Religiosity and Religious Coping among Malaysians

Norzarina Mohd-Zaharim

Cover photographs: Places of worship in Malaysia. L-R: Masjid Wilayah Persekutuan by Christoph Haase, Kuil Buddha Yu Lung San by unknown, Kuil Hindu by unknown, Christ Church Melaka by unknown)

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1. Introduction[1]

1.1 Brief Overview

Based on past studies on Asians' and North Americans' stress and coping, Chang (2003) proposed that Asians might have a sense of self-efficacy that is different from that of North Americans. In low population density and resource rich North America, independence, high personal efficacy, and high control over the environment are resilient factors. In contrast, in high population density and resource poor Asia, resilient factors are more humble and realistic self-beliefs and personal efficacy in ability to work with, rather than the environment:

> This realistic and humble estimate of the self, however, is aided with a belief in self-directed control and regulation, a yielding of control over the world to external sources, be it God or political authorities. This recognition of external, non-self, powers, however, ironically gives rise to a strategy of self empowerment by aligning oneself with the sources of power, be it religion or other people Optimism might be derived not from positive self-evaluation but from the belief that the self is malleable, and that there are benevolent higher powers in charge of life events (Chang, 2003, p. 9).

Little is known about the stress and coping process of Malaysians across age. Do Malaysians have a sense of self-efficacy that is similar to that of their Asian or North American counterparts? What common daily stressors do they encounter? How do they appraise and cope with these stressors? Do they, as proposed by Chang, gain a sense of self empowerment or resilience from aligning themselves to a source of power that is religion? The paper attempts to provide answers to the above questions, focusing on stress and coping among Malaysians as well as the role religion may play in the stress and coping process.

The focus on stress and coping among Malaysians is crucial and timely given evidence of rising stress for people worldwide (e.g., Clay, 2011; Tomlinson, Grimsrud, Stein, Williams, & Myer, 2009; Wadaa, Mohd Zaharim, Alqashan, 2010; Waszkowska, Merecz, & Drabek, 2009). In the United States, for example, chronic stress—stress that hampers ability to function normally over a long period—is becoming a public health crisis (Clay, 2011). Work stress is a major concern worldwide for its negative impact on health and socio-economy (Waszkowska, Merecz, & Drabek, 2009).

The focus on the role that religion may play in the stress and coping process of Malaysians is also important given evidence that religion can be an important personal resource factor in times of stress (Hood, Hill, & Spilka, 2009). Research has suggested that religion plays a central role in the daily life of Malay Muslims of Malaysia (Ghinani, 1998; Haque & Masuan, 2002). Research has also indicated a resurgence of Hinduism among Indians of Malaysia (Belle, 2008), a modernization of Chinese folk religion, and a spiritualist reanimation of the church among Chinese of Malaysia (Goh, 2009). Yet, we know very little about the place and influence of religion in the day-to-day challenges of Malaysians.

1.2 Religiosity and Religious Coping

Religiosity or *religiousness* is commonly viewed as society-based beliefs and practices in relation to God or a higher power that is associated with a church or organized group (Egbert, Mickley, & Coeling, 2004). It is a multidimensional construct (Paloutzian & Kirkpatrick, 1995; Spilka, Hood, & Gorsuch, 1985) involving cognitions, emotions, and behaviors in the search for the sacred (Hill & Hood, 1999; Larson, Swyers, & McCullough, 1998). It can be broken down into intrinsic or extrinsic dimensions (Allport, 1966) with intrinsic religiousness referring to "faith as a supreme value in its own right. It is oriented toward a unification of being, takes seriously the commandment of brotherhood, and strives to transcend all self-centered needs" (p. 455). On the other hand, extrinsic religiousness is "strictly utilitarian; useful for the self in granting safety, social standing, solace and endorsement for one's chosen way of life" (p. 455).

Research has suggested that religious beliefs and practices may contribute to decreased stress and increased sense of well-being (Larson, Sherrill, & Lyons, 1992) but not everyone draws on religion in times of stress. Pargament (1997) proposed that people are more likely to use religious coping when religious beliefs and practices form a large part of their life orientation and when religion is seen as a compelling source of solutions to life problems. In contrast, people are less likely to engage in religious coping when they are unfamiliar with and have no access to religious beliefs and practices and when they do not believe in the efficacy of religious coping for particular problems (Pargament, 1997). In short, the more people integrate religion into their definition of themselves and their social roles, the more likely they are to use religion in stressful times (Pargament, Takeshwar, Ellison, & Wulf, 2001).

That religion can affect the stress and coping process has been widely studied. For instance, religious beliefs have been found to influence primary appraisal: how a life event is viewed depends on an individual's religious views (Park, Cohen, & Herb, 1990). An individual might believe that God is trying to communicate something important through the event or that God would not harm him/her or give him/her more than he/she could handle (Park & Cohen, 1992). At secondary appraisal, religious beliefs can influence the perceived availability of coping options and the perceived ability to persevere (Park et al., 1990).

Religious coping activities can serve as both primary and secondary approaches to control (Pargament, Cole, Vandecreek, Belavich, Brant, & Perez, 1999). Primary approaches to control may be manifested in intercessory prayers with individuals seeking control over the situation through God. Secondary approaches to control may be evident in a positive reframing of the situation as a reflection of God's will, believing that prayers can predict the outcomes of events, and experiencing power by aligning oneself with God (Paragament et al., 1999). Other religious activities, such as meditation, contemplative prayer, and scripture reading, may also serve as secondary control functions by giving a calming effect in difficult situations (Pargament et al., 1999).

1.3   Religious Development across the Life Span

James Fowler (1981, cited in Santrock, 1999) proposed a theory of religious development that focuses on the motivation to discover the meaning of life and parallels Erikson's (1950, 1968, 1982), Piaget's (1932), and Kohlberg's (1969) theories of development (Torney-Purta, 1993, cited in Santrock, 1999). In Stage 1 (intuitive-projective faith of early childhood), infants learn to trust their caregiver (Erikson, 1950, 1968, 1982) and later invent their own intuitive ideas of good and evil. As they enter Piaget's preoperational stage, children begin to see right and wrong in terms of consequences to the self. They also become aware of the sacred, prohibitions, death, and morality. In Stage 2 (mythical-literal faith of middle and late childhood), children move into Piaget's concrete operational stage and begin to reason in a more logical and concrete way. They interpret religious stories, beliefs, and symbols literally and perceive God, like a parental figure, to be rewarding the good and punishing the bad. They see right and wrong in terms of fairness. In Stage 3 (synthetic-conventional faith of the transition between childhood and adolescence and early adolescence), adolescents start to develop formal operational thought (Piaget's final stage) and include religion in their total belief system. They have yet to explore alternative religious ideologies and still largely conform to others' religious beliefs. They see right and wrong in terms of the harm it brings to a relationship or what others might say (Fowler, 1981, cited in Santrock, 1999). They rely on abstract ideas of formal operational thinking; hence, they are interested in a more personal relationship with God.

In Stage 4 of Fowler's theory of faith development (individuative-reflective faith in late adolescence or young adulthood), individuals examine and question their faith. They rely on critical reflection,

demythologize literal symbols of faith, and take responsibility for their beliefs and feelings vis-à-vis their faith. They do not rely on external authorities anymore but on authority within the self. In Stage 5 (conjunctive faith in mid-life), individuals engage in a more comprehensive interpretation of religious symbols and are willing to engage in interfaith dialogues and multiple perspectives so as to learn truths. They are able to commit to a form of justice that transcends race, class, and faith. Finally, in Stage 6 (universalizing faith achieved by very few individuals), individuals attain "enlightenment" and feelings of oneness with the power of being or God. They overcome issues of personal comfort, and are able to sacrifice their own well-being in their cause to make important contributions to society. They commit to principles of love and justice and strive to overcome oppression and violence (Fowler, 1991).

According to Coles (1990), even very young children have clear and fluid ideas about divine realities, faith, and prayer. Religious traditions provide structures for moral development and for socialization into ideals of personhood and behavior (Barnes, Plotnikoff, Fox, & Pendleton, 2000). They may also provide a framework for understanding social relations, the natural world, and the link between daily life and the sacred world (Barnes et al., 2000). Many children and adolescents show an interest in religion, and religious institutions such as Sunday schools and parochial education introduce religious beliefs and encourage children to carry on a religious tradition (Santrock, 1999).

During adolescence, identity development becomes a central focus for youths (Erikson, 1968). It is a time of questioning and examining belief systems (Erikson, 1968) including religious beliefs and affiliations (Kaplan, 1998). Thus, adolescence may be an important time in religious development (Yates & Caldwell, 1998, cited in Santrock, 1999). With cognitive development adolescents may begin to question what their own religious beliefs truly are even though they have been indoctrinated into a religion by their parents. During adolescence, religiosity declines and this is often viewed as natural because during this period all forms of authority are questioned and critical thinking advances (Donahue & Benson, 1995). With an increase in abstract thinking, adolescents are able to consider various ideas about religious and spiritual concepts (Santrock, 2011). And with an increase in logical reasoning, adolescents are able to develop hypotheses and systematically sort through different answers to spiritual questions (Santrock, 2011).

A recent study found that religiosity (encompassing frequency of prayer, frequency of discussing religious teachings, frequency of deciding moral actions for religious decisions, and the overall importance of religion in everyday life) declines from ages 14 to 20 (Koenig, McGue, & Iacono, 2008), with more change in religiosity occurring from ages 14 to 18 than from ages 20 to 24 (Santrock, 2011). Religious interest also seems to have declined in recent times. In a 2007 nationwide study in the United States, for example, 78 percent of adolescents said they attended a religious service frequently or occasionally during their senior year in high school, in contrast to 85 percent in 1997 (Pryor, Hurtado, DeAngelo, Blake, & Tran, 2009). Research has further indicated that adolescent girls are more reli-

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gious than adolescent boys (King & Roeser, 2009). They are more likely than boys to attend religious services, perceive religion's influence in their daily lives, pray alone, and feel closer to God (Smith & Denton, 2005).

An international survey of 18- to 24-year-olds revealed that young adults in less developed countries are more religious than their peers in developed countries (Lippman & Keith, 2006). For example, 0 percent of those surveyed in Japan and 93 percent of those surveyed in Kenya thought that religion was very important in their lives. Forty percent of those surveyed in Sweden and 100 percent of those surveyed in Pakistan believed in God.

Research has shown that religion plays a very important role in some adults' lives but has little or no influence in others' lives (McCullough, Enders, Brion, & Jain, 2005). Further, the influence of religion may change across the life span (George, 2009; Sapp, 2010). A longitudinal study found that some people who had been strongly religious in early adulthood became less religious in middle adulthood (Clausen, 1993). Another longitudinal study of people in their early thirties to late sixties or early seventies found a significant increase in spirituality between mid-fifties or early sixties and late adulthood (Wink & Dillon, 2002).

Research has suggested that children's sense of spirituality and/or involvement in a religious community may encourage positive coping strategies (Barnes et al., 2000). For example, religious traditions provide interpretations of suffering and illness and means for feeling supported in difficult circumstances such as hospitalization, disability, terminal illness, death of a family member, sexual abuse, and racism (Barnes et al., 2000). Research has found that for adolescents, church attendance may also contribute to better adjustment, higher life satisfaction, lower levels of distress and worry, lower risk of delinquency and substance abuse, and increased academic and social competence (Barnes et al., 2000). In the case of adults, those who consider religion to be important in their lives and pray frequently worry less, are less anxious, and have lower levels of depressive symptoms (Rosmarin, Krumrei, & Andersson, 2009). Further, older adults who derive a sense of meaning in life from religion tend to have higher levels of life satisfaction, self-esteem, and optimism (Krause, 2003).

1.4   Malaysia: Brief Demographic Overview

Located in Southeast Asia, Malaysia is a developing country with per capita gross national income of USD7000. As of April 2011, it has a population of 28.5 million people (Department of Statistics Malaysia, 2011) with a male-female ratio of 104:100 (Department of Statistics Malaysia, 2010). Malaysia is a multiracial and multicultural country with 65.1 percent of the population being Malay and Bumiputera, 26 percent Chinese, 7.7 percent Indian, and 5.9 percent others. By religion, 60.4 percent of the population is Muslim, 19.2 percent Buddhist, 9.1 percent Christian, 6.3 percent Hindu, and 2.6 percent Confucianist, Taoist, and other Chinese folk religionist (Department of Statistics Malaysia, 2001).

1.5 Research Objectives

The research detailed in the present paper was part of a series of studies exploring Malaysians' stress and coping. Only parts of the studies that pertained to Malaysians' religiosity and religious coping are reported in the paper. The overarching objective of the paper was to explore the use of religion among Malaysians facing common everyday stress. There were several specific objectives: (1) to determine the level of religiosity reported by Malaysians; (2) to explore the frequency of religious coping among Malaysians facing daily stress; (3) to determine if the employment of religious coping differed with situation; and (4) to examine the relationship between religiosity and religious coping.

2. Study 1: Religiosity and Religious Coping among Malay Children

2.1 Introduction

Study 1 investigated common daily stressors facing Malaysian Malay children and their coping efforts. Only parts of the study that pertained to the children's religious coping and religiosity are reported in the paper.

2.2 Method

2.2.1 Participants

Three hundred and fifty-seven Malay children from four urban schools in Penang, Malaysia, were recruited. There were three age groups: 117 Primary 1 children (57 boys and 60 girls), 120 Primary 3 children (60 boys and 60 girls), and 120 Secondary 1 children (60 boys and 60 girls) with mean ages of 6.80 years ($SD = .29$), 8.77 years ($SD = .29$), and 12.67 years ($SD = .27$), respectively. These three cohorts were chosen to capture crucial cognitive, social, and emotional developments across the age groups, consistent with the age range examined by previous studies on children's coping with everyday stress (e.g., Band & Weisz, 1988; Isnis & Chang, 2003; Lim, 2000; Xiao & Chang, 2003).

2.2.2 Procedure

Primary 1 and Primary 3 children ($n = 237$) were interviewed in groups of three for about 40 minutes using an interview schedule (see Appendix A). To minimize conformity in answers and domination by any child, all participants took turns being first, second, or last in responding to the questions. The children's individual responses were transcribed verbatim for later coding.

By school officials' directive, Secondary 1 children ($n = 96$; 48 boys and 48 girls) were given self-administered questionnaires to fill under the guidance and supervision of the researcher (see Appendix A). Another 24 children (12 boys and 12 girls) were randomly assigned to either the interview or the questionnaire groups. Twelve of them were interviewed in groups of three; another 12 were given the self-administered questionnaires. The purpose of this procedure was to compare the results of the two groups for any difference. T-tests on several variables yielded no significant differences[2]. So, it was

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[2] The variables—general self-efficacy, internal self-efficacy, and percentage of event-directed coping—are not discussed in detail in this paper. General self-efficacy was defined as broad and stable sense of personal competence to deal effectively with stressful situations (Schwarzer, 1992). Internal self-efficacy was defined as people's judgments about their abilities to regulate their own behavior, cognition, and affect to attain a fit with the demands of the environment. Event-directed coping was defined as efforts to change or influence external events, circumstances, or people according to one's wishes and desires (Band & Weisz, 1988).

assumed that Secondary 1 children who were given the P2Q to fill did not differ significantly from children who were interviewed using the P2Q.

2.2.3 Instrument

Adapted from Koh, Lim, Velu, and Chang (2002) and Band and Weisz (1988), the questionnaire (in Malay language) had four sections (see Appendix A). Section A included detailed questions on seven stressors. These stressors (i.e., father angry, mother angry, sibling angry, teacher angry, peer conflict, test anxiety, and getting bad grades) were selected based on the results of an earlier study (i.e., Phase 1) that explored common daily stressors faced by Malaysian Malay children. Section B tapped the children's outlook disposition[3]; Section C their religiosity; and Section D their general self-efficacy[4].

The questions in Section A asked about details of what happened; how the children felt and what they did and thought when the stressor took place; and why they did and thought that way about the stressor. Pertinent questions to this paper included Questions (e)(i) and (ii) on the coping style/strategy employed and Questions (g)(i) and (ii) on religious coping. Questions (e)(i) and (ii) were open-ended, whereas Questions (g)(i) and (ii) used a 5-point Likert scale.

The questions in Section C asked about the children's attitudes toward and backgrounds in religion; this section made up the Religiosity Scale. The scale contained 5 items and used either a 5-point Likert scale or multiple dichotomy. The items reflected the notion of religiosity as understood within the context of Islamic tradition: that faith must consist of both beliefs and practices, and that learning the faith is compulsory for all Muslims (see Table 1). Cronbach's alpha was modest, .53 for the overall sample, .53 for the Primary 1 group, .48 for the Primary 3 group, and .67 for Secondary 1 group.

Table 1

Religiosity Scale: Item Means and Corrected Item-Total Correlations by School Grade

Item	Mean (r)			
	Overall	Primary 1	Primary 3	Secondary 1
1. Daily routine	4.50 (.41)	4.16 (.35)	4.68 (.51)	4.67 (.56)
2. Relief in difficulties	4.18 (.28)	3.91 (.38)	4.13 (.17)	4.48 (.36)
3. Religious education	4.46 (.39)	4.15 (.40)	4.58 (.39)	4.63 (.48)
4. Learning methods	4.36 (.14)	4.67 (.11)	4.51 (.18)	3.91 (.36)
5. Practice	4.68 (.26)	4.87 (.35)	4.78 (.13)	4.40 (.46)

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[3] Excluded from detailed discussion in this paper.

[4] Ibid.

2.3   Results

A 2 x 3 (Gender x Grade) ANOVA was conducted for religiosity. There were a significant main effect of grade, $F(2, 351) = 3.56$, $p < .05$, $\eta^2 = .02$, and a significant interaction for religiosity, $F(2, 351) = 5.75$, $p < .005$, $\eta^2 = .03$. Tukey HSD tests indicated that Primary 3 children had a significantly higher mean religiosity score than Primary 1 children, $p < .05$. Secondary 1 children did not have a significantly different mean religiosity score from those of Primary1 and Primary 3 children. The inverted U-shape age trend differed by gender: mean religiosity score increased and then stabilized with age for boys, from means of 4.23 to 4.52 to 4.53, but for girls, mean religiosity score increased and then decreased, from means of 4.47 to 4.55 to 4.30 (see Figure 1)

Figure 1. Religiosity by school grade and gender

A 2 x 3 (Gender x Grade) ANOVA was conducted for religious coping across stressors on the entire sample. The analysis yielded a significant main effect of grade on religious coping, $F(2, 351) = 9.97$, $p < . 001$, $\eta^2 = .05$; there was no significant gender effect or interaction. Tukey HSD tests indicated that Secondary 1 children used religious coping significantly more than Primary 1 and Primary 3 children, ps between .005 and .001. There was no significant difference between Primary 1 and Primary 3 children in religious coping. Overall mean religious coping was moderate[5] at 3.46/5.00 ($SD = 1.00$) whereas mean religious coping across stressors for Primary 1 children was 3.24/5.00 ($SD = 1.08$), for Primary 3 children 3.35/5.00 ($SD = .94$), and for Secondary 1 children 3.77/5.00 ($SD = .91$) (see Table 2).

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[5] The study used a 5-point Likert scale. With equal ranges for the low, high, and moderate criteria, low was defined as below 2.33; high, above 3.67; and moderate, between 2.33 and 3.67.

Table 2

Mean Religious Coping by Stressor and School Grade

Stressor	Frequency of Religious Coping Mean (SD)			
	Overall	Primary 1	Primary 3	Secondary 1
Father angry	3.32 (1.12)	3.07 (1.16)	3.17 (1.04)	3.69 (1.05)
Mother angry	3.39 (1.19)	3.19 (1.33)	3.24 (1.08)	3.69 (1.11)
Sibling angry	3.23 (1.26)	3.25 (1.28)	2.96 (1.21)	3.46 (1.24)
Teacher angry	3.38 (1.31)	3.21 (1.36)	3.24 (1.40)	3.66 (1.13)
Peer conflict	3.34 (1.33)	3.24 (1.37)	3.25 (1.40)	3.58 (1.18)
Test anxiety	3.88 (1.08)	3.51 (1.31)	3.82 (1.05)	4.19 (.86)
Bad grades	3.74 (1.07)	3.52 (1.25)	3.56 (1.04)	4.00 (.93)

Paired-samples two-tailed t-tests were conducted on the lowest and highest means of religious coping among the stressors. The tests revealed significant differences in religious coping between the sibling angry and test anxiety stressors for the overall group, $t(178) = -7.31$, $p < .001$, for Primary 3 children, $t(64) = -6.10$, $p < .001$, and for Secondary 1 children, $t(68) = -5.57$, $p < .001$. There was also a significant difference in religious coping between the father angry and bad grades stressors for Primary 1 children, $t(53) = -3.68$, $p < .001$

Another wave of t-tests on religious coping among stressors revealed no significant differences in the frequencies of religious coping for the father angry, the mother angry, and the teacher angry stressors for all age groups. In contrast, religious coping was used significantly less frequently for the sibling angry stressor than for the peer conflict stressor by the overall group, $t(173) = -2.03$, $p < .05$, and by Secondary 1 children, $t(51) = -2.88$, $p < .01$. Across age, Malay children reported significantly higher frequencies of religious coping for the test anxiety stressor than for the bad grades stressor, $t(236) = 2.36$, $p < .01$.

Standard multiple regression analyses (see Table 3) were run to investigate how religiosity and four other variables (i.e., positive outlook, general self-efficacy, external self-efficacy, and internal self-efficacy)[6] predicted Malay children's frequencies of religious coping. For the overall group, religiosity

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[6] These variables are not discussed in detail in this paper. Positive outlook was defined as general favorable attitude toward life, the future, self, and others. General self-efficacy was defined as broad and stable sense of personal competence to deal effectively with stressful situations (Schwarzer, 1992). External self-efficacy was defined as people's judgments about their abilities to organize and execute courses of action to influence the demands of the environment. Internal self-efficacy was defined as people's judgments about their abilities to regulate their own behavior, cognition, and affect to attain a fit with the demands of the environment. Data from

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(β = .205, p <.001) was the strongest predictor of religious coping, followed by internal self-efficacy (β = .155, p < .05), and general self-efficacy (β = .117, p < .05), $F(5, 351)$ = 17.26, p < .001, R^2 = .44. For Primary 1 children, religiosity (β = .300, p = .004) and external self-efficacy (β = .238, p < .05) were the only significant predictors of religious coping, $F(5, 111)$ = 8.22, p < .001, R^2 = .27. For Primary 3 children, religiosity did not significantly predict religious coping; instead, internal self-efficacy (β = .496, p < .001) and general self-efficacy (β = .300, p = .001) did, $F(5, 114)$ = 21.39, p < .001, R^2 = .48. For Secondary 1 children, positive outlook (β = .295, p = .001) was a stronger predictor of religious coping than religiosity (β = .229, p = .01), $F(5, 114)$ = 7.19, p < .001, R^2 = .24.

Table 3

Summary of Standard Multiple Regression Analyses for Variables Predicting Religious Coping

Variable	B	SE B	β
Primary 1			
Religiosity	.104	.035	.300**
General self-efficacy	.009	.027	.034
External self-efficacy	.263	.126	.238*
Internal self-efficacy	.121	.127	.110
Positive outlook	−.025	.025	−.095
Primary 3			
Religiosity	−.059	.034	−.138
General self-efficacy	.077	.023	.300**
External self-efficacy	−.002	.096	−.002
Internal self-efficacy	.505	.119	.496**
Positive outlook	.019	.017	.082
Secondary 1			
Religiosity	.078	.030	.229**
General self-efficacy	.015	.029	.049
External self-efficacy	−.031	.200	−.024
Internal self-efficacy	.191	.195	.150
Positive outlook	.083	.025	.295**

Note. * p < .05   ** p < .01

these variables were derived from responses to Section B (Positive Outlook Scale), Section D (General Self-Efficacy Scale), Section A's Question (c), and Section A's Question (d) of the P2Q, respectively.

2.4 Discussion

The findings from the Religiosity Scale revealed that Malay children gave high frequency ratings to the question of whether religion provided comfort and strength in difficulties. In contrast, Malay children used religious coping only with moderate to high frequencies across stressors. Only in academic difficulties and conflicts with parents did Malay children use religious coping with high frequencies, but this involved only 13-year-olds. Age seems to be a factor in evaluating both religious coping and religiosity. Malay children who used religious coping the most frequently across stressors were the 13-year-olds. Likewise, it was the 13-year-olds who reported the highest frequency of religion providing comfort and strength in difficulties on the Religiosity Scale.

For all seven stressors except for conflict with sibling, religious coping increased with age. Across stressors, Malay children's frequencies of religious coping increased with age, with no significant differences between 7- and 9- year-olds. Nine-year-olds reported the highest religiosity among the three age groups; they reported significantly higher religiosity than 7-year-olds, but 13-year-olds were not significantly different from the other two groups in religiosity.

That older children reported more frequent use of religious coping but less religiosity was rather surprising. A possible explanation for this observation is that older children may understand the complexity of religion better and thus, are better able to use their religiosity in times of distress. Hence, not only did 13-year-old Malay children use religious coping the most frequently; they also reported the highest frequency of religion providing comfort and strength in difficulties (Item 2 on the Religiosity Scale). Thirteen-year-old Malay children's religiosity and religious coping conform to the religious stage of adolescents described by Fowler's (1981) theory of faith development. According to Fowler, adolescents start to develop formal operational thought and begin to integrate what they have learned about religion into a coherent belief system. One manifestation of the integration of religious knowledge into the adolescent's belief system may be increased utilization of religious coping.

The findings also raised the possibility that younger children were over-reporting their religiosity and that their religiosity was still in the stage of acquisition from parents and the society, i.e., not internalized for its meaning and relevance in daily life. However, given that the strongest correlation between religiosity and religious coping was for 7-year-olds (followed by 13-year-olds), and that religiosity was the strongest predictor of religious coping only for 7-year-olds, this latter explanation should be rejected in the case of Malay children.

For Malay children of all three age groups, academic difficulties evoked higher frequencies of religious coping than interpersonal conflicts. This is in line with the finding that Malay children used

praying (spiritual support under self-directed coping) as a coping strategy[7] more for academic stressors than for interpersonal stressors. Further, across age, Malay children reported using religious coping more frequently when they experienced test anxiety than when they got bad grades. It could be that spiritual support during a test was seen to be of greater value to Malay children than when getting bad grades. After all, when one receives a bad grade, it is a "done deal;" all that one can hope (and pray) for is to receive better grades in the future. In contrast, God's intervention during a test is in the here and now and highly desirable. Findings such as these supported the idea that Malay children in academic difficulties believed in making efforts by studying hard, praying for God's help, and then putting their faith in God.

Malay children, particularly the 13-year-olds, used religious coping significantly more frequently when they faced peer conflicts than when they faced sibling conflicts, underscoring the increasing importance of peer relationships with age (e.g., Papalia & Olds, 1998). Another striking observation was that Malay children used religious coping with similar frequencies when their fathers, mothers, and teachers were angry. Perhaps, in the religious context, these three authority figures were seen as similarly prominent by Malay children. In Islam, there are many injunctions to obey and be kind to parents (e.g., disobedience to parents is among the seven gravest sins); likewise, to respect those with knowledge, such as teachers (e.g., those with knowledge are more noble in the sight of God than those without).

Religious coping was related to religiosity for Malay children of all three age groups. Religiosity best predicted religious coping only for the overall and the 7-year-old groups. Religiosity failed to predict religious coping for 9-year-olds but was the second strongest predictor after positive outlook for 13-year-olds. The three self-efficacy variables also significantly predicted religious coping: external self-efficacy for 7-year-olds, and internal and general self-efficacy for 9-year-olds. Thus, it is important to note that for these children, religiosity was not the only factor influencing the use of religious coping. Other personal resource factors such as self-efficacy were about as important as religiosity in predicting the utilization of religious coping. More specifically, Malay children with higher self-efficacy were more likely to use religious coping than those with lower self-efficacy.

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[7] The variable coping strategy is not discussed in detail in this paper. Spiritual support was defined as efforts to reduce stress through spiritual means; self-directed coping was defined as efforts to change or influence one's own subjective, cognitive and/or emotional state in line with the stressful event (Band & Weisz, 1988). Data from the variable coping strategy were derived from responses to Question (e)(i) of the P2Q.

3. Study 2: Religiosity and Religious Coping among Undergraduate Students

3.1 Introduction

Study 2 investigated common daily stressors facing Malaysian undergraduate students and their coping efforts. Only parts of the study that pertained to the undergraduates' religious coping and religiosity are reported in the paper.

3.2 Method

3.2.1 Participants

Participants were 380 undergraduate students at a public university in Malaysia (*M* age = 21.26; *SD* = 1.06; 16% male). They were of Islamic (51%), Buddhist (37%), Hindu (3%), and Christian (6%) faiths. By ethnicity, 51% were Malay, 43% were Chinese, 4% were Indian, and 2% were from other ethnic groups.

3.2.2 Procedure

The participants were informed that participation was voluntary and then asked to fill out a questionnaire in class under the supervision and guidance of the researcher. Those who returned the questionnaire were given extra credit for a class.

3.2.3 Instrument

The bilingual (Malay-English) questionnaire contained 5 sections (see Appendix B). Of these sections, only Sections 1, 2, and 5 were directly relevant to the present paper: Section 1 contained questions on demographic background; Section 2, on common daily stressors and coping strategies; Section 3, on general self-efficacy; Section 4, on optimism, and Section 5, on religiosity. The questions on work and personal stressors and their corresponding coping strategies were open-ended. General self-efficacy was measured using the General Self-Efficacy Scale (GSES; Schwarzer, 1992). The GSES has 10 items in the form of statements and is measured on a 4-point scale ranging from 1 (*not at all true*) to 4 (*exactly true*). Optimism was measured using the Life Orientation Test-Revised (LOT-R; Scheier, Carver, & Bridges, 1994). The LOT-R has 6 items (plus 4 filler items) in the form of statements and is measured on a 5-point scale ranging from 0 (*strongly disagree*) to 4 (*strongly agree*). Religiosity was measured using the Intrinsic Religious Motivation Scale (IRMS; Hoge, 1972). The IRMS has 10 items in the form of statements and is measured on a 4-point scale ranging from

1 (*not at all true*) to 4 (*exactly true*). Of the ten items, seven are for intrinsic religiosity and three are for extrinsic religiosity. Cronbach's alphas for the GSES, LOT-R, and IRMS were .91, .50, and .89, respectively. The GSES, LOT-R, and IRMS were translated into Malay and adapted using the forward translation method.

3.3 Results

The most common daily stressors facing Malaysian undergraduate students were academic, peer, financial, love, general anxiety, and family problems (see Table 4).

A 2 x 3 x 4 (Gender x Ethnicity x Religion) ANOVA was conducted for religiosity. There were significant effects of gender and religion on religiosity $F(1, 357) = 6.62$, $p = .01$, $\eta^2 = .02$ and $F(3, 357) = 15.52$, $p < .001$, $\eta^2 = .12$. Male undergraduates reported significantly higher religiosity than female undergraduates (see Table 5). Muslims reported significantly higher religiosity than Buddhists and Hindus, ps $< .001$, but the difference in religiosity between Muslims and Christians was not statistically significant. Buddhists reported significantly lower religiosity than Muslims, Hindus, and Christians, ps $< .001$.

A 2 x 3 x 4 (Gender x Ethnicity x Religion) ANOVA was also conducted for religious coping (see Table 5). There were significant effects of gender and religion on religious coping, $F(1, 357) = 9.12$, $p = .003$, $\eta^2 = .03$, and $F(1, 357) = 4.81$, $p = .003$, $\eta^2 = .04$, respectively. Female undergraduates used religious coping significantly more frequently than male undergraduates. Buddhists reported significantly lower frequency of religious coping than Muslims and Christians, ps $< .001$. Muslims and Christians reported similar frequencies of religious coping.

Further, ANOVA revealed that religious coping significantly differed with stressor: $F(5, 318) = 2.3$, $p < .05$, $\eta^2 = .04$ for Stressor 1 and $F(5, 284) = 3.90$, $p = .012$, $\eta^2 = .05$ for Stressor 2 (see Table 4). Undergraduates used religious coping significantly more frequently for love than family problems, $p = .026$, and for financial than peer problems, $p = .002$.

Standard multiple regression showed that religiosity ($\beta = .68$, $p < .001$)—but not self-efficacy and optimism—predicted religious coping, $F(3, 367) = 114.03$, $p < .001$, $R^2 = .48$ (see Table 6). The higher one's religiosity, the more frequently one would employ religious coping.

Table 4

Frequency of Stressor and Mean Religious Coping by Stressor

Stressor	Frequency of Stressor	Mean Religious Coping (*SD*)
Academic	360	3.35 (.90)
Peer	66	3.06 (1.03)
Finance	64	3.55 (.83)
Love	48	3.46 (.95)
General anxiety	44	3.49 (.90)
Family	42	3.19 (1.08)

Table 5

Mean Religious Coping and Mean Religiosity by Gender, Ethnicity, and Religion

	Mean Religious Coping (*SD*)	Mean Religiosity (*SD*)
Gender		
Male (*n* = 61)	3.28 (.85)	30.48 (6.85)
Female (*n* = 319)	3.38 (.88)	30.11 (7.25)
Ethnicity		
Malay (*n* = 193)	3.84 (.39)	35.15 (3.35)
Chinese (*n* = 165)	2.77 (.96)	24.25 (6.09)
Indian (*n* = 14)	3.64 (.66)	29.79 (6.28)
Religion		
Islam (*n* = 195)	3.84 (.39)	35.14 (3.34)
Buddhism (*n* = 140)	2.68 (.95)	23.31 (5.14)
Hinduism (*n* = 13)	3.62 (.68)	29.31 (6.26)
Christianity (*n* = 23)	3.52 (.63)	32.96 (4.75)

Table 6

Summary of Standard Multiple Regression Analyses for Variables Predicting Religious Coping

Variable	*B*	*SE B*	*β*
Religiosity	.084	.005	.681**
Self-efficacy	.006	.007	.041
Optimism	-.003	.013	-.010

Note. **$p < .001$

3.4 Discussion

Surprisingly, male undergraduates reported significantly higher religiosity than female undergraduates, but female undergraduates reported using religious coping significantly more frequently than male undergraduates. An explanation for this finding would be that female undergraduates were more extrinsically religious such that religion was perhaps more useful to them during challenging times as compared to male undergraduates. Further research with a larger sample of male undergraduates is needed to observe whether the same finding would be yielded and to explore this line of interpretation.

The data showed that among the four religious groups, Muslim undergraduates reported the highest religiosity and the most frequent use of religious coping whereas Buddhist undergraduates, the lowest religiosity and the least frequent use of religious coping. For Christian and Hindu undergraduates, they fell somewhere in between Muslim and Buddhist undergraduates. This suggested different intrinsic and extrinsic notions of religion to undergraduate students of different faiths. For Muslim undergraduates, religion might play a central role in their day-to-day lives, unlike for Buddhist undergraduates.

The data also indicated that the frequency of religious coping significantly differed with situation. Curiously, undergraduates used religious coping significantly more frequently for love than family problems, as if love relationships at that stage in their lives were more important than family relationships. If that was the case, then it was consistent with research showing that adolescents increasingly break away from their families (Santrock, 2011) and that young adults face the important developmental task of forming intimate relationships (Erikson, 1950, 1968; Santrock, 2011). That undergraduates also used religious coping more frequently for financial problems than for peer conflicts is also interesting. It could be that financial problems were more dire for undergraduates that praying (a form of religious coping examined in this study) was perceived to be more efficacious and useful in the situation than in peer conflicts.

Finally, as expected, religiosity—but not self-efficacy and optimism—predicted religious coping: the higher one's religiosity, the more frequently one would use religious coping. This finding in itself was unremarkable except for its marked difference from the finding of Study 1 on Malay children showing that self-efficacy and positive outlook (a variable similar to optimism) could significantly predict religious coping. Perhaps, for undergraduate students, their sense of religiosity and perception of religion had solidified, unlike those of Malay children. According to Fowler's theory of faith development (1981), with the start of formal operational thought at Stage 3, adolescents begin to integrate what they have learned about religion into a coherent belief system. And at the next stage (usually for individuals in their mid-twenties to late thirties), with critical reflection, individuals take responsibility for beliefs and feelings vis-à-vis their faith. The undergraduate students in this study could well be at Stage 3 or 4 of Fowler's theory of faith development.

4. Study 3: Religiosity and Religious Coping among Working Adults

4.1 **Introduction**

Study 3 investigated common daily stressors facing Malaysian working adults and their coping efforts. Only parts of the study that pertained to the adults' religious coping and religiosity are reported in the paper.

4.2 **Method**

4.2.1 Participants

Five hundred and seventy working adults from Penang, Malaysia were recruited for this study (M age = 38.32; SD = 15.43; male = 49%). They were of Islamic (75%), Buddhist (10%), Hindu (10%) and Christian (5%) faiths. By ethnicity, 69% of the participants were Malay, 11% were Chinese, 17% were Indian, and 3% were from other ethnic groups. University staff (31%) formed the largest group of participants; the rest were staff in elementary/high schools (13%), shipping (8%), children's organizations (7%), banking (5%), manufacturing (4%), and others (21%).

4.2.2 Procedure

Approval to recruit participants for the study was obtained from the management of each workplace. An exception was in the case of university staff who were personally approached for participation. Participants were briefed about the objectives and background of the study, voluntary participation in the study, and payment for participation. They were also informed that they could ask for clarification on the study and questionnaire at any point in their participation. With informed consent, participants were given a self-administered questionnaire at their workplaces to fill out and return at their convenience.

4.2.3 Instrument

The bilingual (Malay-English) questionnaire consisted of five sections (see Appendix C). Of these sections, only Sections 1, 2, and 5 were directly relevant to the present paper: Section 1 contained questions on demographic background such as age, gender, marital status, ethnicity, religion, education, occupation, and industry. Section 2 contained open-ended questions on two common daily stressors (one specified as a work stressor and the other as a personal stressor) and their corresponding coping strategies. Section 3 contained items on general self-efficacy; Section 4, on optimism, and Section 5, on religiosity. General self-efficacy was measured using the General Self-Efficacy Scale (GSES;

Schwarzer, 1992). The GSES has 10 items in the form of statements and is measured on a 4-point scale ranging from 1 (*not at all true*) to 4 (*exactly true*). Optimism was measured using the Life Orientation Test-Revised (LOT-R; Scheier, Carver, & Bridges, 1994). The LOT-R has 6 items (plus 4 filler items) in the form of statements and is measured on a 5-point scale ranging from 0 (*strongly disagree*) to 4 (*strongly agree*). Religiosity was measured using the Intrinsic Religious Motivation Scale (IRMS; Hoge, 1972). The IRMS has 10 items in the form of statements and is measured on a 4-point scale ranging from 1 (*not at all true*) to 4 (*exactly true*). Of the ten items, seven are for intrinsic religiosity and three are for extrinsic religiosity. Cronbach's alphas for the GSES, LOT-R, and IRMS were .91, .44, and .77, respectively. The GSES, LOT-R, and IRMS were translated into Malay and adapted using the forward translation method.

4.3   Results

The stressors most frequently reported were work, financial, general anxiety, and family problems (see Table 7).

A 2 x 3 x 4 (Gender x Ethnicity x Religion) ANOVA was conducted for religiosity (see Table 8). Religiosity differed with religion, but not gender and ethnicity, $F(3, 506) = 16.70$, $p < .001$, $\eta^2 = .09$. Buddhists reported the lowest religiosity, ps $< .001$, whereas Muslims reported the highest religiosity, $.05 < p$s $< .001$. In addition, all religious groups differed from one another in religiosity, $.05 < p$s $< .001$.

Another 2 x 3 x 4 (Gender x Ethnicity x Religion) ANOVA also indicated that religious coping significantly differed with religion, but not gender and ethnicity, $F(3, 506) = 6.84$, $p < .001$, $\eta^2 = .04$ (see Table 2). Buddhists reported the lowest frequencies of religious coping, ps $< .001$; Muslims and Christians reported similar frequencies of religious coping.

Further, ANOVA revealed that religious coping differed with stressor: $F(3, 454) = 2.3$, $p = .011$, $\eta^2 = .02$. Malaysian adults used religious coping significantly more frequently for family problems than general anxiety, $p = .009$ (see Table 7).

Standard multiple regression showed that religiosity ($\beta = .56$, $p < .001$)—but not self-efficacy and optimism—significantly predicted religious coping, $F(3, 510) = 83.54$, $p < .001$, $R^2 = .33$ (see Table 9). The higher one's religiosity, the more frequently one would employ religious coping.

Table 7

Frequency of Stressor and Mean Religious Coping by Stressor

Stressor	Frequency of Stressor	Mean Religious Coping (SD)
Work	424	3.69 (.64)
Finance	209	3.58 (.77)
Family	143	3.78 (.59)
General anxiety	53	3.36 (1.13)

Table 8

Mean Religious Coping and Mean Religiosity by Gender, Ethnicity, and Religion

	Mean Religious Coping (SD)	Mean Religiosity (SD)
Gender		
Male (*n* = 253)	3.61 (.69)	33.34 (6.39)
Female (*n* = 268)	3.76 (.59)	32.91 (5.87)
Ethnicity		
Malay (*n* = 367)	3.80 (.47)	35.20 (4.29)
Chinese (*n* = 59)	2.95 (1.04)	24.85 (7.17)
Indian (*n* = 95)	3.69 (.62)	30.22 (5.91)
Religion		
Islam (*n* = 395)	3.81 (.46)	35.20 (4.29)
Buddhism (*n* = 52)	2.83 (1.05)	23.27 (5.98)
Hinduism (*n* = 55)	3.52 (.75)	27.58 (5.67)
Christianity (*n* = 19)	3.92 (.25)	32.37 (4.84)

Table 9

Summary of Standard Multiple Regression Analyses for Variables Predicting Religious Coping

Variable	B	SE B	β
Religiosity	.060	.004	.560**
Self-efficacy	.007	.005	.059
Optimism	.001	.009	.005

Note. ** $p < .001$

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4.4 Discussion

In contrast to findings of Studies 1 and 2 and much past research (e.g., King & Roeser, 2009; Wink & Dillon, 2002) data from Study 3 showed no significant difference in religiosity and religious coping between genders. Speculation abounds as to what could be the reason for this. Perhaps, for Malaysian adults, both genders have similar notions and perceptions toward religion, whether important or unimportant.

Taken together with the data showing that religious coping and religiosity were highest among Muslim and Christian participants and lowest among Buddhist participants, the picture of religion's place in everyday life of Malaysian adults becomes more compelling. Clearly, adults of different faiths had different values and perceptions vis-à-vis religion. For Muslim and Christian adults, religion might play a more influential role in their day-to-day lives, particularly when coping with everyday challenges.

The data from this study also indicated that religious coping significantly differed with situation, suggesting that different situations call for different interventions, or that importance of religion is felt more in some situations than in others. Participants in this study used religious coping significantly more frequently for family problems than for general anxiety. Perhaps, for adults, the latter could benefit more from divine intervention than the former.

Finally, as expected and consistent with findings of Study 2, religiosity—but not self-efficacy and optimism—predicted religious coping: the higher one's religiosity, the more frequently one would use religious coping. Again, this finding diverged from those of Study 1 in which self-efficacy and positive outlook (a variable similar to optimism) could significantly predict religious coping for Malay children. Perhaps, at Stage 4 of Fowler's theory of faith development or higher, adults are clearer about notions of religion such that intrinsic and extrinsic values of religion merge to become more cohesive.

5. Conclusions

The participants in the three studies featured in the paper employed religious coping with moderate to high frequencies, suggesting its efficacy in providing comfort and strength in distress. This finding is certainly consistent with past research showing that religion can help people in times of distress (e.g., Hood, Hill, & Spilka, 2009; Pargament et al., 1999). This finding also parallels with Chang's (2003) observation that Asians derive a sense of empowerment from aligning themselves with religion.

However, that different Malaysian groups of faith used religion to different degrees in times of stress suggested that different groups of Asians do not equally value religion as a source of empowerment. For instance, Malaysian Muslim children ages 7, 9, and 13 reported moderate-high religiosity and frequencies of religious coping. Malaysian Muslim undergraduate students and working adults reported the highest religiosity and frequencies of religious coping, whereas Buddhist undergraduate students and working adults, the lowest religiosity and frequencies of religious coping. The different levels of religiosity and frequencies of religious coping underscore different intrinsic and extrinsic values of religion to participants of different faiths.

Further, the consistency for the different groups of faith across the three studies suggested a continuity of values or notions of religion and religiosity across the lifespan for Malaysians. It appears that for Muslims regardless of age, religion continues to be important throughout life. In contrast, for Buddhists, religion continues to be less central from young to middle adulthood. For Hindus and Christians, religion's place is somewhere in between that for Muslims and Buddhists. These findings are consistent with the literature concerning the role of religion for these different groups of faith (e.g., Belle, 2008; Ghinani, 1998; Goh, 2009; Haque & Masuan, 2002)

In addition to the group differences, the three studies also indicated the importance of individual differences in religiosity and religious coping in times of stress. As proposed by Pargament (1997), individuals are more likely to use religious coping when religion features prominently in their life orientation and when religion is seen as a compelling source of solutions to life problems. In the three studies, religiosity significantly predicted the use of religious coping. Individuals with high levels of religiosity used religious coping more frequently. In contrast, individuals with low levels of religiosity used religious coping less frequently.

Finally, the different religious values should be taken into account by those providing social and counseling services to Malaysians of various faiths, particularly those for whom religion is highly important. For Malaysian Muslims and Christians particularly, religion might be an important resilience factor in coping with everyday stress. Counseling and social services for them should therefore address this religious-cultural context. A domain or setting that might benefit Malay Muslim children, for example, would be academic or the school. For Malaysian undergraduate students, it would be love

and financial problems; for Malaysian adults, family problems. As highlighted by the three studies, Malaysians engaged in religious coping with different frequencies depending on the stressor, suggesting that the efficacy of religious coping differs with situation.

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7. Appendices

7.1 Appendix A: Questionnaire / Interview Schedule of Study 1

Section A

Scenario 1: When daddy was angry with you

Scenario 2: When mummy was angry with you

Scenario 3: When your older sister/brother was angry with you

Scenario 4: When teacher was angry with you

Scenario 5: When your friend was angry or did not want to play or want to be friends with you

Scenario 6: When you were worried that you would not do well on tests/exams

Scenario 7: When you did not do well on tests/exams

For each stressor, the following questions will be asked:

(a) How often did the situation occur to you?
1. Never
2. Seldom
3. Sometimes
4. Often
5. Always

(b) Usually when this happened, how bad, scared, or unhappy were you?
1. Not at all
2. A little
3. Neither a little nor a lot
4. A lot
5. Extremely

(c) Usually when this happened, to what extent did you think you could change the situation?
1. Not at all
2. A little
3. Neither a little nor a lot
4. A lot
5. Completely

(d) Usually, to what extent did you think you could change yourself, your thoughts, feelings, or behavior to accommodate the situation?
   1. Not at all
   2. A little
   3. Neither a little nor a lot
   4. A lot
   5. Completely

(e) (i) Usually, what did you do or think when this happened?

   (ii) For each thing that you did or thought, why did you do or think that way?

(f) (i) Usually, after doing and/or thinking about what you have said above, to what extent did you feel relieved?
   1. Not at all
   2. A little
   3. Neither a little nor a lot
   4. A lot
   5. Completely

   (ii) Usually, after doing and/or thinking about what you have said above, to what extent did you feel happy?
   1. Not at all
   2. A little
   3. Neither a little nor a lot
   4. A lot
   5. Completely

(g) (i) Usually when this situation occurred, did you pray to God for help/strength?
   1. Never
   2. Seldom
   3. Sometimes
   4. Often
   5. Always

   (ii) Usually when this situation occurred, did you feel that God was with you?
   1. Never
   2. Seldom
   3. Sometimes
   4. Often
   5. Always

Section B

1. Very Bad
2. Bad
3. OK
4. Good
5. Very good

1. Usually, how do you feel about life?

2. Usually, how good do you feel about yourself?

3. Usually, how good do you feel about the future?

4. Usually, how good do you feel about your family?

5. Usually, how good do you feel about your teachers?

6. Usually, how good do you feel about your friends?

Section C

1. Does Islam play an important role in your daily routine?
   1. Not at all
   2. A little
   3. Neither a little nor a lot
   4. A lot
   5. Extremely

2. Does religion give you comfort and strength in dealing with difficulties?
   1. Never
   2. Seldom
   3. Sometimes
   4. Often
   5. Always

3. Is religious education important to you?
   1. Not at all
   2. A little
   3. Neither a little nor a lot
   4. A lot
   5. Extremely

4. How do you learn religion? [Check all that apply.]
   a. At regular school
   b. At religious school
   c. At the mosque
   d. From parents
   e. From reading materials or other media
   f. Other _____

5. How does your family practise Islam? [Check all that apply.]
   a. daily prayers (alone)
   b. fasting in Ramadan
   c. observing the aurat
   d. praying together
   e. visits to the mosque
   f. reciting the Quran
   g. Other _____

Section D

1. Never

2. Sedom

3. Sometimes

4. Often

5. Always

1. When facing difficulties, can you trust your abilities?

2. No matter what comes your way, are you able to handle it?

3. Do you remain calm when facing difficulties because you can rely on your coping abilities?

4. Can you do something to improve a situation?

7.2 Appendix B: Questionnaire of Study 2

Respondent's Information

1. Age

2. Sex

3. Race

4. Religion

5. City and state of residence

6. Household income per month

7. Field of studies

Stressor 1

1. In the past three months, what situation commonly caused you to feel worried / sad / anxious / stressed out?

2. Usually, to what extent did you think you could change the situation?
    1. Not at all
    2. A little
    3. Moderately
    4. A lot

3. Usually, to what extent did you think you could change yourself, your thoughts, feelings, or behavior to accommodate the situation?
    1. Not at all
    2. A little
    3. Moderately
    4. A lot

4. Usually, what did you do or think when the situation occurred?

5. Why did you do or think that way? So that / because …

6. Usually, after doing or thinking that way, to what extent did you feel relieved / happy?
    1. Not relieved / happy at all
    2. A little relieved / happy
    3. Moderately relieved / happy
    4. Very relieved / happy

7. Usually, did you pray to God for help or strength to face the situation?
    1. Never
    2. Seldom
    3. Sometimes
    4. Often

Stressor 2

1. In the past three months, besides the situation you described on the preceding page, what other situation commonly caused you to feel worried / sad / anxious / stressed out?

2. Usually, to what extent did you think you could change the situation?
    1. Not at all
    2. A little
    3. Moderately
    4. A lot

3. Usually, to what extent did you think you could change yourself, your thoughts, feelings, or behavior to accommodate the situation?
    1. Not at all
    2. A little

3. Moderately
4. A lot

4. Usually, what did you do or think when the situation occurred?

5. Why did you do or think that way? So that / because …

6. Usually, after doing or thinking that way, to what extent did you feel relieved / happy?
   1. Not relieved / happy at all
   2. A little relieved / happy
   3. Moderately relieved / happy
   4. Very relieved / happy

7. Usually, did you pray to God for help or strength to face the situation?
   1. Never
   2. Seldom
   3. Sometimes
   4. Often

Self-Efficacy

1. Not at all true

2. Hardly true

3. Moderately true

4. Exactly true

1. I can always manage to solve difficult problems if I try hard enough.

2. If someone opposes me, I can find the means and ways to get what I want.

3. I am certain that that I can accomplish my goals.

4. I am confident that I could deal efficiently with unexpected events.

5. Thanks to my resourcefulness, I can handle unforeseen situations.

6. I can solve most problems if I invest the necessary effort.

7. I can remain calm when facing difficulties because I can rely on my coping abilities.

8. When I am confronted with a problem, I can find several solutions.

9. If I am in trouble, I can think of a good solution.
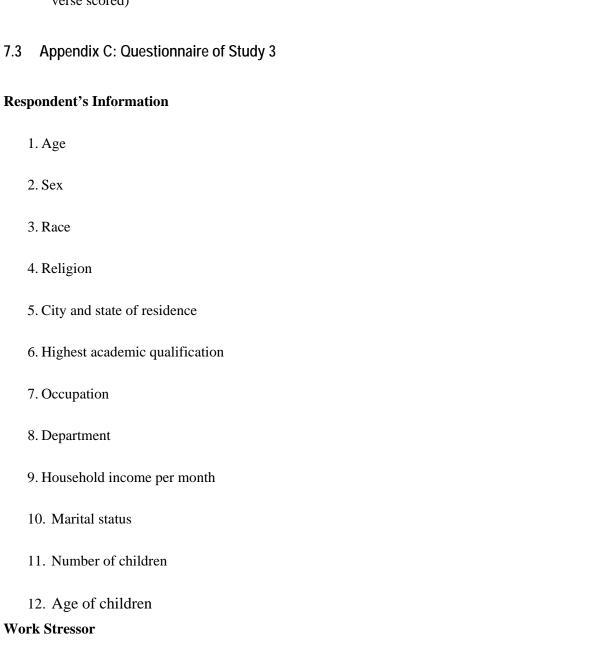
10. I can handle whatever comes my way.

Optimism

0. Strongly disagree
1. Disagree
2. Neutral
3. Agree
4. Strongly disagree

1. In uncertain times, I usually expect the best.

2. It's easy for me to relax. (Filler)

3. If something can go wrong for me, it will. (Reverse scored)

4. I'm always optimistic about my future.

5. I enjoy my friends a lot. (Filler)

6. It's important for me to keep busy. (Filler)

7. I hardly expect things to go my way. (Reverse scored)

8. I don't get upset too easily. (Filler)

9. I rarely count on good things happening to me. (Reverse scored)

10. Overall, I expect more good things to happen to me than bad.

Religiosity

1. Not at all true
2. Hardly true
3. Moderately true
4. Exactly true

1. My faith involves all of my life.

2. One should seek God's guidance when making every important decision.

3. In my life I experience the presence of the Divine.

4. My faith sometimes restricts my actions.

5. Nothing is as important to me as serving God as best I know how.

6. I try hard to carry my religion over into all my other dealings in life.

7. My religious beliefs are what really lie behind my whole approach to life.

8. It doesn't matter as much what I believe as long as I lead a moral life. (Reverse scored)

9. Although I am a religious person, I refuse to let religious considerations influence my everyday affairs. (Reverse scored)

10. Although I believe in my religion, I feel there are many more important things in life. (Reverse scored)

7.3   Appendix C: Questionnaire of Study 3

Respondent's Information

1. Age

2. Sex

3. Race

4. Religion

5. City and state of residence

6. Highest academic qualification

7. Occupation

8. Department

9. Household income per month

10. Marital status

11. Number of children

12. Age of children

Work Stressor

1. In the past three months, what situation commonly caused you to feel worried / sad / anxious / stressed out **at work**?

2. Usually, to what extent did you think you could change the situation?
   1. Not at all
   2. A little
   3. Moderately
   4. A lot

3. Usually, to what extent did you think you could change yourself, your thoughts, feelings, or behavior to accommodate the situation?
   1. Not at all
   2. A little
   3. Moderately
   4. A lot

4. Usually, what did you do or think when the situation occurred?

5. Why did you do or think that way? So that / because …

6. Usually, after doing or thinking that way, to what extent did you feel relieved / happy?
   1. Not relieved / happy at all
   2. A little relieved / happy
   3. Moderately relieved / happy
   4. Very relieved / happy

7. Usually, did you pray to God for help or strength to face the situation?
   1. Never
   2. Seldom
   3. Sometimes
   4. Often

Personal Stressor

1. In the past three months, what personal situation commonly caused you to feel worried / sad / anxious / stressed out?

2. Usually, to what extent did you think you could change the situation?
   1. Not at all
   2. A little
   3. Moderately
   4. A lot

3. Usually, to what extent did you think you could change yourself, your thoughts, feelings, or behavior to accommodate the situation?
   1. Not at all
   2. A little
   3. Moderately
   4. A lot

4. Usually, what did you do or think when the situation occurred?

5. Why did you do or think that way? So that / because …

6. Usually, after doing or thinking that way, to what extent did you feel relieved / happy?
   1. Not relieved / happy at all
   2. A little relieved / happy
   3. Moderately relieved / happy
   4. Very relieved / happy

7. Usually, did you pray to God for help or strength to face the situation?
  1. Never
  2. Seldom
  3. Sometimes
  4. Often

Self-Efficacy

1. Not at all true

2. Hardly true

3. Moderately true

4. Exactly true

1. I can always manage to solve difficult problems if I try hard enough.

2. If someone opposes me, I can find the means and ways to get what I want.

3. I am certain that that I can accomplish my goals.

4. I am confident that I could deal efficiently with unexpected events.

5. Thanks to my resourcefulness, I can handle unforeseen situations.

6. I can solve most problems if I invest the necessary effort.

7. I can remain calm when facing difficulties because I can rely on my coping abilities.

8. When I am confronted with a problem, I can find several solutions.

9. If I am in trouble, I can think of a good solution.

10. I can handle whatever comes my way.

Optimism

0. Strongly disagree

1. Disagree

2. Neutral

3. Agree

4. Strongly disagree

1. In uncertain times, I usually expect the best.

2. It's easy for me to relax. (Filler)

3. If something can go wrong for me, it will. (Reverse scored)

4. I'm always optimistic about my future.

5. I enjoy my friends a lot. (Filler)

6. It's important for me to keep busy. (Filler)

7. I hardly expect things to go my way. (Reverse scored)

8. I don't get upset too easily. (Filler)

9. I rarely count on good things happening to me. (Reverse scored)

10. Overall, I expect more good things to happen to me than bad.

Religiosity

1. Not at all true
2. Hardly true
3. Moderately true
4. Exactly true

1. My faith involves all of my life.

2. One should seek God's guidance when making every important decision.

3. In my life I experience the presence of the Divine.

4. My faith sometimes restricts my actions.

5. Nothing is as important to me as serving God as best I know how.

6. I try hard to carry my religion over into all my other dealings in life.

7. My religious beliefs are what really lie behind my whole approach to life.

8. It doesn't matter as much what I believe as long as I lead a moral life. (Reverse scored)

9. Although I am a religious person, I refuse to let religious considerations influence my everyday affairs. (Reverse scored)

10. Although I believe in my religion, I feel there are many more important things in life. (Reverse scored)

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