence of an extrinsic religious orientation, the more likely that a person will experience guilt, self-doubt, and self-punishing attitudes; lack of clarity about the self; difficulty in or less satisfying relationships with others; and a sense of lack of clarity about life's meaning and about a guiding philosophy for one's life.
5. Persons who have high extrinsic religious orientation are overall less psychologically healthy than persons who are low extrinsic. The evidences for this conclusion include not only the results for Hypotheses 3 and 4, but also the post

hoc analyses with High E and Low E groups. This negative relationship between a highly extrinsic religious orientation and nearly all of the healthy characteristics of the AAAP allows the conclusion that this is a generalized phenomena. If the stage tasks are somewhat related to chronological age of ascendancy of the crisis and mastery or resolution of that crisis, than one can conclude that extrinsic religiousness is related to less healthy overall psychological or personality development. At the very least, high extrinsic religious orientation is related to less healthy psychological functioning than low extrinsic religiousness.

6. There is no evidence that intrinsically religious people (or any other kind of religious people) are more psychologically healthy than non-religious people.
7. Intrinsic and non-religious persons appear to do better on the psychological task of autonomous functioning (Stage 2). These two types of persons are, therefore, probably less concerned with self doubts, feelings of interpersonal inferiority, and lack of a sense of power, will, and capability.
8. There is some evidence which would indicate that in general intrinsic and non-religious persons enjoy better psychological functioning than do extrinsic and indiscriminately religious persons across all of the psychosocial characteristics studied.

9. Both self-reported intrinsic and extrinsic religious orientations show a tendency to increase with age. This may be a cohort effect of this cross sectional study, which might disappear if a longitudinal study were done tracking the same cohorts' changes in I and E over time. The findings of this study contradict the proposal of Gorsuch and Venable (1983) that E might decrease with age and I increase with chronological age. This study does not provide support for the idea that I and E are chronological developmental phenomenon. There is evidence that I and E are differentially related to other personality characteristics and measures of psychological health. It may be suggested that I and E are related to pervasive personality bases emerging in experiences and intra-psychic processes during the course of psychosocial development. So that for adults, E is positively related to a less healthy or perhaps more dysfunctional personality. In contrast, I by itself is not related to psychological functioning or health except for the influence it has on the development of a coherent guiding philosophy of life.
10. Conversion experience correlates positively with higher I and lower E, perhaps because of the personal nature of the experience of the believer with God that characterizes most conversion experiences. I and E are not affected by either presence or absence of (a) a reported experience of disillusionment with one's personal religious faith or (b) an



experience profoundly affecting one's view of self, others, and life.

11. Both a report of a period of disillusionment with one's religious faith and report of an experience profoundly affecting one's life are related to a higher Stage 8 (wisdom), to higher I and lower E, and to a generally healthier functioning personality.

Persons who report one or the other or both of these experiences tend to have a better resolution of the principle tasks of later adulthood: developing a guiding philosophy of life and accepting one's life cycle. A period of questioning, scepticism, and doubts about one's religion can lead to a deeper commitment and a more meaningful, integrated personal faith, which then forms a set of values and principles for living. This intrinsic religious orientation can contribute to a sense of life having ultimate meaning and personal satisfaction and to a more clearly articulated sense of acceptance of one's life, that is, to wisdom.

Alternatively, a carefully considered philosophy of life (task of Stage 8) can facilitate a person's movement through a period of disillusionment or through a profound experience endowing those experiences with significance and enhancing overall subsequent development. Clearly, a life that is reflected upon and which derives value and meaning from its experiences will likely be more integrated, committed,

healthy, and in a traditional sense "wise." A self examined life is probably a healthier life.

12. In a broad sense, the question raised in Chapter I can be answered affirmatively: there is a healthier way of being religious (Low Extrinsic) and a less healthy way of being religious (High Extrinsic). The evidence of this study both supports and extends previous research in explicating healthy and unhealthy religiousness.

#### Implications for Practitioners

The results of this study could be a source of encouragement to religious educators, ministers, and other religious professionals, for the results are consistent with much of what is preached and taught by religious professionals regarding the value of a committed religious faith which is integrated into a person's life and forms a motivational core of the individual's identity and lifestyle. Most religious traditions would support the notion that an intrinsic religious orientation is more desirable than an extrinsic orientation. This generalization is supported by the research in this dissertation.

Though specific causation was beyond the scope of the design of this study, it can be said that a greater extrinsic religiousness is related to a generally less-psychologically healthy personality. No conclusion can be reached to decide whether the unhealthy personality causes/predisposes the person to be more extrinsically religious or whether the extrinsic religious orientation causes/predisposes toward a less healthy personality. Despite this inability to settle this age-old

dispute, religious professionals can utilize the obvious relationship between high E and lower mental health to encourage the development of an intrinsic religiousness both for adults and children. Teaching, preaching, and various learning opportunities which challenge E and facilitate movement toward greater I are supported by this research. Additionally, for religious professions to have background in human development and the psychological sciences and to actively seek to integrate the insights of psychology into their teaching, preaching, and pastoral care may promote better mental health, better relationships, better parenting, which in turn may foster the development of a more committed intrinsic religious faith orientation. One further cautionary note, this research does not address the question of whether by helping an adult to score higher on I (that is, become more intrinsic) that person will become more psychologically healthy; nor that if one helps a person become more psychologically healthy, then that individual will become more intrinsic. Those changes would mean that these two phenomena were not only related (a conclusion reachable on the basis of this study) but were also causally and directionally related (a conclusion not possible on the basis of this study).

As will be suggested below, the ROS has the potential to be utilized by counseling professionals with religious clients as a rather crude, differential diagnostic tool, if norms based on large, diverse samples were available. At this point it is not possible to use the ROS in this way, other than perhaps by a sensitive clinician using the pattern of scores on I and E intuitively.

Clinicians do need to develop a sense of these two religious orientations so that with religious clients a valuable diagnostic distinction can be made between those clients who are High E and those who are Low E. This differentiation can influence the therapist's way of relating to the client, the degree of self-disclosure of the therapist's own religious orientation and theological perspectives, and by suggestion of the manner of handling the religious content discussed by the client. As with other parts of a theoretical model of mental health and the goals of counseling which intuitively guide any clinician, this research supports a conceptualization of a more and less healthy religiousness.

The process of psychotherapy encourages self-reflection and exploration of one's life experiences. Clinicians when they facilitate personal reflection promote greater overall health and life satisfaction. Disillusionment with one's religious faith or any life event that has a profound impact on the client and which can be examined in the therapeutic process can become integrated into one's outlook on life and influence one's philosophy of life. Therapy can facilitate the development of a greater sense of coherence, meaning, and purpose in life and lead to a more mature religious faith.

#### Implications for Future Research

There are a variety of implications from this study for future research. Several of these implications would represent modification to the research design and methodology of this study, while others would involve refinement of the two major instruments utilized in this study.

The sample for this study limited the generalizability of the conclusions. A broader sample from a more heterogeneous population would allow for applicability of the results to the general population. A broader sample would be racially diverse, more socioeconomically diverse, and involve a greater number of denominations. Use of a population not identified as religiously affiliated would likely produce a broader spread on the ROS subscales. The present sample of Protestant, religiously affiliated adults does not allow for generalizations about persons affiliated with other religions, nor does it allow for conclusions about non-affiliated religious persons or non-religious persons.

Though a cross-sectional design has its advantages, it also has limitations. There was a small positive relationship between both I and E and age of subject. It is unclear from this cross-sectional study whether this represents a cohort effect or a general trend toward increased religiousness (of whatever orientation) as a person grows older. There is a clear need to specify the nature of the relationship between I and E and chronological age. A longitudinal study would allow for the exploration of changes in subjects' manifestations of I and E, as well as changes on the AAAP stage scores.

This study raised questions about the usefulness and validity of the AAAP as a chronological developmental measure. Further research using this instrument is necessary to further examine this tentative conclusion. Larger samples from broader populations would be useful to establish age-related and gender-related norms for each of the stage scores. A reevaluation of the mastery levels for the stages and the use

and meaning of those mastery levels would be valuable as an aid to future research. The AAAP is not without value as a measure of psychologically healthy personality variables; however, additional normative data is needed, and further examination and refinement of the psychometric properties of the stages would make the AAAP a more valuable and useful developmental measure.

Another study similar in design to this one could choose to utilize a different measure of psychosocial development. A recently published (1988) instrument based on Eriksonian theory of personality development called the Measures of Psychosocial Development by Gwen A Hawley, Ph.D., appears to have relatively good scale properties, norms for a large sample ( $n = 2,480$ ), and construct validity established through a series of multitrait-multimethod analyses. An instrument with more clearly established construct validity and with age-related norms would provide a basis for more specific conclusions about the relationship between psychosocial development and religious orientation.

The ROS has continuing value as a tool in research regarding the psychology of religion. The ROS could potentially be used as a brief screening device by counselors, chaplains, ministers, and other professionals concerned with mental healthy and religious or spiritual issues. The ROS has the potential to differentiate healthy and unhealthy religiousness and be used as an indicator of overall relative psychological functioning. This potential is only realizable if norms are established for the ROS subscales with diverse populations and denominational affiliations. Age- and gender-related norms are necessary to determine cut-off scores for both I and E. Continued standardization

of research methods and scoring procedures with the ROS will allow for valid comparisons across studies. Researchers must report various statistics for the E and I scales so that normative data can be developed and generalizations across studies can be made.

The four-fold typology of religious orientation groups does not appear to have explanatory value, at least with these independent variables. This may be the case for other studies. The use of a median split of the sample on the basis of E appears to generate more meaningful comparison groups (High E and Low E). Using a four-fold median split may require elimination of subjects falling around the median of both I and E to create what might be considered "purer" religious orientation groups.

Additional research using other measures of psychologically healthy, personality variables, or psychopathology could build on the generalizations from this study concerning the religious orientations and psychological health.

## **APPENDIX**



Dear Friend,

We are writing to encourage you to participate in a scientific research project being conducted by Jay M. Terbush, a doctoral candidate at Michigan State University. The purpose of the research is to study normal adult development and attitudes toward religion. At a recent meeting of our Board of Deacons, approval was given to Jay to approach persons who are connected with our church to ask for your help. Your name was selected at random from our mailing list--no one from our church knows to whom this letter is going.

This is an important study because, unlike much other research that looks at religious faith and mental problems, this study is looking at normal (mentally healthy) adults who are church affiliated. Your responses are very important as part of the study, whether you are very active in church or not, whether you consider yourself a religious person or not very religious.

In order to participate, you are being asked to fill out the following three items in the enclosed booklet: (a) a Data Sheet, (b) the Assessment of Adult Adjustment Patterns--which asks you questions about many aspects of adult life, and (c) the Religious Life Inventory--which asks your opinion about a variety of questions about religion.

It will probably take you about one to one and one-half hours to complete these forms, which ask you for your own opinions about many aspects of your life. We encourage you to complete them within the next week. When you have finished all three sets of questions, please mail the booklet back in the enclosed stamped, addressed envelope.

All responses to these questions will be entirely anonymous. We ask you not to put your name on any of these forms. Of course, your participation is entirely voluntary. You may choose not to participate at all or to refuse to answer certain of the questions. Though your participation would be extremely helpful to this research, there will be no way for anyone to know whether you participate or not.

You indicate your voluntary agreement to participate by completing and returning these questionnaires. If you choose not to complete these forms, we ask you to please mail them back anyway so that they can be reused.

Although no direct benefit to you can be expected from filling out these questionnaires, we think that the questions and thinking about your answers will be interesting to you. The researcher will be offering an adult seminar to all the members of our church to discuss the research results and implications for adult development and faith. If you have any questions or concerns about participating in this research or would be interested in the results of this study, please contact Jay Terbush at (517) 224-3440.

Thank you very much for participating in this important research.

Sincerely,

Church Official

Jay M. Terbush, M.A., M.Div.

DATA SHEET

1. ☐ Male ☐ Female

2. Age: \_\_\_\_\_

3. Educational Level (check highest level completed):

- ☐ Grade school
- ☐ High school
- ☐ Some college/trade school
- ☐ Bachelor's degree
- ☐ Master's degree
- ☐ Doctoral/professional degree

4. Race: ☐ Black  
☐ Hispanic  
☐ Oriental  
☐ Native American Indian  
☐ White/Caucasian  
☐ Other (specify: \_\_\_\_\_)

5. Your church denominational affiliation: \_\_\_\_\_

6. Denominational affiliation of your parents:

Father: \_\_\_\_\_

Mother: \_\_\_\_\_

7. Personal theological orientation (what label would you chose for your religious beliefs and practices?):

- ☐ Fundamentalist
- ☐ Evangelical
- ☐ Conservative
- ☐ Orthodox
- ☐ Moderate
- ☐ Liberal
- ☐ Other (specify: \_\_\_\_\_)

8. What is the degree of your interest in religion?

- ☐ not interested
- ☐ slightly interested
- ☐ moderately interested
- ☐ very interested

9. How religious are you? Please circle one number on the line below.

1      2      3      4      5      6      7

Not Religious at All	Average	Very Religious

10. How frequently do you attend worship services of your church?

- ☐ rarely or never
- ☐ infrequently (2-3 times a year)
- ☐ occasionally (6-10 times a year)
- ☐ once a month
- ☐ two or three times a month
- ☐ once a week
- ☐ more than once a week

11. Have you had a religious conversion experience (i.e., been "born again," experienced a major change in your beliefs or religious practices, etc.)?

☐ Yes ☐ No

If yes, at what age? \_\_\_\_\_ Briefly describe what happened and how it affected your life.

12. Have you had a point in your life where you became disillusioned with or seriously questioned your religious beliefs, your church practices, etc.? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, at what age? \_\_\_\_\_ Briefly describe what happened and how it affected your life.
13. At what age did you receive most of your formal religious training (i.e., classes, study groups, church school, confirmation, Sunday school, etc.)? \_\_\_\_\_ childhood (before age 12) \_\_\_\_\_ adolescence (12-18) \_\_\_\_\_ young adulthood (18-30) \_\_\_\_\_ middle adulthood (30-50) \_\_\_\_\_ later adulthood (50 ---)  
Briefly describe the nature of this religious training.
14. Have you had an experience(s) that you would say profoundly affected your view of life, your self-concept or your relationships with other people? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, at what age? \_\_\_\_\_ Briefly describe what happened and how it affected you.
15. Recent experience of grief or loss: during the past 12 months, have you experienced any of the following? Please check any that apply to you.
- \_\_\_\_\_ separation/divorce
  - \_\_\_\_\_ death of spouse
  - \_\_\_\_\_ death of parent
  - \_\_\_\_\_ death of child
  - \_\_\_\_\_ death of close/intimate friend
  - \_\_\_\_\_ loss of employment by self or spouse
  - \_\_\_\_\_ moving to a new community more than 30 minutes from previous residence
  - \_\_\_\_\_ significant/life threatening illness or loss of physical function in self, spouse, or immediate family member
  - \_\_\_\_\_ major financial change
  - \_\_\_\_\_ significant relationship tension/conflict with a family member or friend

# RELIGIOUS ORIENTATION SCALE

**DIRECTIONS:** The following items are statements which a person might make about his/her attitude toward religion and faith. Some people would agree with and some people would disagree with each of these items. Please rate your agreement or disagreement with each statement on the five point rating scale from (1) Strongly Agree to (5) Strongly Disagree. Circle the number closest to your own attitude. There are no right or wrong answers. It is important that you answer with your own opinion.

	Strong Agree	1	2	3	4	5	Strong Disagree		Strong Agree	1	2	3	4	5	Strong Disagree
1. What religion offers me most is comfort when sorrows and misfortune strike.								11. The church is most important as a place to formulate good social relationships.							
2. I try hard to carry my religion over into all my other dealings in life.								12. Although I believe in my religion, I feel there are many more important things in my life.							
3. Religion helps me to keep my life balanced and steady in exactly the same way as my citizenship, friendships, and other memberships do.								13. If not prevented by unavoidable circumstances, I attend church.							
4. One reason for my being a church member is that such membership helps to establish a person in the community.								14. If I were to join a church group, I would prefer to join a Bible study group rather than a social fellowship.							
5. The purpose of prayer is to secure a happy and peaceful life.								15. I pray chiefly because I have been taught to pray.							
6. It doesn't matter so much what I believe so long as I lead a moral life.								16. Religion is especially important to me because it answers many questions about the meaning of life.							
7. Quite often I have been keenly aware of the presence of God or the Divine Being.								17. A primary reason for my interest in religion is that my church is a congenial social activity.							
8. My religious beliefs are what really lie behind my whole approach to life.								18. I read literature about my faith (or church).							
9. The prayers I say when I am alone carry as much meaning and personal emotion as those said by me during services.								19. Occasionally I find it necessary to compromise my religious beliefs in order to protect my social and economic well-being.							
10. Although I am a religious person, I refuse to let religious considerations influence my everyday affairs.								20. It is important for me to spend periods of time in private religious thought and meditation.							
								21. The primary purpose of prayer is to gain relief and protection.							

ASSESSMENT OF ADULT ADJUSTMENT PATTERNS  
by M.W. Farquhar, F.R. Wilson, J.A. Azar

**DIRECTIONS:** Please answer these questions as honestly as you can. The statements were designed to measure how you view yourself and how you view life in general. Be as honest as you possibly can. Work quickly, not spending too much time on any one question. There are no right or wrong answers to these questions. Try to answer each item using the responses below. Mark your answers with an "X" through the number that is next to the statement.

All items are to be rated:

- (1) Definitely true of me
- (2) True of me, or mostly true of me
- (3) Not true of me, or mostly not true of me
- (4) Definitely not true of me

Example: 1. I believe that people should save money.

(1) (2) (3) (4)

This person marked space number one, indicating the belief indicating the belief that people should save money is

- |  |                 |   |                 |
|--|-----------------|---|-----------------|
| 1. I learn fast.   | (1) (2) (3) (4) | 13. When I argue, I use facts to support my position.   | (1) (2) (3) (4) |
| 2. I generally attend community or school meetings.                              | (1) (2) (3) (4) | 14. When the situation demands, I can go into deep concentration concerning just about anything.      | (1) (2) (3) (4) |
| 3. I have gone door-to-door collecting signatures on a petition.                 | (1) (2) (3) (4) | 15. I publicly question statements and ideas expressed by others.                                     | (1) (2) (3) (4) |
| 4. I give blood (or would if not medically prohibited).                          | (1) (2) (3) (4) | 16. People are more important to me than material things.   | (1) (2) (3) (4) |
| 5. My life is the result of choices I have made.                                 | (1) (2) (3) (4) | 17. It's easy for me to know whether people really like me.   | (1) (2) (3) (4) |
| 6. When I have to speed up and meet a deadline, I can still do good work.        | (1) (2) (3) (4) | 18. I enjoy interacting with children.  | (1) (2) (3) (4) |
| 7. I generally feel pleased with my performance when I talk in front of a group. | (1) (2) (3) (4) | 19. I have volunteered my name as a witness at the scene of a crime or an accident.                   | (1) (2) (3) (4) |
| 8. I like children.  | (1) (2) (3) (4) | 20. I enjoy being sexually stimulated.  | (1) (2) (3) (4) |
| 9. I have difficulty in getting down to work.                                    | (1) (2) (3) (4) | 21. I have actually sought out information about my school board members in order to form an opinion. | (1) (2) (3) (4) |
| 10. If I want to, I can charm a member of the opposite sex.                      | (1) (2) (3) (4) | 22. I do things for my community.   | (1) (2) (3) (4) |
| 11. I make it a point to vote in all elections.                                  | (1) (2) (3) (4) | 23. How many friends I have depends on how pleasing a person I am.                                    | (1) (2) (3) (4) |
| 12. I check things out for myself.   | (1) (2) (3) (4) | 24. I handle myself well at social gatherings.  | (1) (2) (3) (4) |

25. I can work on ideas for hours. (1) (2) (3) (4) (1) (2) (3) (4)
26. I have "put myself on the line" in my relations with others. (1) (2) (3) (4) (1) (2) (3) (4)
27. My social life is full and rewarding. (1) (2) (3) (4) (1) (2) (3) (4)
28. When things are not going right in my work, I reason my way through the problems. (1) (2) (3) (4) (1) (2) (3) (4)
29. It is hard for me to keep my mind on what I am trying to learn. (1) (2) (3) (4) (1) (2) (3) (4)
30. I am confident when learning a complicated task. (1) (2) (3) (4) (1) (2) (3) (4)
31. If I can't solve a problem quickly, I lose interest. (1) (2) (3) (4) (1) (2) (3) (4)
32. I like problems that make me think for a long time before I solve them. (1) (2) (3) (4) (1) (2) (3) (4)
33. I enjoy finding out whether or not complex ideas work. (1) (2) (3) (4) (1) (2) (3) (4)
34. I like problems which have complicated solutions. (1) (2) (3) (4) (1) (2) (3) (4)
35. When I was younger, I wanted to run away from home. (1) (2) (3) (4) (1) (2) (3) (4)
36. I enjoy parties. (1) (2) (3) (4) (1) (2) (3) (4)
37. I feel self-confident in social situations. (1) (2) (3) (4) (1) (2) (3) (4)
38. I can work even when there are distractions. (1) (2) (3) (4) (1) (2) (3) (4)
39. I feel uneasy if I don't know the next step in a job. (1) (2) (3) (4) (1) (2) (3) (4)
40. I can work under pressure. (1) (2) (3) (4) (1) (2) (3) (4)
41. I feel that people are genuinely interested in me. (1) (2) (3) (4) (1) (2) (3) (4)
42. In times of trouble, I have friends I turn to. (1) (2) (3) (4) (1) (2) (3) (4)
43. It is hard for me to work on a thought problem for more than an hour or two. (1) (2) (3) (4) (1) (2) (3) (4)
44. I learn well when someone gives me the problem and lets me work out the details myself. (1) (2) (3) (4) (1) (2) (3) (4)
45. I have difficulty imagining how other people feel. (1) (2) (3) (4) (1) (2) (3) (4)
46. People like to work with me. (1) (2) (3) (4) (1) (2) (3) (4)
47. In times of crisis, I'm one of the first people my friends call for help. (1) (2) (3) (4) (1) (2) (3) (4)
48. When I was prepared, teachers couldn't fool me with trick questions. (1) (2) (3) (4) (1) (2) (3) (4)
49. I am dedicated to my work. (1) (2) (3) (4) (1) (2) (3) (4)
50. In my work I show individuality and originality. (1) (2) (3) (4) (1) (2) (3) (4)
51. I am proud of my work. (1) (2) (3) (4) (1) (2) (3) (4)
52. My plans work out. (1) (2) (3) (4) (1) (2) (3) (4)
53. I get stage fright when I have to appear before a group. (1) (2) (3) (4) (1) (2) (3) (4)
54. When I'm in a group, I feel confident that what I have to say is acceptable. (1) (2) (3) (4) (1) (2) (3) (4)
55. I get caught up in my work. (1) (2) (3) (4) (1) (2) (3) (4)
56. I like to solve problems. (1) (2) (3) (4) (1) (2) (3) (4)
57. When I get hold of a complicated problem, I return to it again and again until I come up with a workable solution. (1) (2) (3) (4) (1) (2) (3) (4)
58. I get along with people. (1) (2) (3) (4) (1) (2) (3) (4)
59. The thought of making a speech in front of a group panics me. (1) (2) (3) (4) (1) (2) (3) (4)

(1) = Def. true of me  
(2) = True of me

(3) = Not true of me  
(4) = Def. not true of me

- |  |                 |   |                 |
|--|-----------------|---|-----------------|
| 60. I feel inferior to most people.  | (1) (2) (3) (4) | 77. I think about the big issues of life.   | (1) (2) (3) (4) |
| 61. For me to learn well, I need someone to explain things to me in detail.              | (1) (2) (3) (4) | 78. I like to discuss ways to solve the world's problems.                                   | (1) (2) (3) (4) |
| 62. When I took a new course in school, I felt confident that I would do all right.      | (1) (2) (3) (4) | 79. When I decide to do something, I am determined to get it done.                          | (1) (2) (3) (4) |
| 63. I play around so much I have a hard time getting a job done.                         | (1) (2) (3) (4) | 80. I like to answer children's questions.  | (1) (2) (3) (4) |
| 64. No matter what the task, I prefer to get someone to do it for me.                    | (1) (2) (3) (4) | 81. I give clothing and other items to charitable organizations such as the Salvation Army. | (1) (2) (3) (4) |
| 65. I feel proud of my accomplishments.  | (1) (2) (3) (4) | 82. I lend things to my neighbors when they need them.                                      | (1) (2) (3) (4) |
| 66. I will probably always be working on new projects.                                   | (1) (2) (3) (4) | 83. I work to make my community better for children.  | (1) (2) (3) (4) |
| 67. My judgment is sound.  | (1) (2) (3) (4) | 84. I have gone door-to-door collecting money for charity.                                  | (1) (2) (3) (4) |
| 68. People expect too much of me.  | (1) (2) (3) (4) | 85. I see to it that my work is carefully planned and organized.                            | (1) (2) (3) (4) |
| 69. I feel useless.  | (1) (2) (3) (4) | 86. I find it hard to keep my mind on a task or job.  | (1) (2) (3) (4) |
| 70. I'm interested in people.  | (1) (2) (3) (4) | 87. I go at my work without much planning ahead of time.                                    | (1) (2) (3) (4) |
| 71. I enjoy doing favors for my friends.   | (1) (2) (3) (4) | 88. I am proud of the accomplishments I have made at work.                                  | (1) (2) (3) (4) |
| 72. I am always a loyal friend.  | (1) (2) (3) (4) | 89. Completed and polished products have a great appeal for me.                             | (1) (2) (3) (4) |
| 73. I do many things well.   | (1) (2) (3) (4) | 90. I read a great deal, even when my work does not require it.                             | (1) (2) (3) (4) |
| 74. I like to participate actively in intense discussions.                               | (1) (2) (3) (4) | 91. I have worked on a school committee.  | (1) (2) (3) (4) |
| 75. When I sit down to learn something, I get so caught up that nothing can distract me. | (1) (2) (3) (4) | 92. I devote time to helping people in need.  | (1) (2) (3) (4) |
| 76. I know the children who live in my neighborhood.                                     | (1) (2) (3) (4) | 93. I feel there is nothing I can do well.  | (1) (2) (3) (4) |

94. I am active in community or school organizations. (1) (2) (3) (4) (1) (2) (3) (4)
95. Children bore me. (1) (2) (3) (4) (1) (2) (3) (4)
96. I can stay with a job a long time. (1) (2) (3) (4) (1) (2) (3) (4)
97. I like curious children. (1) (2) (3) (4) (1) (2) (3) (4)
98. Young people are doing a lot of fine things today. (1) (2) (3) (4) (1) (2) (3) (4)
99. I enjoy the times I spend with young people. (1) (2) (3) (4) (1) (2) (3) (4)
100. Children's imaginations fascinate me. (1) (2) (3) (4) (1) (2) (3) (4)
101. I have met the leaders of my community and have formed my own opinions about them. (1) (2) (3) (4) (1) (2) (3) (4)
102. I keep my word. (1) (2) (3) (4) (1) (2) (3) (4)
103. I do not understand myself. (1) (2) (3) (4) (1) (2) (3) (4)
104. Because I have to be so different from situation to situation, I feel that the real me is lost. (1) (2) (3) (4) (1) (2) (3) (4)
105. Children talk to me about personal things. (1) (2) (3) (4) (1) (2) (3) (4)
106. I am proud of my accomplishments. (1) (2) (3) (4) (1) (2) (3) (4)
107. I enjoy things that make me think. (1) (2) (3) (4) (1) (2) (3) (4)
108. I enjoy explaining complex ideas. (1) (2) (3) (4) (1) (2) (3) (4)
109. I get those things done that I want to do. (1) (2) (3) (4) (1) (2) (3) (4)
110. I am pretty much the same person from situation to situation. (1) (2) (3) (4) (1) (2) (3) (4)
111. I do not expect people to be consistent. (1) (2) (3) (4) (1) (2) (3) (4)
112. I have very few good qualities. (1) (2) (3) (4) (1) (2) (3) (4)
113. Often other people determine the kind of person I am. (1) (2) (3) (4) (1) (2) (3) (4)
114. My work is usually up to the standards set for me. (1) (2) (3) (4) (1) (2) (3) (4)
115. I am determined to be the kind of person I am. (1) (2) (3) (4) (1) (2) (3) (4)
116. I'm just not very good with children. (1) (2) (3) (4) (1) (2) (3) (4)
117. I am good at solving puzzles. (1) (2) (3) (4) (1) (2) (3) (4)
118. My happiness is pretty much under my own control. (1) (2) (3) (4) (1) (2) (3) (4)
119. I feel disappointed and discouraged about the work I do. (1) (2) (3) (4) (1) (2) (3) (4)
120. I keep up with community news. (1) (2) (3) (4) (1) (2) (3) (4)
121. Once I have committed myself to a task, I complete it. (1) (2) (3) (4) (1) (2) (3) (4)
122. I feel more confident playing games of skill than games of chance. (1) (2) (3) (4) (1) (2) (3) (4)
123. I feel confident when learning something new that requires that I put myself on the line. (1) (2) (3) (4) (1) (2) (3) (4)
124. I never have serious talks with my friends. (1) (2) (3) (4) (1) (2) (3) (4)
125. I like the way young children say exactly what they think. (1) (2) (3) (4) (1) (2) (3) (4)
126. I like to participate in intense discussions. (1) (2) (3) (4) (1) (2) (3) (4)
127. I feel awkward around members of the opposite sex. (1) (2) (3) (4) (1) (2) (3) (4)
128. I analyze my own motives and reactions. (1) (2) (3) (4) (1) (2) (3) (4)
129. I feel deep concern for people who are less well off than I am. (1) (2) (3) (4) (1) (2) (3) (4)
130. People of the opposite sex think well of me. (1) (2) (3) (4) (1) (2) (3) (4)
131. I enjoy interacting with children. (1) (2) (3) (4) (1) (2) (3) (4)



(1) = Def. true of me  
(2) = True of me

(3) = Not true of me  
(4) = Def. not true of me

- |   |                 |  |                 |
|---|-----------------|--|-----------------|
| 132. I find it easy to introduce people.  | (1) (2) (3) (4) | 148. Even though I do not like the thought of it, my death does not frighten me.                               | (1) (2) (3) (4) |
| 133. My table manners at home are as good as when I eat out in a restaurant.    | (1) (2) (3) (4) | 149. I have had experiences in life which were so intense that they were almost mystical.                      | (1) (2) (3) (4) |
| 134. I am a worthwhile person.  | (1) (2) (3) (4) | 150. I feel good when others do something nice for me.   | (1) (2) (3) (4) |
| 135. It is very important that my mate loves me.                                | (1) (2) (3) (4) | 151. I am close to someone with whom I talk about my feelings.   | (1) (2) (3) (4) |
| 136. My life is what I made it to be.   | (1) (2) (3) (4) | 152. I have been so close to somebody that it is not possible to find adequate words to describe the feelings. | (1) (2) (3) (4) |
| 137. My basic state of happiness is dependent upon me.                          | (1) (2) (3) (4) | 153. I don't think I'll ever find someone to love.   | (1) (2) (3) (4) |
| 138. I make my own decisions.   | (1) (2) (3) (4) | 154. My values change as I discover more about life and the universe.  | (1) (2) (3) (4) |
| 139. I can't stand the children who live in my neighborhood.                    | (1) (2) (3) (4) | 155. I ignore the feelings of others.  | (1) (2) (3) (4) |
| 140. It's pretty neat to be me.   | (1) (2) (3) (4) | 156. I would not care to be much different than I am.  | (1) (2) (3) (4) |
| 141. I get a feeling for the meaning of life through contemplation.             | (1) (2) (3) (4) | 157. I get a feeling for the meaning of life through art.  | (1) (2) (3) (4) |
| 142. I have not deliberately said something that hurt someone's feelings.       | (1) (2) (3) (4) | 158. My feelings about nature are almost sacred.   | (1) (2) (3) (4) |
| 143. I like myself.   | (1) (2) (3) (4) | 159. I am sometimes irritated by people who ask favors of me.  | (1) (2) (3) (4) |
| 144. Compliments embarrass me.  | (1) (2) (3) (4) | 160. With the person I am closest to, I share my inner feelings of confidence.                                 | (1) (2) (3) (4) |
| 145. I am self confident.   | (1) (2) (3) (4) | 161. I find myself thinking about things much more deeply than I did in years past.                            | (1) (2) (3) (4) |
| 146. I am not irked when people express ideas very different from my own.       | (1) (2) (3) (4) | 162. There have been times when I was quite jealous of the good fortune of others.                             | (1) (2) (3) (4) |
| 147. Getting along with loudmouthed, obnoxious people is not impossible for me. | (1) (2) (3) (4) | 163. I keep my word.   | (1) (2) (3) (4) |

164. I cannot stand silence. (1) (2) (3) (4)
165. When someone says something critical about me, I keep my composure. (1) (2) (3) (4)
166. The best times of my life were in the past. (1) (2) (3) (4)
167. Even when I am doing something I really enjoy, I can never get totally involved. (1) (2) (3) (4)
168. After a lot of hard struggling, I am comfortable being me. (1) (2) (3) (4)
169. I enjoy privacy. (1) (2) (3) (4)
170. I have been so close to someone that our relationship seemed almost mystical. (1) (2) (3) (4)
171. When I get angry at someone, I boil inside without letting them know. (1) (2) (3) (4)
172. As far as I know about myself, once I choose a mate, I do so for life. (1) (2) (3) (4)
173. For me to act on a sexual urge, I have to have feelings for the other person. (1) (2) (3) (4)
174. I am sensitive to how other people feel. (1) (2) (3) (4)
175. When I am alone, silence is difficult to handle. (1) (2) (3) (4)
176. I learn from constructive criticism. (1) (2) (3) (4)
177. There have been occasions when I felt like smashing things. (1) (2) (3) (4)
178. It's good to be alive. (1) (2) (3) (4)
179. I have been so close to someone that at times it seemed as if we could read each other's mind. (1) (2) (3) (4)
180. I have no one with whom I feel close enough to talk over my day. (1) (2) (3) (4)
181. I get a feeling for the meaning of life through beauty. (1) (2) (3) (4)
182. I like to be by myself a part of every day. (1) (2) (3) (4)
183. I have had experiences in life when I have been overwhelmed by good feelings. (1) (2) (3) (4)
184. I trust the spontaneous decisions I make. (1) (2) (3) (4)
185. With the person I am closest to, I share my inner anxieties and tensions. (1) (2) (3) (4)
186. I play fair. (1) (2) (3) (4)
187. I can make big decisions by myself. (1) (2) (3) (4)
188. I am amazed at how many problems no longer seem to have simple right and wrong answers. (1) (2) (3) (4)
189. I don't worry whether anyone else will like the friends I choose. (1) (2) (3) (4)
190. I like being by myself. (1) (2) (3) (4)
191. I am a citizen of the world. (1) (2) (3) (4)
192. I am basically cooperative when I work. (1) (2) (3) (4)
193. It is very important that my mate likes to snuggle. (1) (2) (3) (4)
194. When I get angry at someone, it rarely wrecks our relationship. (1) (2) (3) (4)
195. I can see little reason why anyone would want to compliment me. (1) (2) (3) (4)
196. I am strong enough to make up my own mind on difficult questions. (1) (2) (3) (4)
197. I am comfortable being alone. (1) (2) (3) (4)

- (1) = Def. true of me  
(2) = True of me
- (3) = Not true of me  
(4) = Def. not true of me
198. I have a person with whom I talk about my deepest feelings about sex. (1) (2) (3) (4) (1) (2) (3) (4)
199. The more I look at things, the more I see how everything fits with everything else. (1) (2) (3) (4) (1) (2) (3) (4)
200. I find there are a lot of fun things in this world to do alone. (1) (2) (3) (4) (1) (2) (3) (4)
201. Even though I am pretty much in touch with who I am, I am always discovering new aspects of myself. (1) (2) (3) (4) (1) (2) (3) (4)
202. The inner wisdom of people never ceases to amaze me. (1) (2) (3) (4) (1) (2) (3) (4)
203. I feel strongly about some things. (1) (2) (3) (4) (1) (2) (3) (4)
204. It is very important that my mate be thoughtful of me. (1) (2) (3) (4) (1) (2) (3) (4)
205. I get a feeling for the meaning of life through nature. (1) (2) (3) (4) (1) (2) (3) (4)
206. Life gets better as I get older. (1) (2) (3) (4) (1) (2) (3) (4)
207. When I get angry at someone, I tell them about it, and it's over. (1) (2) (3) (4) (1) (2) (3) (4)
208. There is at least one person in my life with whom I can talk about anything. (1) (2) (3) (4) (1) (2) (3) (4)
209. Whatever age I am always seems to be the best. (1) (2) (3) (4) (1) (2) (3) (4)
210. With the person I am closest to, I share my inner feelings. (1) (2) (3) (4) (1) (2) (3) (4)
211. There have been times when I felt like rebelling against people in authority even though I knew they were right. (1) (2) (3) (4) (1) (2) (3) (4)
212. No matter who I'm talking with, I'm a good listener. (1) (2) (3) (4) (1) (2) (3) (4)
213. If someone criticizes me to my face, I listen closely to what they are saying about me before reacting. (1) (2) (3) (4) (1) (2) (3) (4)
214. I have had an experience where life seemed just perfect. (1) (2) (3) (4) (1) (2) (3) (4)
215. I am outspoken. (1) (2) (3) (4) (1) (2) (3) (4)
216. Circumstances beyond my control are what make me a basically unhappy person. (1) (2) (3) (4) (1) (2) (3) (4)
217. I can take a stand. (1) (2) (3) (4) (1) (2) (3) (4)
218. I have a sense of awe about the complexity of things in the university. (1) (2) (3) (4) (1) (2) (3) (4)
219. I have had moments of intense happiness, when I felt like I was experiencing a kind of ecstasy or a natural high. (1) (2) (3) (4) (1) (2) (3) (4)
220. I can remember "playing sick" to get out of something. (1) (2) (3) (4) (1) (2) (3) (4)
221. I give help when a friend asks a favor. (1) (2) (3) (4) (1) (2) (3) (4)
222. No matter what the task, I prefer to do it myself. (1) (2) (3) (4) (1) (2) (3) (4)
223. I like to gossip at times. (1) (2) (3) (4) (1) (2) (3) (4)
224. If someone criticizes me to my face, I feel low and worthless. (1) (2) (3) (4) (1) (2) (3) (4)
225. I sometimes try to get even rather than forgive and forget. (1) (2) (3) (4) (1) (2) (3) (4)
226. I do not intensely dislike anyone. (1) (2) (3) (4) (1) (2) (3) (4)

227. I like being able to change my plans without having to check with somebody. (1) (2) (3) (4) (1) (2) (3) (4)
228. I see to it that my work is carefully planned and organized. (1) (2) (3) (4) (1) (2) (3) (4)
229. My values are formed from many sources, and I integrate them to give meaning to my life. (1) (2) (3) (4) (1) (2) (3) (4)
230. With the person I am closest to, I share my inner feelings of weakness. (1) (2) (3) (4) (1) (2) (3) (4)
231. I seem to understand how other people are feelings. (1) (2) (3) (4) (1) (2) (3) (4)
232. I just can't be courteous to people who are disagreeable. (1) (2) (3) (4) (1) (2) (3) (4)
233. When people express ideas very different from my own, I am annoyed. (1) (2) (3) (4) (1) (2) (3) (4)
234. When I was young, there were times when I wanted to leave home. (1) (2) (3) (4) (1) (2) (3) (4)
235. Being close to another person means sharing my inner feelings. (1) (2) (3) (4) (1) (2) (3) (4)
236. I value the deep relationships I have formed with the opposite sex. (1) (2) (3) (4) (1) (2) (3) (4)
237. I sometimes feel resentful when I don't get my way. (1) (2) (3) (4) (1) (2) (3) (4)
238. It is very important that my mate likes to touch me and be touched by me (hold hands, hug, etc.). (1) (2) (3) (4) (1) (2) (3) (4)
239. I feel free to express both warm and hostile feelings to my friends. (1) (2) (3) (4) (1) (2) (3) (4)
240. Being deeply involved with someone of the opposite sex is really important to me. (1) (2) (3) (4) (1) (2) (3) (4)
241. How many friends I have depends on how pleasant a person I am. (1) (2) (3) (4) (1) (2) (3) (4)
242. I am ashamed of some of my emotions. (1) (2) (3) (4) (1) (2) (3) (4)
243. I never like to gossip. (1) (2) (3) (4) (1) (2) (3) (4)
244. For me, sex and love are tightly linked together. (1) (2) (3) (4) (1) (2) (3) (4)
245. The closest I get to another person is to share my opinions and ideas. (1) (2) (3) (4) (1) (2) (3) (4)
246. Reading or talking about sex stimulates me. (1) (2) (3) (4) (1) (2) (3) (4)
247. I get a feeling for the meaning of life through music. (1) (2) (3) (4) (1) (2) (3) (4)
248. I have not found a person with whom I can be close. (1) (2) (3) (4) (1) (2) (3) (4)
249. As I look back at my past decisions, although I wish I might have done things differently, I realize those were the best decisions I could make at the time. (1) (2) (3) (4) (1) (2) (3) (4)
250. My morals are determined by the thoughts, feelings, and decisions of other people. (1) (2) (3) (4) (1) (2) (3) (4)
251. I act independently of others. (1) (2) (3) (4) (1) (2) (3) (4)
252. I wouldn't enjoy having sex with someone I was not close to. (1) (2) (3) (4) (1) (2) (3) (4)
253. I go out of my way to avoid being embarrassed. (1) (2) (3) (4) (1) (2) (3) (4)
254. I rarely check the safety of my car, no matter how far I am traveling. (1) (2) (3) (4) (1) (2) (3) (4)
255. I have been punished unfairly. (1) (2) (3) (4) (1) (2) (3) (4)
256. Sometimes I deliberately hurt someone's feelings. (1) (2) (3) (4) (1) (2) (3) (4)
257. With the person I am closest to, I share my inner feelings of tenderness. (1) (2) (3) (4) (1) (2) (3) (4)

(1) = Def. true of me  
(2) = True of me

258. I have had experiences in life when I have felt so good that I have felt completely alive. (1) (2) (3) (4)
259. If I were one of the few surviving members from a worldwide war, I would make it. (1) (2) (3) (4)
260. People like me. (1) (2) (3) (4)
261. No one understands me. (1) (2) (3) (4)
262. My parents caused my troubles. (1) (2) (3) (4)
263. It takes a lot to frighten me. (1) (2) (3) (4)
264. There are questions that interest me which will not be answered in my lifetime. (1) (2) (3) (4)
265. I must defend my past actions. (1) (2) (3) (4)
266. It's hard for me to say "no" without feeling guilty. (1) (2) (3) (4)
267. I feel optimistic about life. (1) (2) (3) (4)
268. My free time is spent aimlessly. (1) (2) (3) (4)
269. Feelings of guilt hold me back from doing what I want. (1) (2) (3) (4)
270. My word is my bond. (1) (2) (3) (4)
271. I admit my mistakes. (1) (2) (3) (4)
272. I worry or condemn myself when other people find fault with me. (1) (2) (3) (4)
273. I am happy. (1) (2) (3) (4)
274. I believe people are basically good. (1) (2) (3) (4)

(3) = Not true of me  
(4) = Def. not true of me

275. My feelings are easily hurt. (1) (2) (3) (4)
276. Whatever stage of life I am in is the best one. (1) (2) (3) (4)
277. When somebody does me wrong, I get so hung up on my own feelings I can't do anything but brood. (1) (2) (3) (4)
278. When I feel tense, there is a good reason. (1) (2) (3) (4)
279. I like being able to come and go as I please. (1) (2) (3) (4)
280. I have taken time to help my neighbors when they need it. (1) (2) (3) (4)
281. I worry about things that never happen. (1) (2) (3) (4)
282. I have feelings of doom about the future. (1) (2) (3) (4)
283. I trust others. (1) (2) (3) (4)
284. I am basically an unhappy person. (1) (2) (3) (4)
285. My family understood me while I was growing up. (1) (2) (3) (4)
286. Mostly I like to just sit at home. (1) (2) (3) (4)
287. I am happy with the pace or speed with which I make decisions. (1) (2) (3) (4)
288. People hurt my feelings without knowing it. (1) (2) (3) (4)
289. I take the unexpected in my stride. (1) (2) (3) (4)
290. I frighten easily. (1) (2) (3) (4)
291. I eat balanced meals. (1) (2) (3) (4)
292. I find people are consistent. (1) (2) (3) (4)

293. My day-to-day frustrations do not get in the way of my activities. (1) (2) (3) (4) (1) (2) (3) (4)
294. I think the best way to handle people is to tell them what they want to hear. (1) (2) (3) (4) (1) (2) (3) (4)
295. I worry about my future. (1) (2) (3) (4) (1) (2) (3) (4)
296. It takes something of real significance to upset me. (1) (2) (3) (4) (1) (2) (3) (4)
297. My mistakes annoy me, but do not frighten me. (1) (2) (3) (4) (1) (2) (3) (4)
298. Guilt is a feeling I seem to have outgrown. (1) (2) (3) (4) (1) (2) (3) (4)
299. I believe the best times are now. (1) (2) (3) (4) (1) (2) (3) (4)
300. I constantly need excuses for why I behave the way I do. (1) (2) (3) (4) (1) (2) (3) (4)
301. When I feel worried, there is usually a pretty good reason. (1) (2) (3) (4) (1) (2) (3) (4)
302. Basically, I feel adequate. (1) (2) (3) (4) (1) (2) (3) (4)
303. I like people who say what they really believe. (1) (2) (3) (4) (1) (2) (3) (4)
304. I learn things as fast as most people who have my ability. (1) (2) (3) (4) (1) (2) (3) (4)
305. People respect my work because I do a good job. (1) (2) (3) (4) (1) (2) (3) (4)
306. I am picky about my food. (1) (2) (3) (4) (1) (2) (3) (4)
307. I don't need to apologize for the way I act. (1) (2) (3) (4) (1) (2) (3) (4)
308. I have a lot of energy. (1) (2) (3) (4) (1) (2) (3) (4)
309. I am calm. (1) (2) (3) (4) (1) (2) (3) (4)
310. No matter what the task, I prefer to get someone to do it for me. (1) (2) (3) (4) (1) (2) (3) (4)
311. I am willing to admit it when I don't know something. (1) (2) (3) (4) (1) (2) (3) (4)
312. I enjoy being sexually stimulated by someone I don't know. (1) (2) (3) (4) (1) (2) (3) (4)
313. I am an even-tempered person. (1) (2) (3) (4) (1) (2) (3) (4)
314. If a clerk gives me too much change, I correct the error. (1) (2) (3) (4) (1) (2) (3) (4)
315. I punish myself when I make mistakes. (1) (2) (3) (4) (1) (2) (3) (4)
316. My duties and obligations to others trap me. (1) (2) (3) (4) (1) (2) (3) (4)
317. I was raised in a happy family. (1) (2) (3) (4) (1) (2) (3) (4)
318. When it's time to go to bed, I fall asleep easily. (1) (2) (3) (4) (1) (2) (3) (4)
319. My parents treated me fairly. (1) (2) (3) (4) (1) (2) (3) (4)
320. I am a stable, dependable worker. (1) (2) (3) (4) (1) (2) (3) (4)

## FOLLOW-UP POSTCARD

You are very important! A few days ago you received questionnaires concerning normal adult development and attitudes toward religion. Your participation in this research (by completing those questionnaires) will help educators, ministers, and counselors to better understand healthy adults of all ages and the issues they (and we!) face.

If you have already completed and returned those questionnaires--thank you! If not, could you please do so today? Because these questionnaires are being sent to only a small, randomly chosen sample of people from several churches, your response is extremely important to the study and the accuracy of the results.

If by some chance you did not receive the questionnaires or if they have gotten misplaced, please call Barbara Reeves (517/355-8447) or me (517/224-3440) so we can put another set in the mail today.

Jay M. Terbush, M.A., M.Div.  
Project Director

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