

EFFECT OF RELIGIOUS COPING ON FAITH MATURITY AS MODERATED BY HOPE

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ABSTRACT

As a consideration based in the psychology of religion and hope theory, correlations between religious coping and faith maturity are explored with particular focus on identifying hope as a moderating factor. With hypotheses that religious coping predicts faith maturity as moderated by hope, Snyder's trait hope and state hope scales along with the Pargament's Brief RCOPE and Piedmont and Nelson's Faith Maturity Scale-Short Form, developed from Benson, Donahue, and Erickson's larger Faith Maturity Scale, are employed via survey of an adult Christian convenience sample. The study is informed largely by Pargament's work with use of religion, unique in comparison to spirituality, as a valid form of coping, both negative and positive, with stress response as well as Snyder's progressive theories on hope, as distinct from other positive psychology postulations regarding optimism and religiously-based theories of eschatological or theological hope. A review of many often divergent conceptual constructs based on empirically-validated scales with statistically significant findings contributing to a robust but still growing and specialized domain of biopsychosocial research is undertaken with implications for client health and practitioner standards for care.

Keywords: religion, spirituality, religious coping, faith maturity, hope

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Dedication

This scholarly work is dedicated in loving memory of my mother, Lindel Sue Walker, father, Hoyt Guilford Thomas, aunt, Beverly Ann Clark, and grandmother, Viola Moore Walker, whose godly examples of love, care, and support made my successes in this life all the more possible.

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List of Abbreviations

FMS	Faith Maturity Scale
FMS-SF	Faith Maturity Scale-Short Form
HFM	Horizontal faith maturity
NRC	Negative religious coping
NIV	New International Version
PRC	Positive religious coping
RCOPE	Religious coping measure
VFM	Vertical faith maturity

CHAPTER ONE: INTRODUCTION

Overview

Hope can be seen almost universally as important to human existence, and, in a noteworthy recent heralding, the instillation of hope was found to be one of the most important factors in therapy (Yalom & Leszcz, 2005). While it is commonly referenced in general or unscientific terms as an element in practically all helping professions yet with the exception of a few social scientists, such as Snyder (1994), hope has not often received concentrated and consistent attention by modern researchers among varied sciences. However, given its frequent use in language and literature as well as reference across religion and culture (Ferguson, 1999), perhaps a focus upon hope should be ever on our minds with both curiosity and intention beyond current applications led now, primarily, by positive psychologists via engendered optimism (Seligman, 2018). Especially given the merits of a hope-filled faith within pastoral counseling models (Lester, 1995), hope would also seem a paramount endeavor in any interventive strategy but most especially when addressing client needs from a religious perspective; wherein lies an opportunity for heightened psychological and theological overlay in related theories and practice. Identifying hope-related factors of a state (Snyder et al., 1996) and trait (Snyder, 2006) nature within data employing previously studied and well-documented religiously-based (Pargament, Koenig, & Perez, 2000) and faith-oriented (Benson, Donahue, & Erickson, 1993) measures represents a unique opportunity to examine an interplay of cultural meanings and scientific relevance that has not previously been explored.

Background

The exploration of hope can become complex when religious versus spiritual implications are considered and weighed between diverse schools of thought in terms of human

biopsychosocial experiencing. Numerous studies regarding religion and religious coping (Pargament, 2002) and a few related applications of maturity found in faith (Ciarrocchi, Dy-Liacco, and Deneke, 2008) emerged during the 1990s alongside the psychology of hope (Snyder, 1994; Weis & Speridakos, 2011) with broad definitional parameters for these and other terms used in related studies (Harris, Howell, & Spurgeon, 2018). Findings from such varied research focuses may not have resulted in significant collective application of these constructs by way of further study then or in the early 2000s, as positive psychology advanced and as hope-related impacts garnered new interest in regard to therapeutic factors and interventive measures (Yalom & Leszcz, 2005; Bartholomew, Scheel, & Cole, 2015), but hope theory and its related models were extended and did continue to expand thereafter (Bernardo, 2010; Scioli, Ricci, Nyugen, & Scioli, 2011; Edwards & Jovanovski, 2016).

Problem Statement

Schools of psychological and philosophical thought have viewed religion and spirituality distinctly throughout history and entire faith systems the world over have developed in response to these contemplations with both positive and negative implications for mental health (Salsman & Carlson, 2005). However, similar to religion and spirituality (Miller & Delaney, 2004), a fully integrative and uniform definition of hope for clinical and pastoral use has remained elusive (Capps, 2001) despite the emergence of varied models that individually frame or holistically approach many aspects found within related constructs (Marks, 2005; Rovers & Kocum, 2010) as well as the study of how hope may interrelate to stress and religious coping (Krause & Pargament, 2018). Regardless, hope, generally and with its many variations in meaning and utility of practice, prevails as important in client care prompting further consideration of its application, and Snyder (2000), very specifically, desired that his work in this arena be expanded

to such ends. Still, particularly given the many terms used, focuses of research, outcomes from study, and practices consequentially applied, how to best marry all these subjects in a manner beneficial for informed practice remains a challenge; especially when exploring religion and spirituality can be seen as an even greater extension of the already broad-based biological, psychological, and sociological factorial constructs for human experiencing within integrative holistic care (Singh & Madan, 2017). The problem remains that no study has clearly linked religious coping with faith maturity within a framework of hope, either theologically- or psychologically-based, thereby codifying related terminology and applying beliefs or practice toward measurable therapeutic outcomes or metrics.

Purpose Statement

While interpretations of what hope is and how it relates to coping via religion or experiencing the spiritual may vary somewhat among faith communities, many common criteria for what it is to be hopeful or hopeless outside of religious worldviews and spiritual paradigms can be found in the shared secular meanings and psychological practices that developed in recent decades (Beck, Weissman, Lester, & Trexler, 1974; Obayuwana et al., 1982; Flaskas, 2007; Kinghorn, 2013; Wlodarczyk, 2015; Cohen-Chen, Crisp, & Halperin, 2017; Hellman, Robinson-Keilig, Dubriwny, Hamill, & Kraft, 2018). With applications of psychological hope in relation to religious and faith communities as the intended primary outcome for this study, identifying religious coping and faith-oriented measures to correlate in regard to a preeminent psychological theory on hope (Snyder, 1994) quickly became a priority. Use of two, potentially moderating, measures well-recognized as useful instruments in the psychology of hope developed by Snyder (2002) in conjunction with a scale, the independent variable, originally developed and validated predominately as a measure of Christian coping through religiosity (Pargament et al., 2000;

Pargament, Tarakeshwar, Ellison, & Wuluff, 2001; Pargament & Raiya, 2007) as well as a scale, the dependent variable, also originally developed and validated predominately as a measure of Christian faith maturation (Benson et al., 1993; Piedmont & Nelson, 2001; Hui, Wai Ng, Ying Mok, Ying Lau, & Cheung, 2011) with queries of basic demographic information form the research instrumentation basis for the this quantitative survey study. This combination is intended for the purpose of offering insight into psychologically-defined hope expressed via an adult Christian sample to better inform Christian pastoral counseling and clinical therapeutic interventions for Christian clients by examining any correlations between religious coping and faith maturity with possible moderation by state and trait hope.

Significance of the Study

Combining elements from psychology and theology in a thoughtful and purposeful manner can potentially yield greater relevance and applicability for and enhance behavioral health services afforded to Christians, as well as believers of other faiths, in relation to a more integrative but scientific construct of hope – one that is broader than Christian eschatology alone (Moltmann, 1967). Much like pastoral psychology occurs with great relevance at the intersection of theology and psychology via the intention to assume characteristics of a cross-disciplinary approach that does not diminish the value and contributions of either distinct discipline (Agilkaya-Sahin, 2018, p. 185), the commonalities found in varied constructs of hope can be exploited for the good of clients without undermining distinctions between each allowing care providers to fulfill an optimal role as an appropriate purveyor of hope (Capps, 2001). Similarly, as Rogers (1950, p. 6) suggested, ministers “equipped with the insight and skill of the science of human behavior have a significant and unique contribution to make” in relation to the care of populations in need of mental health services. Given this, identifying new and relevant

religiously-integrative opportunities that can be defended with scientific data is important to bridge psychology and theology for clients of faith, and the study explained herein does just that by examining two religiously-focused topics with therapeutic implication while also exploring the potential for moderating factors that might be found with psychology of hope constructs.

This research positions previously unexamined construct scenarios (i.e., correlational factors of religious coping on faith maturity with moderation by state and/or trait hope in the context of any correlated religious coping and faith maturity relationship) within a single study while drawing from and building upon multiple directly-related or tangential studies where the constructs have been studied in regard to other correlative data and mediating or moderating factors. A somewhat recent and perhaps the most similar previously published research study showed that faith maturity predicted measures of hope (Ciarrocchi et al., 2008) while another more recent and somewhat similar study illustrated that faith maturity predicted stress-related growth and positive affect (Werdel, Dy-Liacco, Ciarrocchi, Wicks, & Breslford, 2014). Also, previous and relevant research relating to personality explored trait hope factors in correlation to religious values via self-esteem (Ciarrochi & Heaven, 2012) as well as faith maturity correlation to trait hope (Ciarrochi, Heaven, & Davies, 2007).

The fact that these preceding studies cited share authors in common is noteworthy but indicative of the limited research undertaken that includes two or more combinations of the four measures used in this study. However, multiple other studies exploring some correlative, mediating, or moderating relationships employed one or more of these same religious, faith, and hope variables citing key findings relating to or with pertinent implications for the study, including: religious coping mediation on a faith maturity and stress-related growth relationship (Harrowfield and Gardner, 2010); state hope predicting daily positive affect (Steffen & Smith,

2013); faith maturity and posttraumatic growth as predictors of subjective wellbeing (Galea, 2014); positive religious coping affecting the development of hope (Shamsalinia, Pourghaznein, & Parsa, 2015); and trait hope mediation protecting against anxiety (Wang et al., 2017). Drawing from these explorations and other research, results from this study could serve as a further extension of Snyder's psychology of hope as well as Pargament's psychology of religion with numerous potential applications for related research topics that may impact the quality of care for Christians and non-Christians by both mental health clinicians and pastoral care providers.

Research Questions

Limiting the surveyed population to adult Christians via a convenience sample, measures of coping via religious means correlated to measured maturation of faith with regression analysis as well as state hope and trait hope as potential moderators were considered. Such analysis had the potential to reveal previously unidentified beneficial relationships for planning and executing counseling deliverables to Christians that emphasize elemental hope to improve therapeutic alliance and client outcomes. With these exploratory aspects in mind, the following research questions were used to further determine methodology and guide the progression of this quantitative study.

RQ1: Does religious coping predict faith maturity?

RQ2: Does hope moderate a relationship between religious coping and faith maturity?

Definitions

Given the scope of the study, certain key terms are relevant for definition and consideration at this time. These include the constructs of hope, religious coping, and faith maturity to be measured. Also, related terms are identified that form a basis from prior study

relating to these definitions and that help clarify what each measure does or does not encompass as a distinct form without bearing synonymous meaning.

- Hope is the ability to identify goals, perceive the capacity to attain goals by sourcing pathways, and motivate the use of pathways derived through cognitive agency (Snyder, 2002).
- Trait hope is a dispositional hope that can be attributable to a general or personality-based characteristic (Snyder et al., 1991; Snyder, 1994; Snyder, 2002)
- State hope is a situational hope within a precise moment of time that can also be associated with a state of emotions (Snyder et al., 1996)
- Eschatological/theological hope is a Christian belief that anticipates a future redemption of human and earthly creation (Moltmann, 1967; Hoover-Kinsinger, 2018).
- Religion is a means by which significance is sought via practice (Pargament, 1999; Pargament, 2019).
- Spirituality is a search to experience sacredness; which can be a functional derivative of religion (Pargament, 1999; Pargament, 2019).
- Religious coping is a religiously-framed positive or negative response employing a variety of faith-oriented techniques, practices, or methodologies to limit or reduce stress (Pargament, 1997).
- Faith, within a Christian belief system or biblical context, is a goal-oriented combination of hope with optimism toward attainment of an anticipated end (Hebrews 11:1, New Revised Standard Version; Ciarrocchi et al., 2008).
- Faith maturity is the degree to which a person's perceived closeness with God creates societal altruism (Benson et al., 1993; Ciarrocchi et al., 2008).

CHAPTER TWO: LITERATURE REVIEW

Overview

Although religion and spirituality have been explored in literature since the early psychological publications of Freud (1927) and Jung (1933), the development of interrelated concepts and progressive theories impacting their study has formulated somewhat slowly over time (Pargament, 2019); especially in comparison to some other behavioral health theory or more experimentally-based diagnostic criterion. This delay in analytical discernment on these concepts is perhaps best explained by their richly imbued nature regarding doctrinal, cultural, and societal elements as well as implicit psychological factors (Hill et al., 2000), and each of these concepts is expressed in very different ways (Zinnbauer, Pargament, & Scott, 2003). With a need for further research and awareness clear (Weber & Pargament, 2014), a comprehensive hope-focused religious or spiritual construct well-matched for a modern Christian or, even more-specifically, Protestant worldview has remained somewhat out of reach (Hall, Meador, & Koenig, 2017), yet researchers continue to focus efforts on clearly and distinctly defining via analysis with scientific focus on the psychiatric, psychological, and counseling aspects of faith.

Conceptual or Theoretical Framework

The focus of the aforementioned and other researchers with consideration of scriptural applicability as referenced in regard to biblical “faith, hope, and love” (I Corinthians 13:13, New International Version [NIV]) prompted this current and unique examination of what potential correlations might be found in a relationship between religion and faith as well as the possible moderating factors of hope within such a relationship. With research questions regarding the predictive qualities of religious coping on faith maturity and any moderation by way of hope in a religious coping and faith maturity relationship, definitions of religion, spirituality, faith, and

hope are critical considerations. Perhaps most key among these, given the variety of secular and religious concepts for hope that abound thereby meriting its review first, is the hope model comprised by Snyder (2000) of goals, pathways, and agency as well as his theory on hope; defined as “the perceived capability to derive pathways to desired goals, and motivate oneself via agency thinking to use those pathways” (Snyder 2002, p. 249).

Given implications of hope within and relating to faith, as well as often associated theories of optimism, self-efficacy, and self-esteem, among others, that are drawn across the disciplines of psychology, sociology, philosophy, and theology, as well as more specific factors impacting religious practices and spiritual beliefs, careful explication of all these concepts can be complex. This is due, at least in part, to valuation of religious practices among various cultures as not necessarily being germane to the healing arts or helping fields (Moodley & West, 2005) – without cultural consideration, integration of beliefs for optimal client results can be limited. However, even with consideration and attempts at integration present, assessing the religious or spiritual health of a client is not only a conceptual challenge, due to lack of clear definitions, but also a significant scientific challenge (Stebnicki, 2006).

Religion Versus Spirituality

A broad historical view of religion and spirituality can be helpful when discussing faith, and such a scope informs perspective with relation to these concepts in a behavioral health context, particularly when later adding hope as a consideration too; as religion and spirituality have been impacted by ever-expanding views across time and among countless societies, cultures, and subcultures. Implications for these constructs go beyond simple definition involving intimate and complex personal beliefs of people across every generation. Thus, as complicated phenomena in human experiencing, definitions may fail to fully or appropriately

encapsulate their deeper meaning, yet, given, or perhaps because of, this complexity, there has been a dearth of experiences researched and qualified as religious or spiritual despite the extensive role of religion in human lives (Hill et al., 2000). However, explorations in recent decades have yielded new approaches for measuring and charting distinctions of each construct (Marks, 2005), which merit detailed consideration of options for empirically-based study and touch on or expound upon numerous seminal psychological works regarding these concepts, related theories, and their explicit biopsychosocial implications for personhood.

One such undertaking is the consideration of how humans use religion as a coping mechanism. Pargament (1999) assessed the differentiation of religion from spirituality as the former being a broad construct including institution and individual while the latter is an individual expression speaking to a great human capacity. Further, Pargament (1999, p. 11) endeavored to structurally define religion as “a search for significance... efforts not only to find significance but to conserve significance once found or transform significance when necessary” to “whatever people value in their lives – be it psychological, social, physical, or spiritual; be it good or bad.” Pargament (1999, p. 12) also stated that he sees “spirituality as a search for the sacred”, which is, according to his belief, “the most central function of religion.”

Pargament, Koenig, and Perez (2000) explored more integrative approaches to use of a religious coping measure while also acknowledging the potential limitation as to whether religious coping methods work similarly in differing people facing differing stressors across faith expression or practice. As more study was promulgated, research findings served to narrow defining qualities or qualifications of experience regarding religion even as interest and propagation of spirituality-based research has expanded resulting in heightened conceptual distinctions between the two constructs (Hill et al., 2000). Citing trends toward secularism,

Pargament expressed concern over polarizing spirituality as individual and good versus religion as institutional and bad while warning of the potential that any research oriented as such or perspectives of researcher to these defaults endanger the “sacred core” (1999, p. 10) of explorations for truth by studying these and related concepts.

Not unlike the historical connection of soul and spirit in scholarly explorations, religiousness and spirituality are similarly interconnected prompting careful differentiation of the terms, larger concepts, and associated phenomena found within either leading to further research that accounts for various doctrinal, cultural, sociological, and psychological factors rather than forced distinction jeopardizing any loss of the sacred in their phenomenology (Hill et al., 2000). Additionally, positing that religiousness and spirituality were being polarized by contemporary theorists and examination of religion as a structured system versus spirituality as a personalized experienced, frames of religion as substantive with spirituality as functional, and frequent qualifications of religiousness as negative versus spirituality as positive, Zinnbauer, Pargament, and Scott (2003) suggested an alternative approach that integrates rather than polarizes the constructs with boundaries to the discipline of research acknowledging religious and spiritual diversity of expression. Further review of religiosity versus spirituality, at that time, offered an assessment of context and literature that linked physical and mental health to the distinct dimensional contributions of both religion and spiritual factors (Hill & Pargament, 2003).

Following a decade of initial research via a religiously-based measurement tool, Pargament and Raiya (2007) explained that a focus on religion and coping generated a great deal of relevant findings for the application of religious coping. These findings included: cross-sectional research methods are insufficient for uncovering intricacy and more longitudinal research is needed; greater exploration of moderators is needed to more effectively link religious

coping with outcomes; spirituality studies and psychospiritual interventions have expanded related but still distinct results in research; yet religious coping remains a unique, complex, and valid area for further research (Pargament & Raiya, 2007). Weber and Pargament (2014) later detailed the need for additional religious- and spiritually-based psychiatric research to impact lives of patients, support generalized mental health benefits, acknowledge benefits of incorporating these factors into assessment and treatment, and highlight increased awareness of these matters for practitioner research purposes.

Further study, expanding upon his prior findings, led Pargament (2019) to note that the progression of religious coping research and the development of the psychology of religion from limited research implications to religiousness and spirituality has yielded a more broadly-based exploration of meaning, well-being, and health benefits. As such, religion and coping by way of religious practice are factors that enable researchers to view spirituality via a new lenses in the grand scheme of human development. For instance, with results for religious coping varying across attachment styles, researchers suggest that support of self-knowledge regarding God attachment may be an effective means of improved coping with life stressors (Cooper, Bruce, Harman, & Boccaccini, 2018). Using hope indicators of Scheier and Carver (1985) and drawing from analysis by Peterson and Seligman (2004), Krause and Pargament (2018), asserting previous definitions of hope and optimism as very similar, hypothesized and found support that Bible reading moderates the stress to hope relationship, readers of the Bible are more likely to employ benevolent religious reappraisal, and such individuals are more hopeful in regard to the future. These linkages to hope are important considerations for fully understanding the concepts of religion and spirituality, but they are also important, perhaps even more so, for understanding how some humans coping with stress via religion may impact the maturation of faith.

Hope Expressed via Religion and Spirituality

There is a richness in traditions of hope and optimism across world religions (Ciarrocchi et al., 2008); most especially those that qualify faith as inclusive of a salvation experience, as with Christianity's explicit defining of faith as "the assurance of things hoped for, the conviction of things not seen" (Hebrews 11:1, New Revised Standard Version). Ciarrocchi, Dy-Liacco, and Deneke (2008), drawing from historical religious and psychological research perspectives, suggest that an intricate link exists between hope, optimism, and human fulfillment – "religious or spiritual approaches to life that promise human fulfillment or completion require an understanding of hope and optimism" (p. 120). These contexts, as well as the hope model and theory of hope proposed by Snyder (2000; 2002), informed a study inclusive of a biblical definition of faith wherein "a goal-directed hope and confident optimism in attaining its ends are conjoined as integral components" (Ciarrocchi et al., 2008, p. 121). This use of Snyder's State Hope Scale, two items from Pargament's religious coping measure (RCOPE) incorporated into another measure of religiousness and spirituality, and the Faith Maturity Scale (FMS), as developed by Benson, Donahue, & Erickson (1993), resulted in Ciarrocchi et al. (2008) finding that hope was predicted by religiosity, by way of both dispositional and state variables, while agency hope was strongly predicted by horizontal faith. Although the researchers noted from this study that "no simple categorization of religious/spiritual variables emerges in the prediction of hope and optimism" (Ciarrocchi et al., 2008, p. 133) the research design and questions addressed are markedly different to those posed by the study herein; despite employing three of the same measures with similar testing strategies.

In contrast to more secular definitions of hope, Krause, Pargament, and Ironson (2018a) assert their evaluation of data on a previously unanalyzed dimension of hope termed "religious

hope” (p. 698) as well as a form of generalized hope, drawn predominately from indicators of Scheier and Carver (1985), and death anxiety; where heightened death anxiety in younger and middle-aged individuals produced results suggesting that their religiously-based variant of hope, as opposed to this generalized hope, may reduce feelings of death anxiety across older individuals. The moderating religious hope in the relationship between effects of age and death anxiety (Krause, Pargament, & Ironson, 2018a), along with Snyder’s work, illustrate a range of biblically-relevant concepts of hope that may be measured scientifically and represent a broad perspective on implications for hope in religion and faith. Additionally, Anderson (2006) posits that becoming and being hopeful raises issues for a phenomenological consideration of affect theory – “hope heralds the affective and emotive as always ‘not-yet become’” (p. 733) – that represents an intriguing perspective; especially in regard to the religious construct of hope in the Christian sense and somewhat outside the parameters of Snyder’s prevailing hope theory and related research of many other modern theorists, like Seligman (2006).

Hope, as defined by Snyder (2002) as a state or trait with extension by other researchers and theorists, was explored extensively by Kinghorn (2013) in relation to building hope in Christian clients via hope-focused therapy, hope-focused interventions, and broader treatment options. Similarly, Edwards and Jovanovski (2016, p. 85) examined the intricacies of a Christian worldview arguing implications that attachment theory may be heightened and clients “(n)ot only... bring with them an already developed language around hope, and practices consistent with hope, ...they typically are held within a hopeful world-view” where “cognitive, attachment and meaning-making interventions have the potential to come together to produce a synergistic response”. However, Kinghorn (2013) distinctively addressed the hope-focused efforts of Snyder, with direct comparison to the learned optimism explorations of Seligman (2006), and

ultimately encouraged formulation of a modern psychological but faith-positive or -inclusive definition of hope for the purpose of experimental method and the mechanisms involved in order to operationalize, validate, and study it while adding theological perspective that scientific method alone fails to fully encapsulate.

Similarly, while distinguishing between optimistic hope and eschatological hope in relation to womanist theory, attachment theory, and human development in comparing complex hope and hopelessness to frame a perspective of considering a more culturally- and societal-specific for pastoral care in cases where clients have suffered significant discrimination, Ernst (2017) cited consideration of Moltmann (1967) for more inclusive religious or theological framing of hope theory. Much like Ernst (2017), Hoover-Kinsinger (2018) integrates Moltmann's Christian- and eschatology-based hope theology (1967) with Snyder's agency- and goal-focused hope theory with pathway consideration to serve as a primary bridge between theories. Interestingly, assessments of these two related but distinct secular versus faith-oriented constructs can actually be seen as complimentary and supportive in application both psychologically and theologically (Ernst, 2017; Hoover-Kinsinger, 2018).

Whether pessimism expressed via hopelessness (Beck et al., 1974) or the helplessness of a default pessimist learning optimism (Seligman, 2002), alternative considerations proliferate across disciplines that may be seen as directly or indirectly counter to Snyder's predominate interpretations of hope. For example, as well-distinguished factors, hope and expectations were explored regarding psychological distress and life satisfaction using a variety of scales in a study of adolescent users of online counseling services where results showed that although hope related strongly to distress and satisfaction expectations did not, yet hope and expectations were barely correlated with a very weak relationship (Dowling & Rickwood, 2016). The distinction

between these factors and variations in correlate relationships identified by Dowling and Rickwood (2016) could, similarly, merit further consideration of a more faith-oriented model for hope than that of Snyder (2000). However, although additional research focusing on the Christian definition of hope as inclusive of expectation could bridge theories (Dowling & Rickwood, 2016), Snyder's hope theory (2002) remains perhaps the primarily validated, robustly accepted, and most applicable means to measure psychological hope with implicit Christian freedom of choice, will, and faith (Hoover-Kinsinger, 2018).

Psychology of Religion with Distinction from Spirituality

A more narrowed focus on factors for religious coping applications involving faith maturity measures and hope theory as prefaced via a refined "psychology of religion", per early references by Pargament (1999, p. 4) until more recent references to the same by Pargament (2019, p. 48), helps reflect more closely present research on the areas of faith and hope theory with distinction of religion as a practice from spirituality as an experience. Pargament (1999, p. 14) once asserted the following.

"It does not follow though that the psychology of religion should focus exclusively on spirituality. There are other important questions for our field. For example, we should be concerned about religious means as well as ends; with methods of religious coping, prayer, and congregational involvement, even if these methods are used to reach nonspiritual goals... (T)here is an important distinction to be made between nonreligious ends and antireligious ends. The individual who returns to church in search of fellowship may be just as extrinsic as the individual who joins a church to establish his social superiority, but they are quite different in some important respects... As practicing psychologists, we might be willing to work together with religious congregations to

facilitate the health and well-being of their members, even if these goals are, at least for some, extrinsic to their faith... (W)e should also be concerned about religious socialization; how secular ends become sanctified, how seemingly nonreligious objects become imbued with sacred power.”

Relatedly, Pargament (2019, pp. 50-54), given many changes in the field over 20 years, stated recently the following.

“From James Leuba to Sigmund Freud, many social scientists have tried to explain religion in purely psychosocial or physiological terms. And yet it could be argued, on at least conceptual grounds, that there is something special or even unique about religion. After all, no other human phenomenon has as its focal point, the sacred. A case can be made... that spirituality represents another significant dimension of life, one on its own terms... No single research method can adequately capture coping because there is no single character of religious coping... I entered the psychology of religion tentatively...” and “...I found that religion was related to mental health... I had to get closer to religious life. So I began talking to people about their faith...” and “...we are now seeing efforts to integrate religious coping into the larger framework of people’s lives... Getting closer to religious experience makes our jobs as researchers more challenging... (I)n getting closer to religious experience, we are also finding that religion is richer and more dimensional than we initially imagined... (W)e need studies that use a wider range of criteria. In the last few years, investigators have begun to do just that, examining the implications for religious coping psychological, social, physical, and spiritual outcomes.”

With his passion for the study of religion and spirituality as distinct but related concepts helping forge greater research but in a somewhat different direction, as reported years later, Pargament’s

work has impacted many studies in the field of psychology, and the newly theorized psychology of religion forms the primary basis for the purpose of this study while also shaping the problem statement and questions being asked in it.

Further Differentiation of Religion from Faith

Additionally, Western psychological research literature, particularly over the past three decades, has infrequently cited faith as a valid construct for study, and, when doing so, faith has often been applied in an ill-defined manner with few measurements developed to evaluate its dimensions (Harris et al., 2018). This is despite some, such as Smith (1962), who consider it “a more useful construct” in comparison to religion (Harris et al., 2018, p. 3). Regardless, related questions regarding from the conceptual to more theoretical perspective have helped to adeptly frame current, ongoing, and future research taking us beyond purely spiritual concerns and broader religious issues to the core of impacts for more person-centered and holistic treatment (Zinnbauer et al., 2003; Hill & Pargament, 2003; Hill et al., 2000). Additionally, with religiousness as his primary research focus over spirituality, Pargament (2018) has considered developments of recent researchers on the moderating effects of religion, which are multidimensional, contextual, and circumstantial, as now contributing significantly to the study of human well-being.

For instance, religiosity and spirituality being explored somewhat interchangeably yet still with a level of distinction in a study exploring human development in Protestant adolescents with regard to how progress through three stages of spiritual development, including transformation, identity, and maturity, using multiple scales (e.g., RCOPE and FMS) in consideration of what factors may facilitate maintenance of religious or spiritual commitment (Emmanuel & Delaney, 2017). Ciarrochi and Heaven (2012), in furtherance of faith and well-

being constructs and via a study touted as the “first study of adolescents to directly examine the cross-lagged relationships between religious values, self-esteem, and trait hope” (p. 684), found support for their hypothesis that religious values are associated with increase in trait hope over the course of 12 months of intervention. The same study by Ciarrochi and Heaven (2012) cited extensive literature with reference to religiousness, spirituality, and faith maturity; each of which were presented as potentially relevant for future research in connection with the study’s findings. Also, Krause, Pargament, and Ironson (2018b) hypothesized and found data supporting that people with sacred loss/desecration have more physical health problems and negative relationship between sacred losses/desecrations and health are moderated or buffered by a strong sense of meaning in life. Each of these three studies, with spirituality relegated to a distinct category for separate consideration, further informed the purpose and questions of this present study; with religious practice as a means of coping and measured outside of a spirituality-focused perspective offering the best approach for a methodological design in this study.

Converging Theoretical Focus on Christian Faith, Hope, and Religious Love

With present literature and current research finding reflecting greater linkage between religiousness and spiritual expression as well as their impact on human experiencing in a positive manner, god attachment becomes more significant in relation to the coping of stress by way of religious practice and spirituality. Pargament (2019) explains how research now shows that religious coping is linked to change in the psychological status of depression, quality of life, coping was related changes in stress-related growth, depression, quality of life, subjective health, cognition, and physical functioning. Further, Pargament (2019) states it is also linked to spiritual well-being via an increase in feeling close to God and higher levels of spiritual self-assessment.

As incorporated in the Brief RCOPE, an abbreviated but validated psychometric

measurement tool developed from the larger RCOPE instrument, Pargament, Feuille, and Burdzy (2011) when reviewing its properties and emphasizing the stability and variability of results over time and situationally highlight the emotional expression of seeking the comfort of God's love and reassurance of relationship with God. This search and expression of love interconnected with faith maturity and hope, both generalized and specific, reflect a dynamic conveyed in the larger I Corinthians 13:11-13 (NIV) passage that follows.

“When I was a child, I talked like a child, I thought like a child, I reasoned like a child. When I became a man, I put the ways of childhood behind me. For now we see only a reflection as in a mirror; then we shall see face to face. Now I know in part; then I shall know fully, even as I am fully known. And now these three remain: faith, hope and love. But the greatest of these is love.”

The passage speaks to Fowler's (1981) theory of faith development and the importance of making meaning as a process in the human life cycle that often involves, yet is distinguishable from, religion (Newman, 2004). It also refers to an existential consideration that eases pain or offers clarity via a shift in attitudinal perspective, as derived from meaning-making or one's perception affecting the ability to cope with suffering (Frankl, 1963), and is described by way of a hope for progressive understanding and transformative knowledge.

As such, with religious coping interpreted as the giving and receiving of love for seekers of spiritual connection with God in a relational dynamic when a mature faith is present, is it possible that hope serves as a bridge or link of relational factor prominence? If so, efforts to empirically illustrate this could serve to affirm a key biblical assertion that helps bond followers of Christ or Christian tradition devotees to belief systems or structures. Such empiric evidence could also have implications for counseling of Christian clients and pastoral counseling as a

profession or religious undertaking, and, conceptually, this underscores the value of religious practice, distinct of spiritual experience, in the study of such a relationship; thereby further influencing scales selection for any related study or application of measures scientifically.

Related Literature

Beyond the cultural and mental health implications regarding the detailed conceptual and theoretical foundations behind and interconnecting religion, spirituality, faith, and hope that are also steeped in changing biopsychosocial evaluation and assessment, a wealth of literature exists that exhibit both singular but also often overlapping value and importance of factors, models, and theories relating to each. Direct reference to the application of scales intended to measure these and that can, ultimately, lead to the refining of concepts and theories which motivated the creation and execution of such scales are helpful to consider as part of the larger body of literature reviewed above. A study that resembles, perhaps most closely, the research methodology of this study framed similar but less direct dynamics yet using multiple relevant and previously mentioned scales. In it Ciarrocchi et al. (2008) expanded positive psychology and attachment theory to predict hope and optimism (although sometimes combined or ill-defined in religious research at that time) finding that religiosity predicted hope, optimism, and pessimism even when controlling for multiple personality factors as well as dispositional and state variables which related to emotional well-being, physical health, and educational accomplishments where religiosity prediction for hope and optimism were at the same approximate effect level as found in prediction of subjective well-being.

Additionally, personality was found to mediate a considerable amount of the variance related to outcomes that were not totally accounted for by personality (Ciarrocchi et al., 2008). Further, religiosity also predicted differentially to hope and optimism facets and horizontal faith

was a strong predictor of agency hope (Ciarrocchi et al., 2008). A later study conducted by a different lead researcher (Ciarrochi & Heaven, 2012) relatedly and additionally examined trait variables and found that trait hope was significantly related to religious values. Ciarrochi and Heaven (2012) finding that religious values association with increases in trait hope was in line with results by Ciarrochi, Heaven, and Davies (2008); who found via their cross-sectional analysis that faith maturity was a significant correlate of hope after controlling for the Big Five domain with implications that religion and spirituality could inform meaningfully a transcendence of spirit that may support the possibility of a sixth factor of personality – as theorized by Piedmont (1999). Such as these, other studies, as follows, merit review of scales-specific findings that have aided in progressive empirically-based discovery and incremental evidence-driven research as the psychology of religion has continued to develop.

Religious Coping

Early researchers in the domain of religious and/or spiritual coping found such coping to have a strong and direct positive effect on quality of relationship for caregivers who used religion or spiritual beliefs to cope with the stress of caregiving for the disabled elderly and were more likely to have a good quality of relationship with the care recipients; thereby equating to an association with less depression and lower levels of role submersion – implications for this positive affect within caregiver and care recipient quality of relationship might also apply to helper relationships with pastoral care recipients (Chang, Noonan, & Tennstedt, 1998). Brief RCOPE used in a Presbyterian sample, including clerical leadership, as a means of more closely exploring factors of theology in well-being and resulting in incremental validity for the measures and greater positive religious coping among clergy (Pargament et al., 2001). A Northern Ireland study exploring adjustment, attachment, and religious coping among adolescents with maternal

relationships where the mother employed religious coping resulted in youth who exhibited stronger relationships with God and who suffered less internalized adjustment problems 12 months later (Goeke-Morey, Taylor, Merrilees, Shirlow, & Cummings, 2014). Although positive religious coping was not found to moderate stress effect on depressive symptoms, religious coping within a Christian university sample of 320 undergraduate students was shown to moderate the intercept of baseline depressive symptoms to the extent that lowered baseline depressive symptoms; suggesting that while positive religious coping may not buffer stress effects it may still protect against symptoms of depression (Ahles, Mezulis, & Hudson, 2016).

Faith Maturity

Hall, Meador, and Koenig (2017), citing challenges with definitional imprecision and conceptual consensus elusivity, refer to the use of religiousness as “broad and diffuse” (p. 140) in many studies using related scales, including applications of RCOPE and FMS. In reference to the Benson et al. (1993) FMS instrument as measuring a dimension of religiousness that is examined less often in comparison to purposes of more frequently employed measures, Hall et al. (2017) went on to urge context-specific versus context-free research, and they also contend that development of the FMS drew significantly from the work of Fowler (1981); who argued that faith – as a process of either cognitive or ethical development – matures similar to other stages or processes of life. In his later work, with primary focus on child and adolescent spiritual development, a co-developer of the FMS characterized spiritual development across life span as integral and important for human development; thus, strengthening the argument for exploration of faith maturity in relation to development theory across all ages (Benson & Roehlkepartain, 2008). Given the length on the FMS versus the “brevity and comparable validity” of the Faith Maturity Scale-Short Form (FMS-SF), the revised FMS-SF, consisting of 12 self-reported items

measuring the individualized experience of closeness to God via a vertical subscale as well as social altruism and relational commitment via a horizontal subscale, “make it an ideal choice in many research settings” (Piedmont & Nelson, 2001, p. 167).

Applying Bowen’s family system theory as an integrative approach to exploring spirituality via the context of intergenerational family theory, sense of self and perceived connection to God are explored with results showing a positive spiritual development and interpersonal differentiation relationship (Jankowski & Vaughn, 2009). Jankowski and Vaughn (2009) used the horizontal psychometric subscale of the FMS to measure a significant predictor of spiritual development, in relation to social justice and other factors, found that spiritual practice significantly predicted spiritual development at a higher level where help-seeking through prayer to God affords a coping mechanism or renders an effect of soothing. Harrowfield and Gardner (2010) found faith maturity and religious coping to be helpful factors in a New Zealand study sampling workers of a Christian organization in relation to stress at work. The study found that higher maturity led to greater appraisal of stressors as challenges, greater positive affect, less negative religious coping, and greater stress-related growth while, even more specifically, “positive and negative religious coping related to higher levels of negative affect and stress-related growth” whereas “faith maturity was an important mediator of the relationship between challenge appraisals and positive religious coping” as “positive religious coping mediated the relationship between faith and stress-related growth” (Harrowfield & Gardner, 2010, p. 208). Further, via a hierarchical regression of positive affect in consideration of the five factors of personality, faith maturity was found to predict unique variance in stress-related growth as well as an additionally significant and unique variance in positive affect, which supports a model of religion as a valid framework for meaning-making (Werdel et al., 2014).

Hope

The “instillation and maintenance of hope” is a “crucial” factor for therapeutic and interventive efficacy (Yalom & Leszcz, 2005, p. 4), but what particular type of hope is described herein; i.e., to what manner, nature, measure, or value of hope does this refer? With so many variants of definition, hope is a factor that requires some level of context. Yalom and Leszcz (2005), although acknowledging it can be goal-oriented, posit that hope creates a feeling of optimism – much like it’s interpretation by Seligman (2006). However, Snyder (2002) clearly differentiates hope via his theory and scales of measurement between a state orientation versus a trait, or dispositional, orientation; per dispositional hope giving way to trait hope as Snyder’s theory developed. With these divergences from the Seligman (2006) theory of optimism and other related positive psychology theories, Snyder’s scales continue to be widely used as valid measurements of their interrelated concepts yet distinct constructs in very diverse ways; while also upholding the factorial importance placed on hope by others (Yalom & Leszcz, 2005) but not necessarily addressing directly the cognitive or depressive implications involving dimensional hopelessness, according to the work of Beck and others (Beck, Rush, Shaw, & Emery, 1979; Beck & Steer, 1989; Beck, 1996; Garzon, 2005).

For instance and in addition to the previous trait and state scale usage, a study aimed at validating Snyder’s hope theory via use of the Dispositional Hope Scale for traumatic injury survivors specifically focusing on the theoretical posit that development of hope disposition occurs early in life, not unlike posits of personality formation in relation to attachment theory, but, as an extension of this construct, researchers found that trauma in childhood is associated with low levels of hope as an adult; thus, suggesting childhood trauma offers an impediment to of interference with hope development (Carboon et al., 2009). Whereas, in a very different

application and while expanding upon Snyder's hope theory, a researcher explored individual differences in trait hope using the Dispositional Hope Scale that explain variations in goal attainment and extends the construct using a Filipino university student sample to define and validate a locus-of-hope dimension with an internal and external agency (e.g., a supernatural force or spiritual being) for planning toward pursuit of goals (Bernardo, 2010). Also based in hope theory and consequences of hope as an extension of Snyder's work with use of the Dispositional Hope Scale, parenting stress, as well as consideration of child maltreatment risk, is explored with findings that parental experience of high-level goal-attainment positively impacted experience of positive emotions and favorable impacted evaluations of life experience where hope was shown to have significant preventative potential against child abuse and neglect on multiple levels (Hellman et al., 2018).

Summary

Snyder (2000) encouraged future study of his theory with hope as moderator, mediator, and, in the case of strong inferential evidence, causal factor – that is one primary intention behind this study. From early psychology explorations regarding religion, spirituality, and faith as human experiences the conceptually defined terminology and larger meanings of each has been debated, and hope was often relegated to a domain of wishful or optimistic thinking. With greater focus in research on stress, coping, religiousness, and spiritual matters across disciplines and cultures, hope, along with other positive psychology constructs and theories, has emerged as a multidimensional factor, as has religious coping and faith maturity, deemed worthy of more intensive consideration.

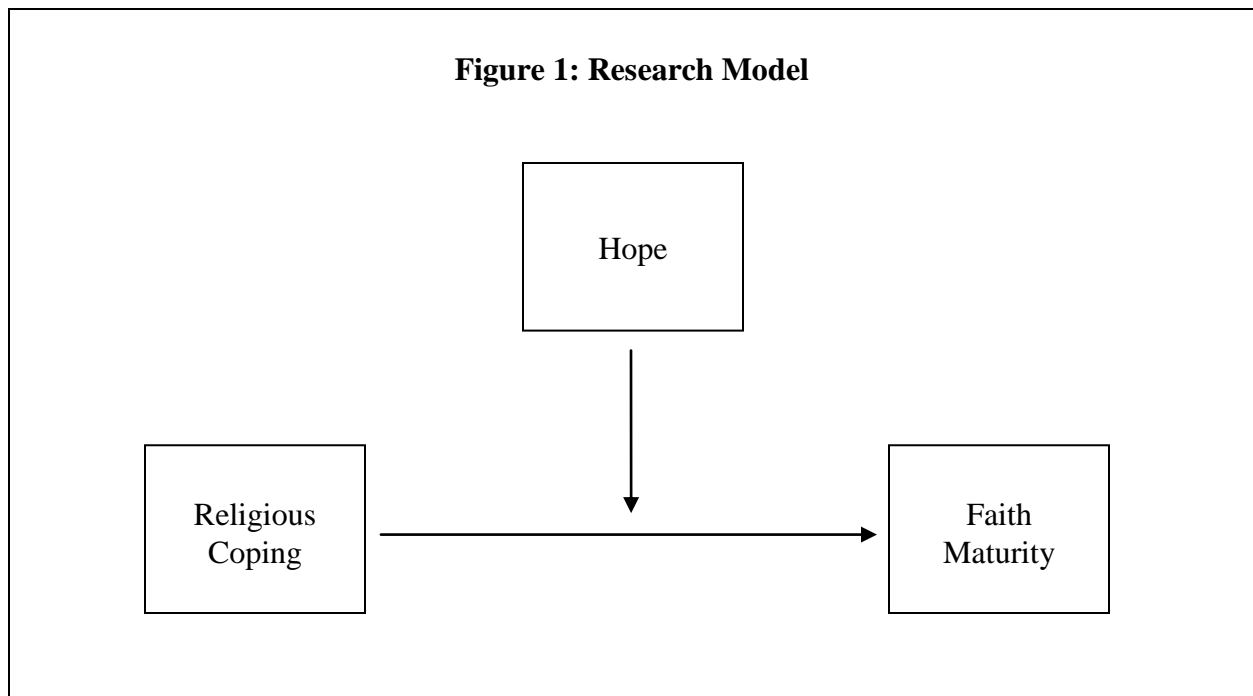
Also, with significant implications for health, well-being, and other interrelated quality of life measures, these subjects – particularly in regard to this previously unexplored dynamic –

merit additional focus. Further, despite many measures having been developed to examine spirituality distinct from religion or religious practice, the utility of scales selected for this study has been specifically considered with intentional merit placed upon religion over spirituality; much like that of Pargament (1999; 2019). Although the variables slated for discovery in this study may not yet have attained empirically-tested validity to label them as established constructs fully independent of each other in context, each has garnered sufficient distinction to perhaps shed greater light or new findings of value to the body of research on both the sacred and secular views on and influence of positive religious activity for mental and behavioral health.

CHAPTER THREE: METHODS

Overview

The focus of this study is religion, as prefaced by a broad construct inclusive of institution and individual (Pargament, 1999) informed via a range of biblically-relevant concepts illustrated by hope theory (Snyder, 2000; Snyder, 2002), with scientific measures bearing possible implications for faith (Krause et al., 2018a). Also, given the perspective that faith is a process of cognitive or ethical development maturing over the human lifespan (Fowler, 1981), the theorized relationships could potentially impact pastoral counseling practice, specifically, and the counseling of Christian clients, in general – most especially where hope is shown to serve as a moderating factor of prominence between Christian religion and faith. This study examines such linkages in an attempt to better understand how Christian coping with stress via religion might impact faith maturation as related to hope (Figure 1), and consideration for study design, sample, collection of data, and analysis of relevant findings are presented as follows.



Survey research was undertaken to quantitatively document, via self-report, demographic information and any correlation of religious coping with faith maturity as well as factors of hope within a Christian population. Data was collected through the administration of a questionnaire inclusive of various scales measuring these variables. Assessment of validated scales administered to a sample in abbreviated formats, when possible, included correlational analysis as well as employed regression modeling. The study primarily explored the potential for correlation of religious coping as the predictor or independent variable and faith maturity as the criterion or dependent variable, including also any possible affect relating to hope as a moderator on these variables. Given the study's reliance on previously established assessment tools relating to each variable and the focus on measuring correlate data at its core, a quantitative method of exploration was most appropriate for the purpose of identifying relationships as well as their direction or causal inference.

Hypotheses

As referenced previously, questions guiding the exploratory research within this quantitative study included the following.

RQ1: Does religious coping predict faith maturity?

RQ2: Does hope moderate a relationship between religious coping and faith maturity?

In consideration of these questions and given review of literature previously published on the topics relating to the related concepts and constructs, this study sought to find evidence regarding each hypothesis as follows.

Ha1: Religious coping will predict faith maturity.

Ha2: Hope will moderate the relationship between religious coping and faith maturity.

Therefore, research plans were developed to accommodate these concepts in order to elaborate

on prior related findings.

Participants and Settings

Qualifications to participate in this study included only two criteria – expressed Christian faith among those who are also 18 years old or older. Approval was sought and received from the Liberty University institutional review board and School of Behavioral Sciences' psychology department online chair for a convenience sample of students invited to participate in order to reach the targeted sample. The Pew Research Center's Forum on Religion & Public Life reports there are 243 million Christians in the United States as of 2010 (2015b) and has sampled in excess of 35,000 people regarding religion within this population (2015a). Although such a sample is well beyond the scope of this study, effort was made to ensure targeted participants represent a cross section of Christian beliefs and other demographics; specifically, gender and age as well as time in faith, religious affiliation, and level of participation within religiously affiliated group.

The study questionnaire was administered to participants in an online setting. Deployment of the quantitative survey was made via an esurv.org template for data collection and exportation to SPSS for analysis. In addition to two qualifying questions and five questions intended to obtain brief demographic information, four psychological measurement scales were employed as components of the survey. Demographic questions included three closed-ended and numerically-valued questions relating to gender, age, and number of years since first profession of or conversion to Christianity as well as two multiple-choice questions regarding denominational practice of Christianity and type or role of participation within present body of faith believers (Appendix A). These questions along with mostly abbreviated versions of scales, inclusive of an additional 44 questions, were designed to take survey participants no more than

20 minutes to complete. The survey opened with the qualifying questions followed by the demographic questions and then introduced each of the psychological scales that follow.

Instrumentation

Brief RCOPE

The Brief RCOPE was developed as an abbreviated version of the larger RCOPE instrument – the length of which can limit utility (Pargament, Feuille, & Burdzy, 2011; Pargament et al., 2000). Validated as a psychometric measurement tool “grounded in theory and research on coping and religion” (Pargament et al., 2011, p. 52), the Brief RCOPE measures positive religious coping and negative religious coping, which consists of 14 self-reported items describing religiously-oriented coping responses (Pargament, Smith, Koenig, & Perez, 1998). Respondents indicate their typical use of each coping response when faced with stressful events using a 5-point (1 = *not at all*, 5 = *a great deal*) Likert scale and typical scoring varies dependent on populations sampled (Ahles et al., 2016). The positive subscale consists of seven items reflective of positive religious coping strategies; e.g., benevolent religious reappraisals, collaborative religious coping, and seeking spiritual support (Ahles et al., 2016). The negative subscale consists of seven items assessing negative religious coping strategies; e.g. spiritual discontent, punishing God reappraisal, and demonic reappraisal (Ahles et al., 2016). A sample positive coping item is “(t)ried to see how God or a higher power might be trying to strengthen me in a situation” whereas a sample negative coping items is “(w)ondered whether my church abandoned me” (Pargament et al., 2011, p. 57).

Faith Maturity Scale-Short Form

With faith maturity defined as “the degree to which a person embodies the priorities, commitments, and perspectives characteristic of vibrant and life-transforming faith” (Benson et

al., 1993, p. 3) and using the previously validated scale developed by Benson et al. (1993) inclusive of 38 indicators for maturity of faith, the Faith Maturity Scale-Short Form (FMS-SF) consists of 12 self-reported items measuring the individualized experience of closeness to God via a vertical faith maturity subscale as well as social altruism and relational commitment via a horizontal faith maturity subscale (Piedmont & Nelson, 2001). Using a 7-point (1 = *Never true*, 7 = *Always true*) Likert scale (Piedmont & Nelson, 2001), each subscale design represents a distinct religious orientation – vertical being illustrative for love of God whereas horizontal illustrates love of neighbor (Benson et al., 1993). A vertical example is “(m)y life is filled with meaning and purpose” whereas a horizontal example is “I try to apply my faith to political and social issues” (Benson et al., 1993, p. 19). Like the FMS, as previously and similarly tested (Benson et al., 1993), the FMS-SF has shown empirical evidence of construct validity, internal consistency, and high reliability (Piedmont & Nelson, 2001).

Trait Hope Scale

The Trait Hope Scale (THS) is a validated measure, developed from a prior dispositional measure of hope (Snyder et al., 1991), that consists of 12 self-reported items inclusive of four items each relating to agency, pathways, and distracters by which responding participants imagine their levels of hope contextually across time and situations using an 8-point (1 = *Definitely False*, 8 = *Definitely True*) Likert scale (Snyder, 2002). Pathways items, such as “I can think of many ways to get out of a jam”, are interspersed with agency items, like “I energetically pursue my goals” but scored separately (Snyder, 2002, p. 274). As such, the THS demonstrates internal and temporal reliability with a separate but related agency and pathways factors as well as a factor for an overarching hope (Snyder, 2002). Additionally, this scale has shown concurrent and discriminant validity as well as experimentally manipulated convergent validation (Snyder et

al., 1991). With a mean score of 49 (SD = 7) typical, THS has shown no difference in scoring between genders, and both pathways and agency subscales may be utilized separate of the other in order to obtain further information in either applied issues or for research purposes (Snyder, 2002).

State Hope Scale

Similar to dispositional hope studies giving rise to the THS, the State Hope Scale (SHS) also developed from further advancement of hope theory, and it consists of 6 self-reported items including three agency and three pathways items to which respondents indicate their present level of hope (Snyder et al., 1996) using the same 8-point (1 = *Definitely False*, 8 = *Definitely True*) Likert scale as the THS (Snyder, 2002). Within this structure, a pathways example is “(i)f I should find myself in a jam, I could think of many ways to get out of it” whereas an agency example is “(a)t the present time, I am energetically pursuing my goals” (Snyder, 2002, p. 275). Validation of the SHS exhibited internal stability at good levels with no gender difference as well as concurrent and discriminant validity (Ciarrocchi et al., 2008) while internal reliability, overall for the scale and in both agency and pathways factors, was supported along with factor structure and manipulation-based convergent construct validity (Snyder et al., 1996). Additionally, longer retest periods using the SHS show temporal consistency at lower levels, which supports its appropriate measure of a malleable state (Snyder, 2002).

Data Analysis

As a quantitative study many variations of analyses were required to capture the full strength of explanatory data possible within the set collected. Basic methods employed to describe and assess the distribution of standard scores and variable measures, including means, variances, and standard deviations as well as confidence interval. Statistics, including Pearson's r

correlation and independent sample *t* tests, were used to determine correlation of the X predictor or dependent variable, religious coping, to the Y criterion or independent variable, faith maturity; especially given most questionnaire data was collected using Likert scales. Distribution models were utilized to determine distributive shape of data.

To establish potential causal inference, internal validity and external validity was determined and factorial analysis was of key importance. Given demographic data collection, sample variance was useful. Although extensive bivariate analysis may not seem as critical since experimental between group and within group analyses was unnecessary, simple drilling down into demographic data and subdividing the population set provided opportunities for additional testing of distinctions in the sample.

Following preliminary data screening, most validity concerns extended externally as the defining parameters for sample selection were age and religious choice; questions of whether the sample closely mirrors the reality of the broader or extended population was considered. Comparatively, internal validity of the adult and predominately protestant Christian sample seemed less questionable. However, given the researcher's closeness to the topics explored and perceived similarity to subjects in the sample, careful consideration of Type I and Type II error derived from implicit or explicit bias were weighed in all decision-making processes and considered in regard to statistical power as it relates to testing of null hypothesis significance, or effect size; even if Cohen's *d* was not deemed particularly beneficial in comparison to other tests.

Further, sample size, along with diversity of sample, was an important component for these evaluations. Increasing the sample size, particularly in regard to hypothesis testing prior to reporting results – wherein determination of alpha value was useful as well as *p* value or even cross-validation also – was crucial for study success and robust applicability of results to the

larger population. Such an increase somewhat eliminated a real or perceived need to empirically screen the sampling, but adjustment for extreme scores or error was made to account for significant outliers.

Beyond baseline bivariate linear and directional testing as well as relational modeling, regression analysis in regard to possible moderation by multiple hope scales was taken into consideration. The negative and positive subset of the independent or predictor variable as well as vertical and horizontal subset of the dependent or criterion variable merited analysis via multiple tests of variant associations. Statistical computation was required in third variable considerations, X_1 and X_2 , accounting for X as the predictor variables and Y as the outcome variable, including subset data, in proportion or partiality merited multiple regression; particularly in regard to the negative and positive orientation of religious coping in its entirety as a construct with potential impact upon vertical and horizontal faith maturity in consideration of hope theory. The necessity or merit of further discriminant, covariant, or multivariate factorial analysis as well as further reliability, validity, and multiple-item scales testing was determined based upon results of initial RQ1 and Ha1 evaluation.

CHAPTER FOUR: FINDINGS

Overview

A quantitative study was undertaken to examine possible correlations between religious coping and faith maturity as well as potential moderation by state and trait hope on any correlative relationship found. A convenience sample of 300 Christian university students was surveyed to answer demographic information and respond to four psychological scales. Multiple linear regression was used to explore correlations between composite variables with positive religious coping (PRC) and negative religious coping (NRC) as independent variables and vertical faith maturity (VFM) and horizontal faith maturity (HFM) as dependent variables. Then, moderator analysis using these independent and dependent variables along with trait agency hope, trait pathway hope, state agency hope, and state pathway hope as additional variable considerations was utilized to further discern relationships where significant prior findings merited additional hypotheses explorations. Ultimately, both hypotheses were affirmed, and demographic considerations were also employed to further distinguish and differentiate distinct group correlations within the sample.

Descriptive Statistics

A total of 28 outlier respondents identified with use of boxplots for extreme scores outside the normal range of response were removed from the original sample of 300 Liberty University online psychology students who self-reported as Christian and 18 years of age or older before conducting further analysis. Normal distributions were found across all religious coping and faith maturity measures as descriptive and inferential statistical testing was conducted on the reduced sample of with N of 272 comprised of 43 males with 229 females. Basic statistical analysis on this sample illustrated that PRC had a M of 4.11 with s of .665 while NRC had a M

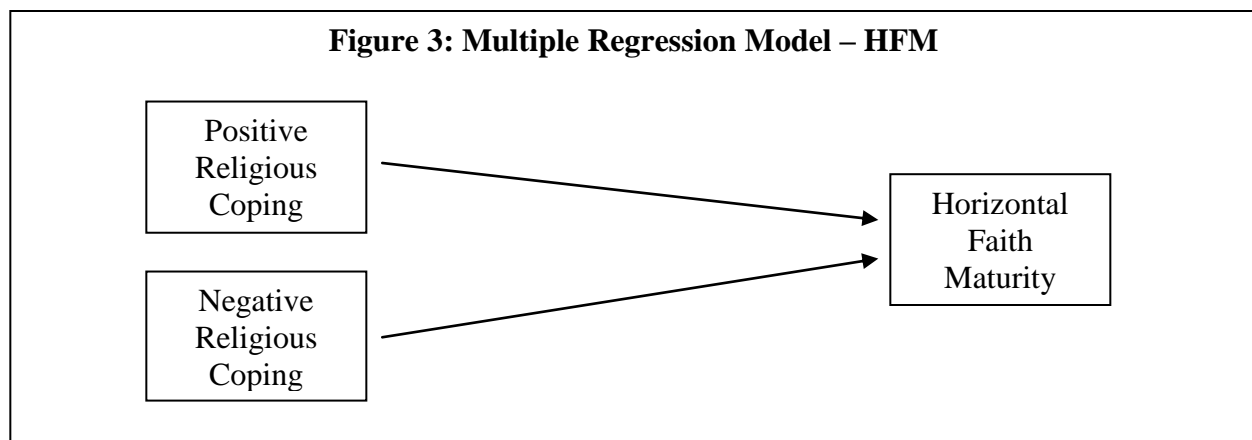
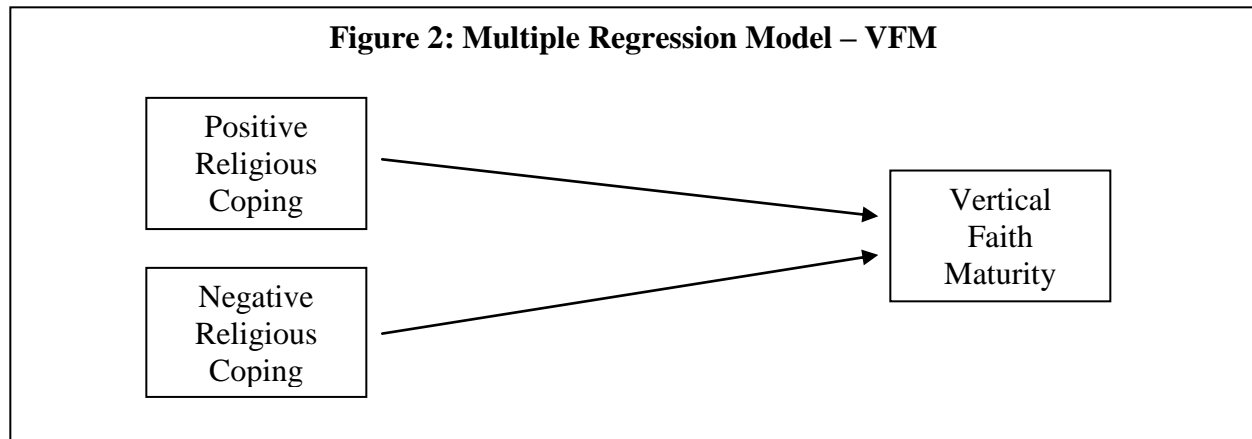
of 1.97 with s of .769 and VFM had a M of 5.90 with s .824 while HFM had a M of 5.28 with s of 1.185 within the sample used. An independent samples t test comparing males with females against composite PRC, NRC, VFM, and HFM variables showed significance only for PRC where $t = 3.339$, $p < 0.001$ for this demographic measure. This finding was indicative of significance between genders for PRC between males at M 3.80 and females at M 4.16 in this sample.

Beyond gender, other demographic questions were posed to survey participants should greater distinction among findings from regression analysis prove helpful. These demographics included age, years lapsed since profession of faith or conversion to Christianity, Christian denomination, and role within any affiliated denominational congregation. In addition to gender, the only other demographic employed for comparative analysis in this study was years lapsed as a Christian. A one-sample t test for years lapsed with a test value = 0 resulted in M of 21.02 years and s of 12.871 where $t = 26.936$, $p < 0.000$ for this demographic measure.

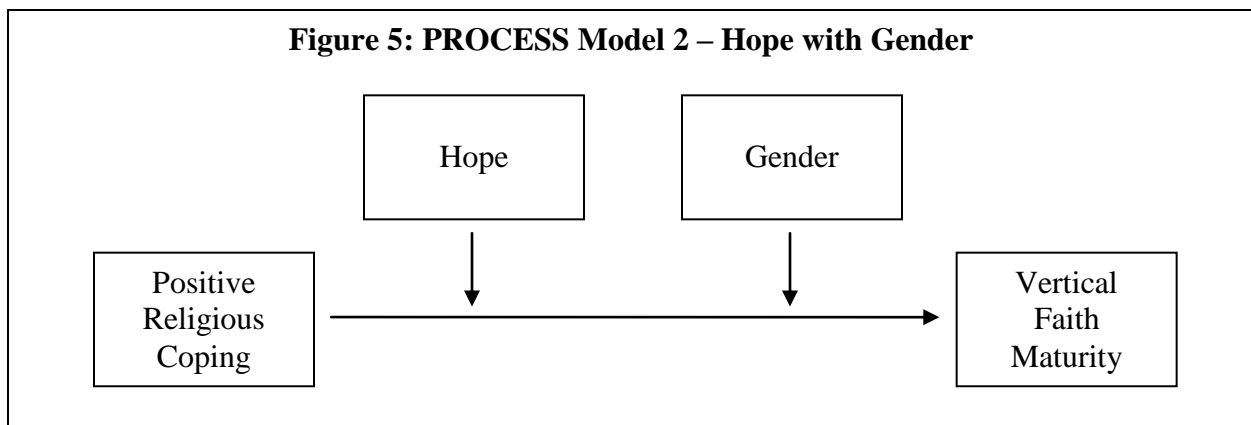
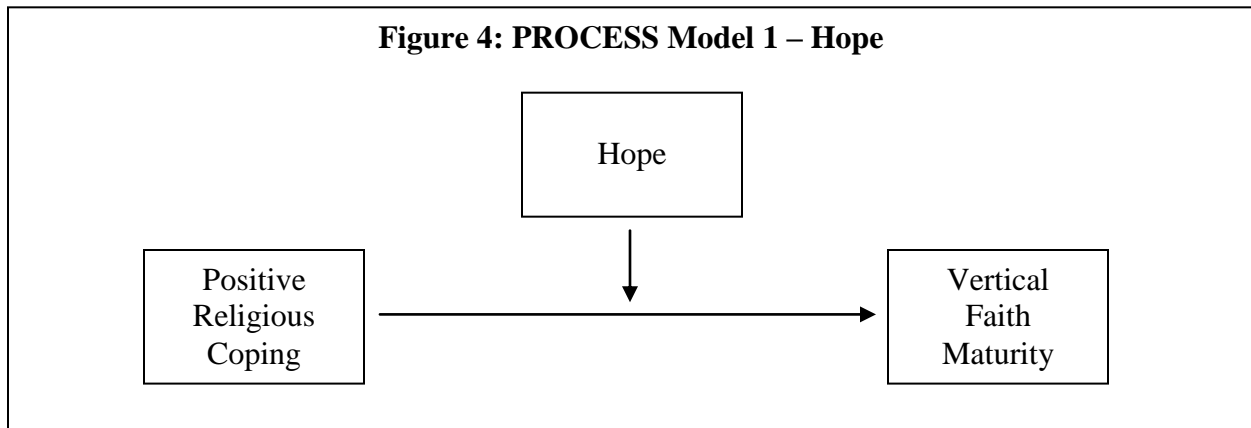
Although not used for regression analysis, the remaining demographic responses help illustrate parameters of the sample captured within this study. Such as, the age of study participants ranged from 18 to 84 years with a statistical mean of 35.26 years. Also, only 5.1% of 272 respondents were unaffiliated with a congregation or house of worship while the remaining 94.9% were congregationally affiliated respondents. Of these congregationally affiliated respondents 75.4% filled the role of congregant or member only, 15.8% filled the role of lay minister or leader, and 3.7% ordained minister or leader. Of the 272 study participants 122 self-reported denominational representation; which included 26.5% Baptist, 6.6% Pentecostal, 4.4% Catholic, 2.6% Presbyterian, 1.8% Methodist, 1.5% Anglican, 0.7% Lutheran, 0.4% Adventist, and 0.4% Mormon – 43.0% self-reported nondenominational status.

Results

Analysis using Pearson's correlation for simple combinations of variables resulted in PRC correlating as significant at 0.01 level via 2-tailed test to VFM with r of .593 and correlating as significant also at 0.01 level via 2-tailed test to HFM with r of .323 whereas NRC correlated to VFM as significant at 0.01 level via 2-tailed test with r of -.157 but not significant to HFM with r of -.017 only. Multiple regression analysis using PRC as X_1 and NRC as X_2 with VFM as Y (Figure 2) resulted in significance as noted by the model's adjusted R-squared of .372 based on the $N = 272$ sample, and, likewise, multiple regression analysis using PRC as X_1 and NRC as X_2 with HFM as Y (Figure 3) resulted in significance as noted by the model's adjusted R-squared of .098 using the same sample.



Multiple regression analyses using PRC as X_1 and NRC as X_2 with VFM as Y (Figure 2) showed correlations producing significant ANOVA where $F = 81.424$, $p < 0.000$ with predictors constant. PRC as X_1 and NRC as X_2 with HFM as Y (Figure 3) showed correlations producing significant ANOVA where $F = 15.738$, $p < 0.000$ with predictors constant. Also, building upon findings from multiple regression analyses, moderation via PROCESS model 1 (Hayes, 2018) was employed to confirm model significance using PRC as X predictor variable and VFM as Y outcome variable with trait and state hope scales for agency and pathway interchangeably as W the moderator variable (Figure 4). Given previously referenced distinctions within the $N = 272$ sample, consideration was also afforded to these relationships in regard to the demographic factors of both gender (Figure 5) and years lapsed since profession of faith or conversion to Christianity as Z moderators using moderation via PROCESS model 2 (Hayes, 2018).



Results from 9 of 16 possible combinations using model 1 (Hayes, 2018) for combinations of religious coping, faith maturity, and state or trait hope variables (Figure 4) showed no significance, including the following.

- PRC as the predictor, HFM as the outcome, and hope trait agency as the moderator
- NRC as the predictor, VFM as the outcome, and hope trait agency as the moderator
- NRC as the predictor, HFM as the outcome, and hope trait agency as the moderator
- NRC as the predictor, VFM as the outcome, and hope state agency as the moderator
- NRC as the predictor, HFM as the outcome, and hope state agency as the moderator
- PRC as the predictor, HFM as the outcome, and hope trait pathway as the moderator
- NRC as the predictor, HFM as the outcome, and hope trait pathway as the moderator
- PRC as the predictor, VFM as the outcome, and hope state pathway as the moderator
- PRC as the predictor, HFM as the outcome, and hope state pathway as the moderator

However, results from 6 of the same 16 possible combinations using model 1 (Hayes, 2018) for combinations of religious coping, faith maturity, and state or trait hope variables (Figure 4) met $p < 0.05$ significance, including the following listed in ascending order by p value.

- PRC as the predictor, HFM as the outcome, and hope state agency as the moderator
- NRC as the predictor, HFM as the outcome, and hope state pathway as the moderator
- NRC as the predictor, VFM as the outcome, and hope trait pathway as the moderator
- NRC as the predictor, VFM as the outcome, and hope state pathway as the moderator
- PRC as the predictor, VFM as the outcome, and hope trait agency as the moderator
- PRC as the predictor, VFM as the outcome, and hope state agency as the moderator

Finally, results from 1 of the same 16 possible combinations using model 1 (Hayes, 2018) for combinations of religious coping, faith maturity, and state or trait hope variables (Figure 4) met p

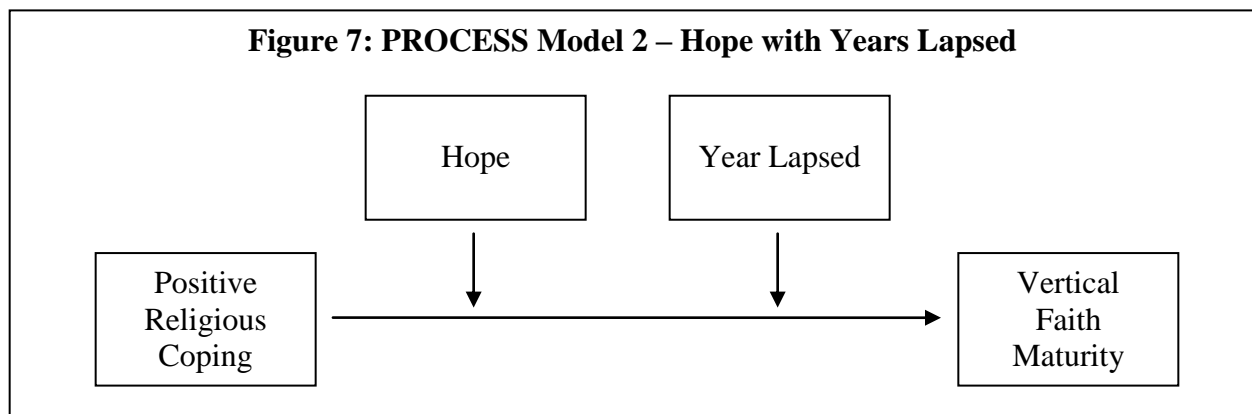
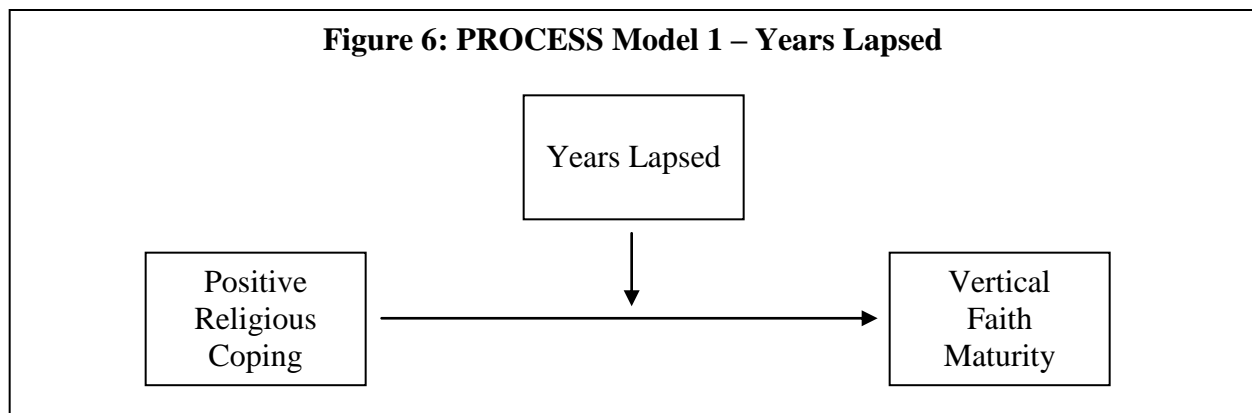
<0.01 significance, including the following.

- PRC as the predictor, VFM as the outcome, and hope trait pathway as the moderator

A cut point of $X*W$ $p < 0.0170$ was used to elevate the top 3 of 16 combination variable results for further exploration via use of PROCESS model 2 (Hayes, 2018) in combination with gender (Figure 5). In descending order by p value, PRC as the predictor with VFM as the outcome and state agency as the W moderator but gender as a the Z moderator showed in r of .6621, R^2 of .4384, $X*W$ R^2 - chn g of .0165, $X*W$ $p = .0056$, $X*Z$ R^2 - chn g of .0108, $X*Z$ $p = .0247$, both variables R^2 - chn g .0243, and both variables $p = .0035$ within the combination results. Whereas, PRC as the predictor with VFM as the outcome and trait agency as the W moderator but gender as the Z moderator showed in r of .6577, R^2 of .4326, $X*W$ R^2 - chn g of .0182, $X*W$ $p = .0038$, $X*Z$ R^2 - chn g of .0132, $X*Z$ $p = .0132$, both variables R^2 - chn g .0264, and both variables $p = .0024$ within the combination results. Finally, PRC as the predictor with VFM as outcome and trait pathway as the W moderator but gender as the Z moderator showed in r of .6213, R^2 of .3861, $X*W$ R^2 - chn g of .0096, $X*W$ $p = .0425$, $X*Z$ R^2 - chn g of .0124, $X*Z$ $p = .0212$, both variables R^2 - chn g .0195, and both variables $p = .0156$ within the combination results.

From here, looking specifically at these three key findings for the relationship between PRC as the predictor and VFM as the outcome, years lapsed since profession of faith or conversion to Christianity (Figure 6) was considered as the moderator via PROCESS model1 (Hayes, 2018) but produced no significance. However, following protocol used above within the same 3 results $X*W$ with a p value as $< .0170$, exploration using PROCESS model 2 (Hayes, 2018) in an additional combination employing years lapsed as a Christian as the Z moderator (Figure 7) was undertaken as well. Although PRC as the predictor with VFM as the outcome and trait pathway as the W moderator but years lapsed as the Z moderator showed no significance,

PRC as the predictor with VFM as the outcome and state agency as the *W* moderator but years lapsed as the *Z* moderator showed in *r* of .6056, *R*² of .4298, *X*W R*²-*chnng* of .0121, *X*W p* = .0184, *X*Z R*²-*chnng* of .0017, *X*Z p* = .3709, both variables *R*²-*chnng* .0142, and both variables *p* = .0381 within the combination results. Whereas, PRC as the predictor with VFM as the outcome and trait agency as the *W* moderator but years lapsed as the *Z* moderator showed in *r* of .6495, *R*² of .4218, *X*W R*²-*chnng* of .0118, *X*W p* = .0204, *X*Z R*²-*chnng* of .0023, *X*Z p* = .03001, both variables *R*²-*chnng* .0144, and both variables *p* = .0383 within the combination results. The significance of both these variable combinations with years lapsed as the *Z* moderator with state agency and trait agency interchangeably as the *W* moderator was an unanticipated but notable occurrence within data output as were noteworthy and associated occurrences of variance in conditional effects for focal predictors with moderator values; indicative that trait agency impact may alter over time, thus hope decreasing as years lapse since profession of faith or conversion.



Affirmed Hypotheses

All results reflecting similar findings across the same variables illustrate PRC correlates strongly with VFM and moderately with HFM as positive linear relationships demonstrated via scatterplots of data points, but NRC does not correlate highly with VFM and neither highly or with significance to HFM. Therefore, measures of religious coping, with the best predictive measure being PRC, do predict both measures of faith maturity; thereby affirming the first hypothesis in this study – Ha1, religious coping will predict faith maturity. Additionally, given aforementioned PROCESS model 1 and model 2 (Hayes, 2018) results, measures of hope were found to moderate the relationship between religious coping and faith maturity, albeit marginally, and most prevalent among these findings are correlations being PRC and VFM; which is supportive of results from multiple regression in regard to the first hypothesis. Thus, even with limited differentiation between state hope and trait hope as moderators and with nominal differentiation relating to measures of pathway hope versus agency hope, hope does appear to moderate the religious coping and faith maturity relationship thereby supporting the second hypothesis in this study – Ha2, hope will moderate the relationship between religious coping and faith maturity.

CHAPTER FIVE: CONCLUSION

Overview

With this study's research questions now affirmed, that religious coping predicts faith maturity and hope moderates that relationship, careful consideration is given to theoretical underpinnings of the study objectives, implications of its findings, limitations of results obtained, and recommended applications of the knowledge uncovered. As prefaced at the start of this exploration, hope would seem highly valuable for pastoral counseling models and therapeutic interventions for Christian clients (Lester, 1995), but the scientific contexts for how best to engage as professionals in a caring hope-filled capacity via theory and practice may be unclear presently, given disparate meanings assigned to related principles (Capps, 2001; Miller & Delaney, 2004). Although extensive thought and effort has been previously paid to the various conceptualizations on related spiritual, religious, and faith-oriented thought and measures and expanded over time, this study offers yet another vantage for examining these topics along with hope. This perspective is not offered without some constraint and reasonable temperance when recommending potential next steps in applying, reexamining, and further studying these important matters.

Discussion

As mentioned previously, no study has conclusively linked religious coping, use of religious practice to address stress (Pargament, 1997), with faith maturity, the closeness perceived to God that produces altruism (Benson et al., 1993; Ciarrocchi et al, 2008), within a framework of hope; the identification of and motivation toward attaining goals (Snyder, 2002). Unfortunately, this problem persists despite effort to the contrary via this study. The study demonstrates a strong linear relationship between positive religious coping and vertical faith

maturity that is moderated by both trait and state hope agency. With the intention of offering insight into psychologically-defined hope expressed via an adult Christian sample to better inform Christian pastoral counseling and clinical therapeutic interventions for Christian clients, this examination of correlations between religious coping and faith maturity successfully shows that the former does predict the later, but in relation to moderation of this relationship via state or trait hope as set forth by Snyder (2002) results were supportive yet with limited conditional effect. Regardless, significant findings are presented within the study that merit discussion and considerate contemplation.

Religious coping, having been shown to be a valid and extensively utilized psychological measure (Pargament, 2019), and faith maturity, having been validated (Piedmont & Nelson, 2001) and employed as a reliable construct for theological application and scientific use (Ciarrocchi et al., 2008), are shown herein to be highly correlative with a significant and predictive relationship. Thus, this study advances preceding religious coping and faith maturity research and related literature. Although some previously tested and well-established measures of hope (Snyder, 2002) also bear significance as moderators of this newly identified coping to maturity correlation relationship, more research would be beneficial; especially given the somewhat weak factorial relevance of hope on this predictive relationship. While the predictive nature of religious coping upon faith maturity can appear at first inspection to be primarily a theological curiosity for exploration purely as a religious construct, multiple and broad spiritual and psychological implications exist for the relationship in relation to religious coping and faith maturity. Likewise, the implications for trait agency, trait pathway, state agency, and state pathway are numerous in relation to this documented moderation and considerations in the psychology of religion, positive psychology, but primarily within hope theory. Prior to diving

deeper into such implications, a review of salient points from literature can preface those considerations.

While hope can be seen and applied in a purely Christian eschatological perspective (Moltmann, 1967), ministerial workers can broaden scope of care provided to enhance service deliverables to parishioners and clients with application of greater psychological principles when offering their distinctive and valuable contribution to human services (Rogers, 1950) by honoring a multi-disciplinary mindset via integrative approaches (Agilkaya-Sahin, 2018) while purveying optimal hope (Capps, 2001). With a correlative relationship between religious coping and faith maturity documented via this study, questions remain as to how best clinicians and pastors can capitalize on this relationship and instill and maintain greater levels of hope as an important component of care (Yalom & Leszcz, 2005). Also, despite limited effect displayed in data regarding hope as a moderating factor, it would seem that agency-related interventions could merit particular focus in such considerations, and, per data generated and analyzed in this study, the applicability of both trait and state hope would appear to remain valid for consideration in such endeavors as well.

Implications

Often the literature cited herein regarding hope theory and applications of the hope measures used in this study abound with correlational research, but very few of these studies or others that have gone without citation offer insights from program evaluations or treatment studies. So, again, while the theoretical potential to identify areas to incorporate beneficial relationships into the planning and executing counseling deliverables to Christians that emphasize elemental hope for the purpose of improved therapeutic alliance and client outcomes clearly exists there seems to be little effort to develop and test such applications.

Recommendations that follow offer suggested means for advancing alliance and outcomes via additional research and possible intervention. However, with regard to religious coping specifically, this study yet again demonstrates the versatility of applying this measure to varied topics and ranges of scales and quantifiable measures. Its predictive capacity on faith maturity, as a lesser used measure, may perhaps inspire relevance or applicability for use of this faith-oriented measure in future research. All these sets of measures, each with subsets of additional measures, offer researchers and practitioners who consume, interpret, and employ this research for further study or daily client interaction many possible beneficial insights for extrapolation or utilization. Key implications on prior research and practice that stand out among literature cited include the following.

Religious Coping and Faith Maturity

Faith maturity increasing as religious coping increases is a take away that speaks directly to a central tenet of Pargament (1999) defining religion. For Pargament (1999) religion is “a search for significance (p. 11)” wherein effort is also made spiritually “to conserve significance once found or transform significance when necessary (p. 12),” and faith maturation can be seen as a manifestation of said conservation and transformation. Perhaps, more so than the intention behind the psychology of religion to separate and distinguish religion from spirituality, at least for the lives of Christians, faith is a tangible product of religious practice by which spirituality serves as the purpose of searching it out (Pargament, 1999) and thereby developing it via religious action. In this context, these three constructs form a triad of belief and action where the results of this study bears great significance. Whereas, health is a distinct dimension contributed to by both religion and spiritual factors (Hill & Pargament, 2003), faith may be the measurable byproduct of religious use for coping when explored via spirituality. In such a dynamic, as

shown by Krause and Pargament (2018), where hope can be related to optimism, religious practice moderates the stress to hope relationship by use of benevolent religious reappraisal producing hope for the future; an implication that directly links hope to the concepts of religion and spirituality, but conceivably faith as well.

Hope Theory

In this study, hope was shown to have a limited, but statistically significant, moderating effect on the relationship between positive religious coping and faith maturity. This relationship provides some potential practical scenarios that may be helpful for the personal and spiritual development of individuals. Just as religious and psychological perspectives inform the link between hope, optimism, and fulfillment (Ciarrocchi et al., 2008), the theory of hope proposed by Snyder (2000; 2002) can also inform the study of faith, especially where goals and confidence integrate (Ciarrocchi et al., 2008). Similar to this study, the use of Snyder's hope theory and Pargament's religious coping with faith maturity resulted in religiosity predicting hope, both dispositional and state, while horizontal faith strongly predicted agency hope (Ciarrocchi et al., 2008). Those findings in combination with results now showing hope moderating the religious coping prediction of faith maturity offers greater insight into the religious, spiritual, faith, and hope continuum of consideration expanding existing literature with salient research findings relevant for any future research on this topics. With both state and trait agency hope highlighted in this study and prior literature, a focus on the cognitive capacities of religiously-motivated, faithful, and hope-filled individuals may merit greater interest and exploration.

Limitations

This convenience sample was obtained exclusively from a Christian university's online psychology undergraduate and graduate students, and, although there is balanced distribution of

via multiple references points and relative representation to the larger population (The Pew Research Center's Forum on Religion & Public Life, 2015a), the potential limitations for applying any findings to American Christians, in general, must be acknowledged. Likewise, as a Christian researcher, the limitation of my own potential bias in regard to any discussion and consideration of defining constructs, theories applied herein, or results obtained must also be acknowledged. Specific to avoiding sampling error and to curtail any potential limits to design and results from this study, effort was made to mimic and model the Pew Research Center's Forum on Religion & Public Life samples and report findings on Christians in the United States as of 2010 (2015a; 2015b). Also, a disparity between gender representation, 15.81% male and 84.19% female, likely skewed results on the basis of gender.

Recommendations for Future Research

An immediate and rather obvious suggestion for future research would be to replicate this study on a broader sample in the wider Christian population not only in the United States but also abroad; any differing results could then be considered with regard to alternative impacts based on cultural and demographics factors. Exploring the predictive qualities of religious coping on hope measures directly and inversely is another consideration for future research in order to determine if state or trait hope precedes religion as a motivation for greater spirituality or enhanced faith. Similarly, a comparison of Synder's hope measures with other measures of related hope and optimism in the context of religion's predictive relationship to faith could reveal other potential moderates for consideration or application in hope-filled interventive practices by clinicians or pastors. Further, in relation to not only religious coping, faith maturity, and hope but also other theologically-supported or spiritually-focused measures, incorporation of measures at the start and finish of programming by pastors as well as intake and completion of therapy by

clinicians could prove to be helpful in determining intervention success.

Ultimately, a longitudinal study of baseline hope over the time spent cultivating religious practice and faith maturity could also prove useful to expand the psychology of religion and hope theory in relation to spirituality and faith maturation. For instance, could religious practices that reflect the maturing of faith, as seen by love of God or neighbor (Benson et al., 1993) be measured longitudinally with or without the benefit of hopefulness? After all, as Fowler (1981) contended, the nature of faith is that of cognitive or ethical development process with maturation resembling other stages or processes of life. Without data collection and consideration over time studying the interplay between spirituality, religion, faith, and hope may be impossible. Although not precisely a limitation when researching these areas, the apparent lack of extensive qualitative data regarding these primary subjects may be a concern for some. Therefore, a study endeavoring to translate the often quantitative outputs of related measures and scale into a qualitative context or one that could combine both the quantitative and qualitative elements of research may offer greater insights on religious coping, faith maturity, and hope or related constructs.

Finally, as briefly mentioned in regard to study results using PROCESS model 2 (Hayes, 2018), the significance of variables for years lapsed as the W moderator with state agency and trait agency interchangeably as the Z moderator in process modeling with positive religious coping as the predictor and vertical faith maturity as the outcome bore results that were an unanticipated but notable occurrences within data output. These noteworthy and associated occurrences of variance in conditional effects for focal predictors with moderator values indicated that the impact of hope agency may alter over time. The potential that hope decreases in Christians as years lapse since their profession of faith or conversion is a very distinct area for future study, and one that I would encourage.

References

- Agilkaya-Sahin, Z. (2018). Bridging pastoral psychology and positive psychology. *Ilahiyat Studies: A Journal on Islamic and Religious Studies*, 9(2), 183-210. doi: 10.12730/13091719.2018.92.180
- Ahles, J. J., Mezulis, A. H., & Hudson, M. R. (2016). Psychology of religion and spirituality religious coping as a moderator of the relationship between stress and depressive symptoms depressive symptoms. *Psychology of Religion and Spirituality*, 8(3), 228–234. <https://doi.org/10.1037/rel0000039>
- Anderson, B. (2006). Becoming and being hopeful: Towards a theory of affect. *Environment and Planning D: Society and Space*, 24(5), 733–752. <https://doi.org/10.1068/d393t>
- Bartholomew, T. T., Scheel, M. J., & Cole, B. P. (2015). Development and Validation of the Hope for Change Through Counseling Scale. *The Counseling Psychologist*, 43(5), 671-702. doi: 10.1177/0011000015589190
- Beck, A. T. (1996). Beyond belief: A theory of modes, personality, and psychopathology. In P. Salkovskis (Ed.), *Frontiers of cognitive therapy* (pp. 1–25). New York, NY: Guilford Press.
- Beck, A. T., Rush, J. A., Shaw, B. F., & Emery, G. (1979). *Cognitive therapy for depression*. New York: Guilford Press.
- Beck, A. T., & Steer, R. A. (1989). *Manual for the Beck Hopelessness Scale*. San Antonio, TX: The Psychological Corporation.
- Beck, A. T., Weissman, A., Lester, D., & Trexler, L. (1974). The measurement of pessimism: The Hopelessness Scale. *Journal of Consulting and Clinical Psychology*, 42(6), 861-865. doi: 10.1037/h0037562

- Benson, P. L., Donahue, M. J., & Erickson, J. A. (1993). The Faith Maturity Scale: Conceptualization, measurement, and empirical validation. In M. L. Lynn & D. O. Moberg (Eds.) *Research in the social scientific study of religion* (Vol. 5, pp. 1-26). Greenwich, CT: JAI Press.
- Benson, P. L., & Roehlkepartain, E. C. (2008). Spiritual development: A missing priority in youth development. *New Directions for Youth Development*, (118), 75–84.
<https://doi.org/10.1002/yd>
- Bernardo, A. B. I. (2010). Extending hope theory: Internal and external locus of trait hope. *Personality and Individual Differences*, 49(8), 944-949. doi: 10.1016/j.paid.2010.07.036
- Capps, D. (2001). *Agents of hope: A pastoral psychology*. Eugene, OR: Wipf & Stock.
- Carboon, I., McFarlane, A., Densley, K., Bryant, R. A., Creamer, M., Silove, D., O'Donnell, M. L., & Lewis, V. (2009). Evaluation of the Dispositional Hope Scale in injury survivors. *Journal of Research in Personality*, 43(4), 613–617.
<https://doi.org/10.1016/j.jrp.2009.03.002>
- Chang, B. H., Noonan, A. E., & Tennstedt, S. L. (1998). The role of religion/spirituality in coping with caregiving for disabled elders. *Gerontologist*, 38(4), 463–470.
- Ciarrocchi, J. W., Dy-Liacco, G. S., & Deneke, E. (2008). Gods or rituals? Relational faith, spiritual discontent, and religious practices as predictors of hope and optimism. *Journal of Positive Psychology*, 3(2), 120–136. doi: 10.1080/17439760701760666
- Ciarrochi, J., & Heaven, P. C. L. (2012). Religious Values and the Development of Trait Hope and Self-Esteem in Adolescents. *Journal for the Scientific Study of Religion*, 51(4), 676–688. <https://doi.org/10.1111/j.1468-5906.2012.01675.x>
- Ciarrochi, J., Heaven, P. C. L., & Davies, F. (2007). The impact of hope, self-esteem, and

- attributional style on adolescents' school grades and emotional well-being: A longitudinal study. *Journal of Research in Personality*, 41(6), 1161-1178. doi: 10.1016/j.jrp.2007.02.001
- Cohen-Chen, S., Crisp, R. J., & Halperin, E. (2017). Hope Comes in Many Forms: Out-Group Expressions of Hope Override Low Support and Promote Reconciliation in Conflicts. *Social Psychological and Personality Science*, 8(2), 153–161. doi: 10.1177/1948550616667612
- Cooper, L. B., Bruce, A. J., Harman, M. J., & Boccaccini, M. T. (2018). Differentiated Styles of Attachment to God and Varying Religious Coping Efforts. *Journal of Psychology and Theology*, 37(2), 134–141. <https://doi.org/10.1177/009164710903700205>
- Dowling, M., & Rickwood, D. (2016). Exploring hope and expectations in the youth mental health online counselling environment. *Computers in Human Behavior*, 55, 62–68. <https://doi.org/10.1016/j.chb.2015.08.009>
- Edwards, T. M., & Jovanovski, A. (2016). Hope as a Therapeutic Target in Counselling – In General and in Relation to Christian Clients. *International Journal for the Advancement of Counselling*, 38(2), 77–88. doi: 10.1007/s10447-016-9257-8
- Emmanuel, G., & Delaney, H. (2017). Keeping Faith: Factors Contributing to Spiritual Transformation, Identity, and Maturity in Adolescents. *Advances in the Study of Information and Religion*, 3(1), 1–14. <https://doi.org/10.21038/asir.2013.0003>
- Ernst, K. (2017). Terror of Hope: the Integration of Attachment Theory and Womanist Theology. *Pastoral Psychology*, 66(2), 201–212. <https://doi.org/10.1007/s11089-016-0739-8>
- Ferguson, E. (1999). *History, hope, human, language, and Christian reality*. New York, NY: Garland Publishing.

- Flaskas, C. (2007). Holding hope and hopelessness: therapeutic engagements with the balance of hope. *Journal of Family Therapy*, 29(3), 186–202. doi: 10.1111/j.1467-6427.2007.00381.x
- Fowler, J. (1981). *Stages of faith*. San Francisco, CA: Harper and Roe.
- Frankl, V. E. (1963). *Man's search for meaning*. New York, NY: Pocket Books.
- Freud, S. (1927). *Future of an illusion*. In: J. Strachey (Trans. and Ed.), Standard edition of the complete psychological works of Sigmund Freud. New York, NY: Norton, 1961.
- Galea, M. (2014). The relationship of personality, spirituality and posttraumatic growth to subjective wellbeing. *Open Access Library Journal*, 1, 1-10. doi: 10.4236/oalib.1101069
- Garzon, F. (2005). Interventions that apply scripture in psychotherapy. *Journal of Psychology and Theology*, 33(2), 113–121. doi: 10.1177/009164710503300204
- Goeke-Morey, M. C., Taylor, L. K., Merrilees, C. E., Shirlow, P., & Cummings, E. M. (2014). Adolescents' relationship with god and internalizing adjustment over time: The moderating role of maternal religious coping. *Journal of Family Psychology*, 28(6), 749–758. <https://doi.org/10.1037/a0037170>
- Hall, D. E., Meador, K. G., & Koenig, H. G. (2017). Measuring Religiousness in Health Research : Review and Critique, 47(2), 134–163. <https://doi.org/10.1007/s10943-008-9165-2>
- Harris, K. A., Howell, D. S., & Spurgeon, D. W. (2018). Faith concepts in psychology: Three 30-year definitional content analyses. *Psychology of Religion and Spirituality*, 10(1), 1–29. doi: 10.1037/rel0000134
- Harrowfield, R., & Gardner, D. (2010). Faith at Work: Stress and Well-Being Among Workers in Christian Organizations. *Journal of Psychology & Christianity*, 29(3), 208–217.

Retrieved from [http://go.galegroup.com.ezproxy.liberty.edu/ps/i.do?p=](http://go.galegroup.com.ezproxy.liberty.edu/ps/i.do?p=AONE&u=vic_liberty&id=GALE%7CA341936963&v=2.1&it=r&sid=summon)

[AONE&u=vic_liberty&id=GALE%7CA341936963&v=2.1&it=r&sid=summon](http://go.galegroup.com.ezproxy.liberty.edu/ps/i.do?p=AONE&u=vic_liberty&id=GALE%7CA341936963&v=2.1&it=r&sid=summon)

Hayes, A. F. (2018). *Introduction to mediation, moderation, and conditional process analysis: A regression-based approach* (2nd ed.). New York, NY: Guilford Press.

Hellman, C. M., Robinson-Keilig, R. A., Dubriwny, N. M., Hamill, C., & Kraft, A. (2018).

Hope as a coping resource among parents at risk for child maltreatment, *Journal of Family Social Work*, 21(4-5), 365-380. doi: 10.1080/10522158.2018.1469559

Hill, P. C., & Pargament, K. I. (2003). Advances in the Conceptualization and Measurement of Religion and Spirituality: Implications for Physical and Mental Health Research.

American Psychologist, 58(1), 64–74. <https://doi.org/10.1037/0003-066X.58.1.64>

Hill, P. C., Pargament, K. I. I., Hood, J. R. W., McCullough, M. E., Swyers, J. P., Larson, D. B., & Zinnbauer, B. J. (2000). Measuring Religiousness and Spirituality: Issues, Existing Measures. *Journal for the Theory of Social Behaviour*, 30(1), 51.

<https://doi.org/10.1111/1468-5914.00119>

Hoover-Kinsinger, S. E. (2018). Hoping against hope: An integration of the hope theology of Jürgen Moltmann and C. R. Snyder's psychology of hope, 37(4), 313–322. Retrieved from <https://search-proquest-com.ezproxy.liberty.edu/docview/2139488390?pq-origsite=summon>

Hui, C. H., Wai Ng, E. C., Ying Mok, D. S., Ying Lau, E. Y., & Cheung, S. (2011). “Faith Maturity Scale” for Chinese: A revision and construct validation. *International Journal for the Psychology of Religion*, 21(4), 308-322. doi: 10.1080/10508619.2011.607417

Jankowski, P. J., & Vaughn, M. (2009). Differentiation of self and spirituality: Empirical explorations. *Counseling and Values*, 3, 83–96. Retrieved from <https://search-proquest->

com.ezproxy.liberty.edu/docview/207605684

Jung, C. (1933). *Modern man in search of soul* (W. S. Dell and C. F. Baynes, Trans.). New York, NY: Harcourt.

Kerr, M. E., & Bowen, M. (1988). *Family evaluation*. New York, NY: Norton.

Kinghorn, W. (2013). "Hope that is seen is no hope at all:" Theological constructions of hope in psychotherapy. *Bulletin of the Menninger Clinic*, 77(4), 369–394.

Krause, N., & Pargament, K. I. (2018). Reading the Bible, Stressful Life Events, and Hope: Assessing an Overlooked Coping Resource. *Journal of Religion and Health*, 57(4), 1428–1439. doi: 10.1007/s10943-018-0610-6

Krause, N., Pargament, K. I., & Ironson, G. (2018a). In the Shadow of Death: Religious Hope as a Moderator of the Effects of Age on Death Anxiety. *Journals of Gerontology - Series B Psychological Sciences and Social Sciences*, 73(4), 696–703.
<https://doi.org/10.1093/geronb/gbw039>

Krause, N., Pargament, K. I., & Ironson, G. (2018b). Meaning in Life Moderates the Relationship Between Sacred Loss/Desecration and Health. *Journal for the Scientific Study of Religion*, 57(2), 365–376. <https://doi.org/10.1111/jssr.12522>

Leanne, L. N. (2004). Faith, spirituality, and religion: A model for understanding the differences. *College Student Affairs Journal*, 23(2), 102-110. Retrieved from <https://search-proquest-com.ezproxy.liberty.edu/docview/224820726>

Lester, A. D. (1995). *Hope in pastoral care and counseling*. Louisville, KY: Westminster John Knox Press.

Marks, L. (2005). Religion and Bio-Psycho- Social Health: A Review and Conceptual Model. *Journal of Religion and Health*, 44(2), 173-186. doi: 10.1007/s10943-005-2775-z

- Miller, W. R., & Delaney, H. D. (Eds.). (2004). *Human nature, motivation, and change: Judeo-Christian perspectives on psychology*. Washington, D.C.: American Psychological Association.
- Moltmann, J. (1967). *Theology of hope: On the ground and the implications of a Christian eschatology*. Minneapolis, MN: Fortress Press.
- Moodley, R. & West, W. (2005). *Integrating traditional healing practices into counseling and psychotherapy*. Thousand Oaks, CA: Sage Publications.
- Obayuwana, A. O., Collins, J. L., Carter, A. L., Rao, M. S., Mathura, C. C., & Wilson, S. B. (1982). Hope Index Scale: an instrument for the objective assessment of hope. *Journal of the National Medical Association, 74*(8), 761–765. doi:
- Pargament, K. I. (1997). *The psychology of religion and coping: Theory, research, practice*. New York: Guilford Press.
- Pargament, K. I. (1999). The Psychology of Religion and Spirituality? Yes and No. *International Journal for the Psychology of Religion, 9*(1), 3–16. doi: 10.1207/s15327582ijpr0901
- Pargament, K. (2002). The Bitter and the Sweet: An Evaluation of the Costs and Benefits of Religiousness. *Psychological Inquiry, 13*(3), 168-181. doi: 10.1207/S15327965PLI1303_02
- Pargament, K. I. (2019). God Help Me : Advances in the Psychology of Religion and Coping, *24*(2002), 48–63. doi: 10.1163/157361203X00219
- Pargament, K. I., Feuille, M., & Burdzy, D. (2011). The Brief RCOPE: Current Psychometric Status of a Short Measure of Religious Coping. *Religions, 2*(1), 51–76. <https://doi.org/10.3390/rel2010051>
- Pargament, K. I., Koenig, H. G., & Perez, L. M. (2000). The many methods of religious coping:

- Development and initial validation of the RCOPE. *Journal of Clinical Psychology*, 56(4), 519–543. [https://doi.org/10.1002/\(SICI\)1097-4679\(200004\)56:4<519::AID-JCLP6>3.0.CO;2-1](https://doi.org/10.1002/(SICI)1097-4679(200004)56:4<519::AID-JCLP6>3.0.CO;2-1)
- Pargament, K. I., & Raiya, H. A. (2007). A decade of research on the psychology of religion and coping: Things we assumed and lessons we learned. *Psyke and Logos*, 28, 742–766. Retrieved from <https://psycnet.apa.org/record/2008-00007-001>
- Pargament, K., Smith, B., Koenig, H., & Perez, L. (1998). Patterns of Positive and Negative Religious Coping with Major Life Stressors. *Journal for the Scientific Study of Religion*, 37(4), 710-724. doi: 10.2307/1388152
- Pargament, K. I., Tarakeshwar, N., Ellison, C. G., & Wulff, K. M. (2001). Religious coping among the religious: The relationships between religious coping and well-Being in a National sample of Presbyterian Clergy, Elders and Members. *Journal for the Scientific Study of Religion*, 40(3), 497–513. Retrieved from <http://www.jstor.org/stable/1388103>
- Peterson, C., & Seligman, M.E.P. (2004). *Character strengths and virtues: A handbook and classification*. New York, NY: Oxford University Press.
- Piedmont, R.L. (1999). Does spirituality represent the sixth factor of personality? Spiritual transcendence and the five-factor model. *Journal of Personality*, 67, 985–1013. doi: 10.1111/1467-6494.00080
- Piedmont, R. L., & Nelson, R. (2001). A psychometric evaluation of the short form of the faith maturity scale. *Research in the Social Scientific Study of Religion*, 12, 165–183. Retrieved from <https://www.researchgate.net/publication/290484308>
- Rogers, C. R. (1950). Why pastoral psychology? – An editorial. *Pastoral Psychology*, 1(1), 5-6. doi: 10.1007/BF01843703.

- Rovers, M., & Kocum, L. (2010) Development of a Holistic Model of Spirituality. *Journal of Spirituality in Mental Health*, 12(1), 2-24. doi: 10.1080/19349630903495475
- Salsman, J., & Carlson, C. (2005). Religious Orientation, Mature Faith, and Psychological Distress: Elements of Positive and Negative Associations. *Journal for the Scientific Study of Religion*, 44(2), 201-209. Retrieved from <http://www.jstor.org/stable/3590541>
- Scheier, M. F., & Carver, C. S. (1985). Optimism, coping, and health: Assessment and implications of generalized outcome expectancies. *Health Psychology*, 4(3), 219-247. <http://dx.doi.org/10.1037/0278-6133.4.3.219>
- Scioli, A., Ricci, M., Nyugen, T., & Scioli, E. R. (2011). Hope: Its nature and measurement. *Psychology of Religion and Spirituality*, 3(2), 78-97. doi: 10.1037/a0020903
- Seligman, M. E. P. (2002). *Authentic happiness: Using the new positive psychology to realize your potential for lasting fulfillment*. New York, NY: Free Press.
- Seligman, M. E. P. (2006). *Learned optimism: How to change your mind and your life*. New York, NY: Vintage.
- Seligman, M. E. P. (2018). *The hope circuit: A psychologist's journey from helplessness to optimism*. New York, NY: PublicAffairs.
- Shamsalinia, A., Pourghaznein, T., & Parsa, M. (2015). The relationship between hope and religious coping among patients with Type 2 Diabetes. *Global Journal of Health Science*, 8(1), 208–216. doi:10.5539/gjhs.v8n1p208
- Singh, D. C., & Madan, A. (2017). Religious Coping in the Process of Counseling / Psychotherapy. *Biomedical Journal of Scientific & Technical Research*, 1(2), 340-347. doi: 10.26717/BJSTR.2017.01.000191
- Smith, W. C. (1962). *The meaning and end of religion: A new approach to the religious*

- traditions of mankind*. New York, NY: Macmillan.
- Snyder, C. R. (1994). *The psychology of hope: You can get there from here*. New York, NY: The Free Press.
- Snyder, C. R. (2000). The past and possible futures of hope. *Journal of Social and Clinical Psychology, 19*(1), 11–28. <https://doi.org/10.1521/jscp.2000.19.1.11>
- Snyder, C. R. (2002). Hope theory: Rainbows in the mind, *Psychological Inquiry, 13*(4), 249–275. https://doi.org/10.1207/S15327965PLI1304_01
- Snyder, C. R., Harris, C., Anderson, J. R., Holleran, S. A., Irving, L. M., Sigmon, S. T., Yoshinobu, L., Gibb, J., Langelle, C., Harney, P. (1991). The will and the ways: Development and validation of an individual-differences measure of hope. *Journal of Personality and Social Psychology, 60*(4), 570-585. doi: 10.1037/0022-3514.60.4.570
- Snyder, C. R., Sympson, S. C., Ybasco, F. C., Borders, T. F., Babyak, M. A., & Higgins, R. L. (1996). Development and validation of the State Hope Scale. *Journal of Personality and Social Psychology, 70*(2), 321-335. doi: 10.1037/0022-3514.70.2.321
- Stebnicki, M. A. (2006). Integrating spirituality in rehabilitation counselor supervision. *Rehabilitation Education, 20*(2), 115-132. <https://doi.org/10.1891/088970106805074494>
- Steffen, L. E., & Smith, B. W. (2013). The influence of between and within-person hope among emergency responders on daily affect in a stress and coping model. *Journal of Research in Personality, 47*(6), 738-747. doi: 10.1016/j.jrp.2013.06.008.
- The Pew Research Center's Forum on Religion & Public Life (2015a). *America's Changing Religious Landscape*. Washington, D.C.: Pew Research Center. Retrieved from <https://www.pewforum.org/2015/05/12/americas-changing-religious-landscape/>
- The Pew Research Center's Forum on Religion & Public Life (2015b). *The Future of World*

- Religions: Population Growth Projections, 2010-2050*. Washington, D.C.: Pew Research Center. Retrieved from <https://www.pewforum.org/2015/04/02/christians/>
- Wang, S., Xu, X., Zhou, M., Chen, T., Yang, X., Chen, G., & Gong, Q. (2017). Hope and the brain: Trait hope mediates the protective role of medial orbitofrontal cortex spontaneous activity against anxiety. *NeuroImage*, *157*, 439-447. doi: 10.1016/j.neuroimage.2017.05.056
- Weber, S. R., & Pargament, K. I. (2014). The role of religion and spirituality in mental health. *Current Opinion in Psychiatry*, *27*(5), 358–363. doi: 10.1097/YCO.0000000000000080
- Werdel, M. B., Dy-Liacco, G. S., Ciarrocchi, J. W., Wicks, R. J., & Breslford, G. M. (2014). The unique role of spirituality in the process of growth following stress and trauma. *Pastoral Psychology*, *63*(1), 57-71. doi: 10.1007/s11089-013-0538-4
- Weis, R., & Speridakos, E. C. (2011). A meta-analysis of hope enhancement strategies in clinical and community settings. *Psychology of Well-being*, *1*(1), 1-16. doi: 10.1186/2211-1522-1-5
- Yalom, I. D., & Leszcz, M. (2005). *The theory and practice of group psychotherapy* (5th ed.). New York, NY: Basic Books.
- Zinnbauer, B. J., Pargament, K. I., & Scott, A. B. (2003). The Emerging Meanings of Religiousness and Spirituality: Problems and Prospects. *Journal of Personality*, *67*(6), 889–919. <https://doi.org/10.1111/1467-6494.00077>

Appendix A: Study Questionnaire

1. Are you 18 or older?

[Includes a drop down choice of “Yes” or “No” with required selection of one option.]

2. Are you a Christian?

[Includes a drop down choice of “Yes” or “No” with required selection of one option.]

3. What is your gender?

[Includes a drop down choice of “Male” or “Female” with required selection of one option.]

4. What is your current age?

[Includes a drop down menu of 18 to 118 with required selection of one option.]

5. How many years ago did you first make your profession of faith or convert to Christianity?

[Includes a drop down menu of “Less than one year ago” as well as 1 to 99 with required selection of one option.]

6a. What is your current Christian affiliation?

[Includes a drop down menu of the following choices with required selection of one option.]

- Adventist
- Anglican/Episcopal
- Baptist
- Catholic
- Congregational/United Church of Christ
- Friends/Quaker

- Lutheran
- Methodist
- Mormon/The Church of Jesus Christ of Latter-day Saints
- Nondenominational
- Orthodox
- Pentecostal/Holiness
- Presbyterian/Reformed
- Restorationist/Christian Church (Disciples of Christ)
- Other

[Selection proceeds to a 30-character field for custom entry of affiliation with entry then proceeding to next question.]

- No current affiliation

[Selection skips the next question as “type or role” is contingent on “current” affiliation.]

6b. What is your current type or role of participation within your affiliated body of Christian believers?

[Includes a drop down menu of the following choices with required selection of one option.]

- Ordained Minister/Leader
- Lay Minister/Leader
- Congregant/Member Only

For the following 14 prompts, indicate your typical use of each coping response when faced with

stressful events; where 1 = *not at all* and 5 = *a great deal*.

7. Looked for a stronger connection with God.

1 2 3 4 5

8. Sought God's love and care.

1 2 3 4 5

9. Sought help from God in letting go of my anger.

1 2 3 4 5

10. Tried to put my plans into action together with God.

1 2 3 4 5

11. Tried to see how God might be trying to strengthen me in this situation.

1 2 3 4 5

12. Asked forgiveness for my sins.

1 2 3 4 5

13. Focused on religion to stop worrying about my problems.

1 2 3 4 5

14. Wondered whether God had abandoned me.

1 2 3 4 5

15. Felt punished by God for my lack of devotion.

1 2 3 4 5

16. Wondered what I did for God to punish me.

1 2 3 4 5

17. Questioned God's love for me.

1 2 3 4 5

18. Wondered whether my church had abandoned me.

1 2 3 4 5

19. Decided the devil made this happen.

1 2 3 4 5

20. Questioned the power of God.

1 2 3 4 5

For the following 12 prompts, indicate your experience of spirituality and altruism; where 1 = *Never true* and 7 = *Always true*.

21. I help others with their religious questions and struggles.

1 2 3 4 5 6 7

22. I seek out opportunities to help me grow spiritually.

1 2 3 4 5 6 7

23. I feel a deep sense of responsibility for reducing pain and suffering in the world.

1 2 3 4 5 6 7

24. I give significant portions of time and money to help other people.

1 2 3 4 5 6 7

25. I feel God's presence in my relationships with other people.

1 2 3 4 5 6 7

26. My life is filled with meaning and purpose.

1 2 3 4 5 6 7

27. I care a great deal about reducing poverty in the United States and throughout the world.

1 2 3 4 5 6 7

28. I try to apply my faith to political and social issues.

1 2 3 4 5 6 7

29. My life is committed to the God of my understanding.

1 2 3 4 5 6 7

30. I talk with other people about my faith.

1 2 3 4 5 6 7

31. I have a real sense that God is guiding me.

1 2 3 4 5 6 7

32. I am spiritually moved by the beauty of God's creation.

1 2 3 4 5 6 7

For the following 12 prompts, indicate the response that best describes you across time and situations; where 1 = *Definitely False*, 2 = *Mostly False*, 3 = *Somewhat False*, 4 = *Slightly False*, 5 = *Slightly True*, 6 = *Somewhat True*, 7 = *Mostly True*, and 8 = *Definitely True*.

33. I can think of many ways to get out of a jam.

1 2 3 4 5 6 7 8

34. I energetically pursue my goals.

1 2 3 4 5 6 7 8

35. I feel tired most of the time.

1 2 3 4 5 6 7 8

36. There are lots of ways around any problem.

1 2 3 4 5 6 7 8

37. I am easily downed in an argument.

1 2 3 4 5 6 7 8

38. I can think of many ways to get the things in life that are important to me.

1 2 3 4 5 6 7 8

39. I worry about my health.

1 2 3 4 5 6 7 8

40. Even when others get discouraged, I know I can find a way to solve the problem.

1 2 3 4 5 6 7 8

41. My past experiences have prepared me well for my future.

1 2 3 4 5 6 7 8

42. I've been pretty successful in life.

1 2 3 4 5 6 7 8

43. I usually find myself worrying about something.

1 2 3 4 5 6 7 8

44. I meet the goals that I set for myself.

1 2 3 4 5 6 7 8

For the following 6 prompts, indicate the response that best describes how you think about yourself right now in this present moment; where 1 = *Definitely False*, 2 = *Mostly False*, 3 = *Somewhat False*, 4 = *Slightly False*, 5 = *Slightly True*, 6 = *Somewhat True*, 7 = *Mostly True*, and 8 = *Definitely True*.

45. If I should find myself in a jam, I could think of many ways to get out of it.

1 2 3 4 5 6 7 8

46. At the present time, I am energetically pursuing my goals.

1 2 3 4 5 6 7 8

47. There are lots of ways around any problem that I am facing now.

1 2 3 4 5 6 7 8

48. Right now, I see myself as being pretty successful.

1 2 3 4 5 6 7 8

49. I can think of many ways to reach my current goals.

1 2 3 4 5 6 7 8

50. At this time, I am meeting the goals that I have set for myself.

1 2 3 4 5 6 7 8