Religious and Nonreligious Coping after Negative Life Events: 
Autobiographical Narrative, Personality Trait, and Ethno-Religious Relationships 
with Well-Being and Ego Development

A DISSERTATION

SUBMITTED TO THE GRADUATE SCHOOL
IN PARTIAL FULFILMENT OF THE REQUIREMENTS

for the degree

DOCTOR OF PHILOSOPHY

Field of Human Development & Social Policy

By
Michelle L. Albaugh

Evanston, IL

December 2014
ABSTRACT

Religious and Nonreligious Coping after Negative Life Events: Autobiographical Narrative, Personality Trait, and Ethno-Religious Relationships with Well-Being and Ego Development

Michelle L. Albaugh

This dissertation addressed four questions among 122 highly religious, midlife Christians: (1) how do religious coping strategies used to gain control relate to Five Factor Model personality traits; (2) do religious coping strategies mediate associations between personality traits and well-being; (3) what modes of non/religious coping in autobiographical narratives facilitate positive psychological adaptation and maturity, and which do not; (4) how are these relationships similar or different among members of the four largest U.S. religious traditions?

Chapter Two addressed the first two questions, finding that neuroticism correlated positively with maladaptive religious coping scales (r’s = .18*, .27**), whereas overall religiousness (Duke Religion Index, H. G. Koenig & Parkerson, 1997) related positively to adaptive religious coping scales (r’s = .21*, .54***). Using bootstrapping methods in latent variable structural equation modeling (SEM), passive religious deferral coping (Pargament, Koenig, & Perez, 2000) partially mediated the relationship between neuroticism and diminished psychological well-being (Ryff, 1989) (indirect effect: $\beta = -.12\ast$) but not the relationship between neuroticism and lower satisfaction with life (Diener, Emmons, Larsen, & Griffin, 1985).

Chapter Three addressed Question Three through (1) coding autobiographical narratives for both religious and nonreligious versions of coping themes (themes based on a quantitatively derived coping typology (Connor-Smith & Flachsbart, 2007)) and (2) relating prevalence of
narrative themes with well-being and maturity (ego development; Hy & Loevinger, 1996) outcomes. Coping themes were not significantly related to outcomes. The narratives were also coded for positive and negative endings, and overall religiousness was positively related to positive story endings ($r = .19^*$), negatively related to negative story endings ($r = -.23^{**}$), and positively related to narrative religious meaning-related coping ($r = .20^*$).

Chapter Four explored associations of key variables within four religious traditions (mainline Protestants, evangelical Protestants, black Protestants, and Catholics, Steensland, Park, Regnerus, & Robinson, 2000). These associations guided a qualitative narrative exploration that displayed significant and meaningful differences in the psychology of religion and coping among these four groups. The results of this work highlight specific links between traits, coping, and well-being. Additionally, it reinforces the importance of considering meaningful social groupings in the study of developmental psychological processes.
Acknowledgments

This journey began as many good stories do, a long time ago and in a land that feels quite distant from me now. I began the journey as a single woman in my late 20s... I am now married with two children, am learning to advocate and connect with my young son who has different needs than your average nearly-three-year-old. I have battled cancer and have supported my husband emotionally and with our children to build a company that has supported us financially all of these years. I have much to be grateful for and many people to thank for their care and support through the unfolding of this life’s journey.

Eight years out from completing my music degree, and several years into a career in telecommunications, Kathy Edin saw potential in me and hired me as one of her full-time research assistants. That career-change introduced me to the enterprise of social science research. I had a lot to learn about what that actually meant, but it opened my eyes to a new vision of my life that I had never considered before, and for that I am especially grateful.

Along the way, many Human Development and Social Policy (HDSP) faculty both trained and inspired me. Lindsay Chase-Lansdale offered an example of feminine scholarship that is truly inspirational, where she applied rigorous and creative methods to pressing social issues—to advocate for low-income children and their moms, and generally for the betterment of our world. Her child development course laid a solid foundation for my developmental inquires, and her feedback throughout the course buoyed my belief in myself later on, when the goal seemed especially difficult to reach. Greg Duncan first and foremost taught me to speak “econ”. I learned to use fixed effects models, logistic regression models, and hazard models.... I learned to “truly revere” my coefficient estimates but to actually “lose sleep” over my standard errors. Greg’s encouragement and comments on my work in his course bolstered me in my journey when the route to completion seemed
particularly cloudy. Jeanette Colyavs thought through research ideas with me and inspired me as a young, talented female academic.

Bill Revelle (in the psychology department) taught me the ins and outs of psychometrics and of structural equation modeling theory.

From Jelani Mandara I learned a tremendous amount about the pragmatic nature of academic research and teaching as a career. Jelani modeled the human side of an academic career, and his door was always open. Jelani was a member of my committee and helped me see and believe in myself as a skilled quantitative researcher. Jim Spillane was another member of my committee, and an all around positive influence and cheerleader for excellence.

My advisor and mentor, Dan McAdams, however, invested considerable time and energy in my development as a scholar-writer. His comments on my writing were both painful to receive and vital to my success. I learned to try on his and other scholarly voices... to finally find my own. His thinking about research into lives and stories has informed and infused my work, and he provided the raw materials for me to succeed. Dan also visited with me when I had my babies and then again after my cancer surgery. He did not shy away from the difficult things of life and was bold enough to ask the hard question of whether this journey was right for me... and then to affirm my work with high praise (and no revisions) when the job was done!

A journey of this length is naturally filled with many traveling companions... too many to give everyone proper mention. So, please forgive the oversight and faulty memory if I missed anyone!

So many enlivening conversations with officemates over the years... ideas bantered about, ideals strengthened, hugs shared, and life lived. Thank you especially to Lisa Dorner, Katie Weitz-White, Tiffany Simons-Chan, Kaleen Healey, and Leigh Mesler-Parise for sharing the day-to-day ups and downs of our lives as PhD students.
I am indebted to those I shared time and drafts with... to my first **writing and accountability group**: Tobin Miller-Shearer (in history and religious studies), Jonathan Adler (clinical psychology), and Lisbeth Goble (HDSP). To the “**get sh%t done**” writing group, some of whom walked with me when Joshua nearly died at 6-days-old and then gasped in disbelief when I was diagnosed with cancer just 6 months later: Kaleen Healey, Leigh Mesler-Parise, Lindsey Till-Hoyt, and Megan Mekinda. And to the **SESP working group**, who cheered me to the finish line: Sarah Cannon, Danielle Keifert, and Megan Mekinda. Sarah, to you especially I offer gratitude for welcoming me into the group and for meeting me in our mutual desire to make research anything but lonely endeavor. Three... two...one... Bam! Tomato on!

I am indebted to the **Foley Family Foundation** for funding the Faith, Politics and Life Story Study, my tuition and stipend for two years, and the **Foley Center for the Study of Lives**. I have enjoyed sharing good conversation, emerging research and tasty snacks over the years with you all (especially Gina Logan, Jon Adler, Keegan Walden, Miriam Klevan, Tiffany Simons-Chan, Erika Manczak, Brady Jones, Rayane Alamuddin, Claudia Zapata-Gietl, Brad Olson, David Condon, Josh Wilt, and Jen Pals-Lilgendahl).

Finally, **Scott Richman** helped me with some of the nuts and bolts of my SEM analyses. You cut my learning curve down by weeks or even months! Thank you Scott for your generosity of time and goodwill!

The PhD journey is also a very personal one, with the private battles often taking more courage than the public ones.

I honor **John Parks**, who taught me how to fight valiantly against, live gracefully with, and die peacefully from cancer before I ever received my diagnosis. He often preached that “time is short, and
all we really have is time... and the people we love.” John loved deeply and left a legacy. I hope to live and love so well as he did.

I honor Angela Kezan and Jenn Stephen, whose workshop on living vibrantly with cancer led to a continuation of my journey of personal growth and transformation.

I have tremendous gratitude for Rich Blue, who started me on a journey of self-discovery and learning to take responsibility for the outcomes in my life. It was Rich who first introduced me to the idea that I could teach in a way that hits the heart, mind, and full senses of my students... that’s a way of teaching that I can get excited about. Rich also helped me embrace that it’s my questions in life that are more powerful than my answers. I don’t need to be right; I just need to be on the journey. My “assignment group” (Oliver, Norma, Polly, Gabriella, Lina, Randy, Eric G, Joe, Eric H, Alan, Dave, Sherry, Louise, Pedro, and Kate) offered me camaraderie as we all tried on many ways of being and started to “own” our lives and speak our truth.

I am grateful to my CLE satellite sisters, who loved and supported me through Joshua’s hospitalization and my cancer (Kathleen D., Kathleen K., Bethany, Monica, Jennifer, Kori, and Heather)... and who valued speaking the truth more than just being “nice.”

To the CBS leadership team who prayed faithfully for Joshua and then for me (especially Mary Black, Therese O’Shea, Kris Dahlberg, Valerie Packham, Wendy Skotnikov, Emily Calhoun, Lauren Trankina, Linda Ng, Naomi Dhuse, Joan Rudd, Laura Studee, Jan Andersen, and Keyna Castelluccio), thank you for your faithful prayers and steadfast care. I knew I was always welcome and had a place with you.

To the ladies in my Vineyard women’s group, “META”, I hardly have words to express gratitude for our connection with each other over more than a decade. I treasure the vulnerability we shared with each other, holding each other before God in prayer. I treasure the memories of raucous
laughter (thank you Jamie!) of tears and of holy moments. You women were my rock and held vision for who I was and who I was becoming (Jamie Matsuoka, Jenny Robles, Katie Fruhauff, Jenn Luczkowiak, Julia Moore-Scrimenti, Emery Silva, Jessica Jones, Megan Heep, Megan Bleakley, Kathleen Bressler, Stephanie Horgan, and Stephanie Regester). Stephanie R., although we overlapped for only a short time, your word to me of being like the raspberry bushes that produce their sweet fruit late in the season has sustained me through many, many tough battles. Thank you for encouraging me that the best is yet to come!

Dear, life-long friends who I had less time with and for because I was working on this project: Christine Bladen, Kate Claus, and Kati Ray. I have walked many seasons of life with each of you. And I am looking forward to the seasons yet to come... living out life visions, launching children into the world, and sharing our joys and sorrows. You are some of God’s greatest gifts to me.

I am also grateful to a community of pilgrims who I more recently linked arms with... My coach, Beryl Stromsta, urged me to make this project more tangible and then helped me learn to be increasingly kind and compassionate and curious with myself along the way. A self-proclaimed “mama bear for transformation,” I’ve felt grateful for learning to access myself with you and feeling your care and tenderness for me. You are mentoring me in my ways of being with myself and with the world.

My Year of Transformation leaders and fellow members supported me to take new risks and were there with me as I ramped up my internal journey in a new way. Dorothy Rosen, it has been a huge blessing to get to know you. I treasured our weekly drive time to and from Wright to share our experiences and invest in each other’s lives. I learn a lot from you.

My SOFIA sisters offered beautiful examples of how to be both powerful and feminine in the world and live vibrantly in the service of my values and vision. Wendy Manning, your comment ("I'm
curious to learn how I will meet those seemingly impossible ambitions”) about your audacious work goals reminds me to keep making friends with the creativity I find in the unknown. Faith Laux, thank you for your consistent encouragement and for reflecting back my essence on summer training... you helped me feel like a star! Jackie Davidoff, you are a powerhouse in a small package. Your words hit the mark. Dr. Sarah Hraha, you are a rock of support and encouragement. Thank you for modeling life-changing application of SEI principles and putting a PhD to fantastic use! To Anne Gallagher, Beryl Stromsta, Marilyn Pearson, Edda Coscioni, Christina Canright, Karen Terry, Denise Delves, Jillian Eichel, Kate Holmquist, Kathleen Kearns, Sandra Meagher, Jennifer Masi, Jennifer Cline, Sahar Malik, Judy Cazares, Sanjida Chowdhury and the rest of my sisters, I look forward to sharing the journey ahead.

Barbara Burgess, a special thank you for making all of this support possible... and for painting a vision of limitless possibilities. Your life, authority, purpose, and vulnerability inspire me.

My “labbies” (Caryn, Jeff, Justin, Greg, Allison, Asif, Yasemin, John, Patti, Phouisara, and Maryum) and lab leaders (Mike Zwell, Jenn Stephen, Kevin McCann, and Gertrude Lyons) ran the all-important .2 miles of this 26.2-mile marathon and loudly and vigorously cheered me on to the finish line! You all encouraged me not just to finish, but to finish strong. You supported me to increase my capacity to parent my children through a challenging season, support my entrepreneurial husband as he worked 70-80 hours each week, be in “project” together, and beautifully and pragmatically craft my dissertation. I had a lot on my plate, and I drew support from you all to more fully be myself, care for myself, and be cared for by you. Jennifer, thank you for mom-ing me through this season of finishing strong. Greg, I will never forget your text encouraging me to go for full satisfaction at my defense. To that point I had only thought about satisfying my committee... I connected with my vision for how I wanted those moments to go, and I was blown away by the outcome.
Dr. Judith Wright embodied a vision for how to engage with research to actually change the world. You gave me a new model for seeing how powerful feminine values are, as well as practical ways to value being a woman in the world and work to make a difference.

Dr. Bob Wright, you saw me, welcomed me, pursued me, held me accountable, and helped me clarify my life purpose: to be an outrageous woman who pursues deep connection with myself, God, and others, removing obstacles to people living in the full glory of who they were created to be, for the purpose of eliminating neglect and abandonment on the planet. Thank you!

Mary Kay Ryan is in a category that defies description... Mary Kay, I am grateful first for your guidance that helped me give myself fully to my cancer treatments, to let them do their healing work to their fullest. With that behind me, I am learning to follow God afresh with you, harmonizing the mystery of the unknown with the certainty that comes with earned authority. I am learning to “bottom line” things and to honor the smaller, previously less vocal parts of myself. Thank you for showing me that “it is the glory of God to conceal a matter; to search out a matter is the glory of kings” (Prov 25:2). God loves a good mystery and invites us to dive in. I am discovering a delightful mixture of both child-like and mature ways of being. My path is clearer than ever before, and my hope is renewed. We have a lot more work to do, and the dissertation was just another step along the way.

God, of course, is the One from whom all life and other good gifts emanate: spiritual, material, and otherwise. You have held me and nurtured me and guided me my whole life, whether I’ve known it at the time or not. Your depths continue to call out to mine, and I am grateful to be invited into your mystery. I am also eager to jump into our next adventure together... I believe the best is yet to come!

My parents, Mike Nebe and Sandy Nebe, receive big thanks from me for all of the weekends that the kiddos spent with them. You gave me concentrated time to work on writing my dissertation
by day... and enjoy date time with Terry at night. Thank you for giving us more space to work on our life projects and for cheering me on!

Samantha (nearly 6) and Joshua (nearly 3), you provide deep meaning, purpose and comic relief to my “too serious” way of being. I love you both beyond words. Samantha, you are a delight, growing daily into such a beautiful young girl, self-possessed and curious, smart and creative. You bring balance and fun to my life. Joshua, you have had a tremendously challenging life for being in the world less than three years. You feel deeply and strongly. You fight for what you want. You never give up. Your resilience inspires me and your playfulness and affection melt my heart. Thank you both!

Finally, I owe my greatest thanks on earth to my husband and partner, Terry Albaugh, who supported our family financially for 10 years, through my graduate school career, 2 babies and cancer treatments. Terry, you are my chosen partner in life, a trusted advisor and faithful companion. You held and hold belief in my ability to soar. You model responsibility and faithfulness and risk-taking! There is no one I would rather work with, change diapers and comfort sick children in the middle of the night with, talk for hours with, hike a mountain with, or grow with.

Through this dissertation project, I learned to go into the unknown of my thoughts and feelings—with my data and analyses and the anxiety that comes with a blank screen—to discover what I really feel and think. I learned to incorporate my thinking and feeling selves in the research endeavor, to slow down and move in and through and my fear and anxiety to find God and myself anew. Richest blessings on the journeys of all who read this... may you find your way through your unknown!
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Chapter One: Introduction

Postpartum depression & suicidal thoughts…

_I remember a particular day when I was standing with my son in my arms on the balcony of our apartment and almost jumped off… almost… let him go and then jumped off after. And that was just very, very frightening and I just sat down and called Andrew’s parents to take the baby, and I just went and got myself down to the ground floor, we were up in the 11th floor. And I was very, very shaken by that and I think that after that, I brought myself out of it through a combination, really, really through working out, kind of beating myself up physically, I mean I just decided that it was not going to continue… So I did bring myself out of it._ –Linda¹ (Participant #80)

A Father’s Death…

_Back then, I could not even mourn and I could not even cry. God just had me work all the way through it. He would not let me stop. And I see now, because I wanted to just take a leave of absence. I wanted to just lay down somewhere and just let me cry about it. I wanted to mourn him… and the Holy Spirit would never let me do it. It just pushed me to go on… my faith has held me together._ –Shalise (Participant #109)

People have to make meaning of the events of their lives, especially the difficult ones, if they are to live a full and satisfying life. Although some challenges present little difficulty and are overcome easily, some negative events in life are extraordinarily challenging and powerfully threaten people’s sense of order and well-being (Pals, 2006; Park, 2010). Religion is often cited as a key resource that people use to cope with adversity. Yet religion can both help and hinder how people cope with and make sense of personal tragedy (Pargament, 1997). When religion works well, people successfully use it to regain balance and make sense of tragic or unexpected events. When religion fails, faith can be lost, along with a sense of well-being and personal meaning. So, how is it that some people (sometimes) successfully use their religion to

¹ All names of participants and those they mention in their stories have been changed to pseudonyms, as have the names of specific geographic locations.
cope with adversity, and others do not? Which individual characteristics or traits influence their choice and expression of religious ways of coping with adversity?

In addition to using their religiousness, people often work out the meanings of important life events through the stories they tell about those events (Blagov & Singer, 2004; Bruner, 1990; McAdams, 2010; McLean & Pasupathi, 2011; Singer, 2004). Common sense dictates that religion, a potent meaning-making resource, is likely to figure prominently in the stories told by people with significant religious commitments. What then is the relationship between religion in autobiographical narratives and living a good and satisfying life? How do religious people use their religion to cope with, and make sense of, adversity? Addressing such questions will significantly deepen our understanding of religion’s role in human development and psychological adaptation.

I define “religion” in its broadest sense: Religion encompasses people’s evolving beliefs, behaviors, and affiliations that are related to both public and private aspects of their search for meaning, in ways related to the sacred. (I borrow from Pargament’s (1997) definition of religion, "a search for significance in ways related to the sacred” (p.32).) Religiousness, then, is simply an individual’s personal interpretation and expression of his or her religion. In this way, I also use religion and religiousness as umbrella terms that include both institutionalized religion and personal spirituality. Although many researchers and lay people alike make a distinction between religion and spirituality, I contend that these concepts are not so easily separated and am not convinced that such a separation is meaningful to the present investigation. Further, in regard to the data used here, participant sampling was done by congregational affiliation, and the quantitative measures of religiousness in these data include
both public and private religious expressions. For the purposes of this study, therefore, I include both religion and spirituality under the heading of “religion” and “religiousness”.

The questions stated above sit at the intersection of research literatures on religiousness, coping, personality traits, autobiographical narratives, and meaning-making. First, regarding religiousness and coping, it is relatively well known that overall religiousness is positively related to physical health and psychological well-being (e.g., Ellison, 1991; Harold G. Koenig, Cohen, Blazer, & Kudler, 1995; Patock-Peckham, Hutchinson, Cheong, & Nagoshi, 1998; Seybold & Hill, 2001). This finding, however, is clouded by imprecise (or insufficient) measurement of religiousness. In many studies, overall religiousness is measured in terms of frequency of church attendance or personal prayer, with no regard for the contents of those church services or prayers. More fine-grained perspectives reveal that some religious expressions can be harmful, as well as helpful (e.g., Ano & Vasconcelles, 2005; Maltby & Day, 2000; Pargament et al., 2000) (cf. Exline, 2002, for more discussion of the ways that religion can provide roadblocks to wellbeing). For example, those with an extrinsic orientation toward their religion (i.e., participating in their religion for reasons of power, social status, or inclusion), are more likely to suffer from depression than those who do not have this orientation (Maltby & Day, 2000), and those who use maladaptive religious coping strategies are also more likely to experience negative psychological adjustment to stress than those who do not use these strategies (Ano & Vasconcelles, 2005).

Although survey-based research on coping is at last beginning to investigate the multifaceted ways that religion can be used in coping processes, a good deal of the current coping scholarship still settles for simplistic measures of frequency of religious attendance or prayer as a proxy for the full range of using one’s religion to cope with life’s adversities. These
aspects of religiousness are dispositional in nature (i.e., how religious a person is overall), rather than operational (i.e., the manner in which a person uses their religiousness to adapt to or cope). Although not the same as using one’s religion to cope, dispositional religiousness is an important construct. As stated earlier, it usually predicts positive physical and psychological well-being (e.g., Ellison, 1991; Harold G. Koenig et al., 1995; Patock-Peckham et al., 1998; Seybold & Hill, 2001).

Dispositional religiousness generally shows mild correlations with Five Factor Model (FFM) personality traits, primarily with agreeableness and conscientiousness (Saroglou, 2002, 2010). We know that FFM traits have significant and predictable relationships with nonreligious coping (cf. Connor-Smith & Flachsbart, 2007 for a meta-analysis); however, their relationship with religious coping strategies is not fully known. One aim of this dissertation project, developed in Chapter Two, is to test hypothesized relationships between FFM traits and specific religious coping strategies. If these relationships find support, it is then possible to examine potential mediation, where specific religious coping strategies might operate as mediators between both dispositional religiousness and FFM traits, and well-being.

Turning to autobiographical narratives, meaning-making, and coping, there is a growing body of empirical work that links narrative representations of coping and meaning-making with important outcomes, such as physical health, psychosocial maturity, and psychological well-being (e.g., J. Bauer, McAdams, & Pals, 2008; L. King & Raspin, 2004; L. King, Scollon, Ramsey, & Williams, 2000; McLean & Pratt, 2006; Pals, 2006). There are two noteworthy limitations to this work, however. First, this body of research has tended to overlook the influence of religiousness on coping efforts and resulting outcomes; second, these studies
explore the relations between coping and narrative features of narrative identity, but they do so in relative isolation from the long-standing, quantitative stress and coping research programs.

Another point from the literature pertains to the study of religiousness in general. Because of its specific focus on what is held sacred, religion may be an altogether unique personal resource in times of difficulty (Pargament, Magyar-Russell, & Murray-Swank, 2005; Piedmont, 1999). This arguably distinctive role that religion plays in people’s lives, combined with the fact that many in the U.S. today say that they draw on their religion in times of distress (Pargament, 1997), establishes a firm rationale for studying the relationship that religiousness can have with individual characteristics, coping, meaning-making, and quality of life outcomes such as cognitive and psychological well-being and maturity.

Finally, religiousness, coping, and autobiographical narratives are prime locations of individual meaning-making activity, and their intersection presents an exciting view into the important and ongoing psychological task of creating meaning and making sense of one’s life. For a topic so salient to so many people’s everyday lives, it is striking how little we know empirically about the psychological functions of religiousness across the various domains of human experience. The current dissertation project endeavors to advance these research areas by drawing on both qualitative autobiographical narratives and related quantitative religiousness survey measures, from 122 midlife Christian adults who are committed to and engaged in their congregations.

In Chapters Three and Four of this dissertation I combine Pargament’s (2007) theory regarding religious coping with recent factor-analytic and meta-analytic work on the structure and correlates of nonreligious coping styles, within a narrative identity framework and methodology. This provides a rich setting to unpack the nuanced influence various religious
and nonreligious coping styles have on cognitive and psychological well-being and maturity outcomes, at least among individuals who report significant religious commitments.

The purpose of this work, then, is three-fold: First, to test and report the associations between religious coping strategies and FFM traits and then to test whether or not religious coping styles promote cognitive and psychological well-being outcomes through the expression of positive and negative personality traits. A second aim is to better understand the role of personal religiousness in narrative identity and narrative coping. The third purpose is to discover differences in religious coping discourse and identity that vary by social context. To pursue this goal, I conducted three interrelated analyses using a data set that obtained life story interviews and self-report variables from 122 midlife adults who were active members of Christian congregations. The first analysis (Chapter Two) is primarily a quantitative test of the hypothesis that positive and negative religious coping styles are pathways that facilitate the expression of relatively stable, enduring personality traits into positive and negative well-being outcomes, respectively. The second analysis (Chapter Three) is a mixed-method test of whether religious and nonreligious coping themes coded in autobiographical life narratives are related to well-being and ego development outcomes in anticipated ways. The analysis and results demonstrate the importance of considering religious tradition when examining coping and its influence on psychological well-being and maturity, which leads naturally into the third analysis. The third analysis (Chapter Four) is a qualitative exploration of religious coping discourse in autobiographical narratives (directed by a quantitative exploration), which compares life narrative themes among members of four different Christian religious traditions.

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2 Chapter Two includes its own introduction, theoretical framework, methods, findings, and discussion and therefore can be read as a stand-alone paper. Chapter Four is an outgrowth from Chapter Three, however, and these two chapters are best read in tandem.
In the remainder of this introduction, I provide a brief overview of the data and methodology, to be followed by a more detailed description of each of the three substantive chapters.

**Methodology**

These analyses drew on intensive case study data collected from 122 U.S. Christians who were regular church attenders. These data and participants have already been the basis of several investigations (e.g., Hanek, Olson, & McAdams, 2011; McAdams & Albaugh, 2008b; Wilt, Cox, & McAdams, 2010). This study was designed to examine the relationships between personality, religion, and politics (a complete description of the study can be found in McAdams et al., 2008). These data provide an especially rich account of life stories and religious coping strategies of individuals located in four different Christian traditions. Participants were recruited from churches near Chicago, IL between 2005 and 2007. The sample was relatively diverse, including 73 women (60%) and 49 men (40%), spanning in age from 28 to 74 years, including 73% white ($n = 89$) and 27% African American ($n = 33$) participants.

All participants were interviewed for approximately two hours about their life story, their personal faith, and their politics. The interview format was based on McAdams’ (2006) life story interview, which prompts participants to elaborate on salient scenes from their personal past and expectations for the future. For example, participants were asked to tell the story of an overall high point in their life and then of an overall low point in their life. For each scene, interviewers systematically prompted participants for details such as who was there, where and when the scene took place, what they were thinking and feeling, how the scene resolved itself, and what meaning or importance the scene had in the context of their life overall. The interviews were digitally recorded and professionally transcribed. The transcripts
were then used as primary data for the narrative analyses. The study considered specific autobiographical scenes from the past, including eight overall life story scenes, three faith life scenes, and one political life scene (12 in total). The three low point scenes from the interview were used in analyses (overall low point scene, childhood low point scene, and faith low point scene), with the assumption that the low point scenes would contain the greatest and most consistent occurrence of coping discourse.

I developed a coding manual to identify 9 specific topics/themes in the narratives: The type of negative event that was the source of negativity in the low point scene (theme 1), three nonreligious coping themes drawn from recent factor analytic work to categorize and understand the sometimes inconsistent coping literature (themes 2-4), three coping themes that represent religious parallels to the nonreligious coping themes (themes 5-7), and positivity and negativity in the story endings (themes 8-9). See Appendix B for the complete coding manual.

After the interview, each participant was given a packet of “pencil and paper” self-report measures that required approximately two more hours to complete. Participants were paid $100 upon completion of the self-report packet. Among the large number of measures, the packet included the 54-item psychological well-being scale (PWB; Ryff, 1989), the 5-item satisfaction with life scale (SWLS; Diener et al., 1985), 18 sentence stems that comprise the Washington University sentence completion test of ego development (WUSCTED: a measure of psychosocial maturity; Hy & Loevinger, 1996), the 5-item Duke religion index (H. G. Koenig & Parkerson, 1997), the 10-item religious commitment inventory (RCI—10; Worthington et al., 2003), 15 items from the RCOPE religious coping measures (5 scales that measure adaptive and maladaptive ways that religion can be used to regain control; Pargament et al., 2000), the 240-item NEO-PI-R Five Factor Model personality assessment (Costa & McCrae,
1992), and a demographic form that prompted for religious affiliation. Now that I have
described my overall sample and methodology, a brief overview of each dissertation chapter.

Chapter Two: Let go and let God? Passive religious deferral coping mediates the
relationship between neuroticism and psychological well-being

The backdrop for Chapter Two is the finding that personality traits (especially
extraversion and neuroticism) are overwhelmingly the strongest predictors of well-being (Lucas
& Diener, 2008). Overall religiousness is also a consistent predictor of well-being. I used the
quantitative data described above to examine the relationships between personality traits,
dispositional religiousness, and survey measures of religious coping. I then used Structural
Equation Modeling (SEM) techniques to evaluate the extent to which religious coping
strategies are mediators that lead from personality traits toward—or away from—psychological
well-being and life satisfaction.

I found a mixture of results. Two maladaptive strategies (passive religious deferral
coping and pleading for direct intercession) correlated significantly with neuroticism. The two
adaptive strategies (collaborative religious coping and active religious surrender) were
significantly related to dispositional religiousness but not to FFM traits. Latent variable SEM
analyses with bootstrapping revealed that passive religious deferral coping partially mediated
the relationship between neuroticism and diminished psychological well-being. SEM analyses
also discovered a potential for collaborative religious coping to mediate the relationship
between dispositional religiousness and well-being.

One of the negative religious coping scales (passive religious deferral coping) partially
mediated the negative relationship between neuroticism and psychological well-being.
However, neither of the positive religious coping scales (i.e., collaborative religious coping and
active religious surrender coping) nor the other negative religious coping scale (pleading for direct intercession) explained any of the relationship between traits and psychological well-being or maturity. In fact, two of these scales (collaborative religious coping and active religious surrender) were not significantly correlated with the well-being measures at all, even at a trend level ($p < .1$). I conclude that passively deferring the responsibility for dealing with life’s difficulties is problematic for well-being, even if one’s religious belief system supports this coping strategy. Although for some it may seem unprepossessing to evaluate individuals’ religious belief systems, I suggest that belief systems can and ought to be evaluated based on their utility and outcomes for their adherents.

I also propose that attempts to create nuanced scales to address positive and negative religious coping behaviors and styles, still miss the mark in that the contents of these behaviors are not so easily labeled as positive or negative. Instead, the behaviors included in the scales can have a neutrality to them that is then imbued with meaning and valence primarily through context and the adherent’s motivation or intent behind their use. The meaning and expectations behind the use of certain strategies are as important to consider as are the strategies themselves when evaluating the outcomes of these coping strategies. This is one area that narrative and qualitative- or mixed-methods are especially useful.

Chapter Three: Religious and Nonreligious Coping in Life Narratives

For the analyses in Chapter Three, I systematically coded for religious and nonreligious forms of coping in autobiographical narratives of committed Christians. Nonreligious coping themes were derived from recent meta-analytic and factor-analytic work that organizes the wide variety of quantitative coping assessments into a simple three-factor structure, which includes two adaptive coping styles and one maladaptive style (Connor-Smith & Flachsbart, 2007). This
served to ground the present narrative project within the quantitative literature on stress and coping. I integrated this nonreligious coding scheme with Pargament’s (1997) theory on adaptive and maladaptive religious coping, to develop three religious coping styles that parallel the nonreligious ones. This new narrative coding scheme seemed to work well, as the coding confirmed the presence of all six coping styles, and the narrative codes hung together in sensible ways, especially the adaptive coping themes. A significant portion of this chapter is dedicated to illustrating how these themes appeared in the narratives.

I tested a number of hypotheses regarding the interrelationships of the narrative coping themes with survey measures of overall religiousness (Duke religion index (DRI, H. M. Koenig, Parkerson, & Meador, 1997) and the religious commitment inventory (RCI—10; Worthington et al., 2003)), quantitative measures of religious coping (5 scales that measure specifically religious coping strategies (RCOPE, Pargament et al., 2000), well-being (satisfaction with life scale (SWLS), Diener et al., 1985; psychological well-being scale (PWB), Ryff, 1989), and psychosocial maturity (i.e., Ego Development, Jane Loevinger, 1976).

Higher levels of overall religiousness were related to greater religious meaning-related coping in narratives, to more positive endings, and to fewer negative endings. That the adaptive narrative religious coping themes were positively related to overall religiousness buttressed the quantitative relationships found in Chapter Two, between the adaptive collaborative religious coping scale and overall religiousness. The narrative coping themes did not relate to well-being outcomes in expected ways, however. Adaptive religious coping themes were actually related to diminished well-being at a trend level, a topic explored in greater depth in Chapter Four, where clearer findings emerged as the full sample was divided into four theologically and historically distinct religious traditions.
Chapter Four: Exploration and Discovery of Patterns of Religious Coping in the Autobiographical Narratives of Christian Adults: The Moderating Influence of Religious Traditions

Finally, I evaluated the relationships among key study variables described in Chapter Three within each of four ethno-religiously delineated groups of U.S. Christians (categorized according to the religious traditions typology developed by Steensland et al., 2000): mainline Protestants, evangelical Protestants (both white and African American), black Protestants, and Catholics. Chapter Four, then, is a primarily qualitative follow-up to Chapter Three, a moderation analysis in which I describe and discuss respondents’ religious and coping discourse in their narratives and then highlight thematic and structural differences among members of the four Christian groups described above.

These exploratory analyses proceeded in three phases. One-way ANOVAS revealed differences in mean levels of key study variables (both from narratives and from survey measures). Next, the full sample correlation table in Chapter Three was replicated separately for each of the four RELTRAD groups, to evaluate relationships among key study variables from Chapter Three in each of the groups. Based on the correlational results, participants’ narratives were selected to express differences within and among the four groups in meaningful

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3 With respect to these four religious groupings (mainline Protestants, evangelical Protestants, black Protestants, and Catholics), it should be noted that nearly 70% of all U.S. adults consider themselves to be part of a denomination that is under the umbrella of one of the four groups (specifically, 16.4% mainline Protestant, 25.1% evangelical Protestant, 9.3% African American/black Protestant, and 17.5% non-Latino Catholic; Green, Kellstedt, Smidt, & Guth, 2007). As a result, studying the intersection of religion and coping in these groups presents an exceptional opportunity to understand more about how these meaning-making processes may work for the majority of people in the U.S., and for the great majority of religious people in particular. The current study is about how religious people use their religion, and seculars are excluded by design. Some religious people draw on religion as a resource in their autobiographical narrative, and others do not. This difference alone is important to investigate and understand.
ways. The end result was a first cut at describing the intersections of religiousness, narratives, coping, and well-being independently for each of the four groups.

The mainline Protestants seemed to put their faith into action without much religious fanfare, and certainly without religious language. They were the group most likely to put their faith into action by choosing to *Just Do the Right Thing*. The evangelical Protestants were the most *Integrated* group in terms of pairing religious and nonreligious coping in their narratives, and the more religious they were, the higher their level of ego development. Evangelical Protestants were also quite self-critical, recounting episodes of religious failure and questioning their religious commitment and their standing before God. In spite of often intense self-criticism and self-blame, they commonly pronounced the adversity they had endured as necessary to attaining the particular understanding and empathy they have today. The black Protestants were the group whose well-being was most tied to their religiousness, but it was overall religiousness (measured in terms of frequency of religious participation, as well as salience/intensity of religious belief and experience) and not their religious talk that predicted well-being. They needed to *Walk the Talk* to benefit from their religiousness. Finally, Catholics’ stories displayed a striking variation in emotional maturity among participants’ abilities to create meaningful *Mixtures of Loss and Gain* that came through their tragedies. Those Catholics who told more stories with active coping themes (both religious and nonreligious forms) had lower well-being scores on average. The stories of those with the lowest well-being scores often described negative events from childhood that permeated their lives to the present day; whereas, those with high well-being grieved deep losses, left them primarily in the past, and then brought meaningful gain out of those ashes of adversity.
This chapter also addressed two puzzles that emerged from Chapter Three’s results: (1) three of the four adaptive/engagement coping themes were negatively related to well-being outcomes, when they were expected to evidence positive adaptation to adversity, and (2) narrative religious meaning-related coping was positively related to the maladaptive passive religious deferral coping RCOPE scale, again a case of an adaptive narrative element that was associated with a maladaptive religious coping style. The Catholics in the sample fueled the first puzzle, and the second puzzle was unrelated to religious tradition and remained unsolved.

The simple take-home message from this exploration is that members of these four large religious traditions use their faith in psychologically distinct ways, at least in terms of narrating their coping processes. And the elements of religion and coping that are most important for well-being vary among the four groups. The implication: psychology of religion research can and ought to test the moderating effects of religious tradition in their analyses as a matter of course, to increase both accuracy and usefulness of the research. More broadly, this work states a case for investigating whether and how psychological and developmental processes might generally vary by ethno-historical social groupings.

**Chapter Five: Conclusion**

Finally, in the conclusion of the dissertation, I summarize and synthesize my findings across all three substantive chapters, discuss the implications for both individual adherents and for faith communities, and I identify natural next steps for future research.
Chapter Two: Let go and let God? Passive religious deferral coping mediates the relationship between neuroticism and psychological well-being

Personality traits, especially extraversion and neuroticism, are the strongest predictors of well-being, beating out the influence of situational or demographic factors (Lucas & Diener, 2008). The majority of empirical studies show that overall religiousness is also positively related to both physical and emotional/psychological health and well-being (e.g., Dillon & Wink, 2007; Donahue & Benson, 1995; Ellison, 1991; Seybold & Hill, 2001; Witter, Stock, Okun, & Haring, 1985). One important psychological function of personal religiousness (and perhaps one of the ways that it translates into elevated well-being) is to provide resources to people as they cope with significant challenge or tragedy, as well as for navigating everyday stressors (Pargament, 1997.) Nearly 60% of people report that they “find strength and comfort” in their religion much of the time (i.e., “most days” or even “many times each day”) (1998 General Social Survey, Fetzer Institute/National Institute on Aging Working Group, 2003/1999). By contrast, fewer than 14% of people report that they “never, or almost never” find this support in their religion. In addition, more than three quarters (79%) of U.S. adults who attend religious services expect that people in their congregations would help them substantially if they were ill, and even more (84%) expect to receive comfort when faced with a problem or a difficult situation.

\(^4\) I define “religion” in its broadest sense: Religion encompasses people’s evolving beliefs, behaviors, and affiliations that are related to both public and private aspects of their search for meaning, in ways related to the sacred. (I borrow from Pargament’s (1997) definition of religion, “a search for significance in ways related to the sacred” (p.32).) Religiousness, then, is simply an individual’s personal interpretation and expression of his or her religion, and religious coping is one aspect of religiousness put into practice. Further, this conception of religion and religiousness is comprehensive enough to incorporate a rich and evolving spirituality within its scope as well (Hill et al., 2000). In this paper, I also separate out the dispositional aspect of religiousness, that is, the generally stable and enduring presence of religiousness that is different from its particular expression.
Recent research, however, demonstrates a complex picture of religion as both help and hindrance as people cope with adversity and make sense of personal tragedy (Pargament, 1997, 2002). That is, the specific ways that people draw on their religion to cope with adversity can be both adaptive (i.e., positively related to healthy emotional/psychological and physical outcomes) and maladaptive (negatively related to such outcomes) (e.g., Ano & Vasconcelles, 2005; Maltby & Day, 2004; Pargament, Koenig, Tarakeshwar, & Hahn, 2004). The current project evaluated the power of specific religious coping strategies to mediate links of both personality traits and dispositional religiousness, with well-being. A second aim was to test hypothesized relationships among Five Factor Model traits with five adaptive and maladaptive religious coping strategies to provide the first ever report of these associations. Although the relationships between personality traits and nonreligious coping are well-researched, the relationships between personality traits and religious coping were entirely unknown previous to the these analyses. Because these questions have not been examined before, I chose to use data from a highly religious (Christian) sample. This presents the best chance to discover whether and how religious coping both relates to dispositional traits and operates as a psychological mechanism for maintaining and elevating (or undercutting and diminishing) well-being.

The well-being—disposition connection

Studies generally find that higher income, especially the meeting of basic needs (Diener, Ng, Harter, & Arora, 2010), goal attainment (Robert A. Emmons, 1986), social support/connectedness (Diener et al., 2010; Gallagher & Vella-Brodrick, 2008; Lee, Dean, & Jung, 2008), and good physical health (Margolis & Myrskylä, 2013), all promote well-being. The five factor model (FFM) personality traits, however—especially neuroticism and extraversion—are the strongest and most consistent predictors of well-being in psychological
studies, stronger than situational or demographic factors (Lucas & Diener, 2008). The FFM actually explains a significant portion of variance in a variety of important life outcomes, with an explanatory power on par with that of socioeconomic status and cognitive ability (Roberts, Kuncel, Shiner, Caspi, & Goldberg, 2007).

Regarding well-being in particular, a meta-analysis found very strong relationships between extraversion and the positive emotion aspect of well-being; neuroticism and the negative emotion aspect of well-being; agreeableness and happiness; and conscientiousness with negative affect (-) and with overall quality of life (Steel, Schmidt, & Shultz, 2008). Consistent with these findings, extraversion and neuroticism are the strongest predictors of satisfaction with life scale scores, a cognitive appraisal of how satisfied one is with one’s life (one of two well-being indicators used in the current study, Diener et al., 1985; Diener & Lucas, 1999; Schimmack, Oishi, Furr, & Funder, 2004).

Research that employs the psychological well-being scale (the second well-being indicator used in this study, Ryff & Keyes, 1995) usually finds that all five traits—extraversion, neuroticism, agreeableness, conscientiousness, and openness to experience—relate significantly (neuroticism negatively) with multiple PWB subscales (Joshanloo & Nosratabadi, 2009; Schmutte & Ryff, 1997; Wood, Joseph, & Maltby, 2009). Again, extraversion and neuroticism seem to be the strongest predictors (Augusto Landa, Martos, & López-Zafra, 2010; Schmutte & Ryff, 1997).

Past research also reveals a link between dispositional religiousness and well-being. Systematic evidence for this association has been evident since a 1985 meta-analysis concluded that overall religiousness (religious attendance, activities and salience) was positively associated with subjective well-being (Witter et al.). A more recent qualitative review of this
literature found positive associations between religiousness and both well-being and overall psychological functioning (Gartner, 1996). Finally, a meta-analytic review of 147 independent effect sizes found that overall religiousness (measured in a wide variety of ways) was associated with lower rates of depressive symptoms (random effects weighted average effect size across all 147 studies: \( r = -0.094 \); T. B. Smith, McCullough, & Poll, 2003). Although generally consistent, these effects are modest and do not answer the question of what aspects or particular expressions of one’s religiousness lead to elevated well-being and which aspects or expressions might instead compromise well-being.

**Potential Mechanisms: Religious Coping**

Coping strategies are prime candidates for explaining these relationships (Bolger & Zuckerman, 1995). Since the current objective is to get a window into the intersection of religion and traits as they affect well-being, it seems reasonable to examine specifically religious modes of coping. Some might argue that religion by itself is not salient enough for most people, that even highly religious people are generally not thinking about their religiousness as they go about their daily affairs. Religiousness is an important resource that becomes more salient, however, when life brings opportunities to cope with hardship, loss, and adversity (Pargament, 1997).

Most coping research tends to place various forms of religious coping into a singular and generally positive catch-all category and operationalizes religious coping as having faith in God, praying about the stressor, or participating in religious services or activities (Connor-Smith & Flachsbart, 2007; Pargament et al., 2000). In this conception, there is not much difference between dispositional religiousness and religious coping. Indeed, a meta-analysis assessing the relationships of personality traits with coping (Connor-Smith & Flachsbart, 2007)
yielded identical results as meta-analyses that assessed the relationships of personality traits with dispositions of religiousness. Both found modest positive relationships with conscientiousness and agreeableness. Thus, the picture of religion’s relationship to coping and well-being has often been muted and oversimplified.

There is now an instrument that assesses specifically religious coping strategies, the RCOPE (Pargament, Feuille, & Burdzy, 2011; Pargament et al., 2000). Pargament and colleagues (2000) developed a battery of 21 self-report scales (the full RCOPE measure) in order to integrate five key religious functions (meaning, control, spiritual comfort, spiritual intimacy, and life transformation) with the extant literature on nonreligious/secular coping and capture both adaptive and maladaptive ways that people draw on religious resources to cope with adversity. A first test of the predictive validity of these scales yielded positive results. A two-year longitudinal study of 268 medically ill, elderly, hospitalized patients found that purportedly adaptive means of religious coping (e.g., RCOPE scales that measure things like seeking comfort from God or using one’s religion to positively reframe the stressor) were generally related to improvements in psychological, spiritual, and physical health (Pargament et al., 2004). Similarly, purportedly maladaptive forms of religious coping (e.g., RCOPE scales that measure things like viewing the stressor in terms of punishment from God or dissatisfaction with clergy or fellow congregants) were generally predictive of decrements in psychological, spiritual, and physical health. In a subsequent meta-analysis of religious coping behaviors and psychological health (Ano & Vasconcelles, 2005), researchers sorted specific religious coping methods from 49 different studies into positive and negative religious coping, based on Pargament’s definitions (Pargament, 1997; Pargament et al., 2000). The results supported Pargament’s religious coping categorizations, that religious coping strategies
hypothesized to be adaptive were generally associated with positive well-being, and religious coping strategies that were hypothesized to be maladaptive were in fact significantly predictive of poor well-being (Ano & Vasconcelles, 2005).

The current project included five of the 21 RCOPE scales, those assessing use of religiousness to gain control. There were two adaptive scales (collaborative religious coping and active religious surrender: should be related to high well-being scores), two maladaptive scales (passive religious deferral coping and pleading for direct intercession: should be related to low well-being scores), and one scale that was more or less neutral (self-directing religious coping).

A sizeable meta-analysis (including 2,653 effect sizes) that related adaptive and maladaptive nonreligious coping to personality traits (Connor-Smith & Flachsbart, 2007) formed the basis for developing hypotheses about the relationships between the different approaches to religious coping and dispositional personality traits. The study concluded that maladaptive coping was significantly related to neuroticism (+), agreeableness (-), and

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5 These 16 additional RCOPE scales were not included in the dataset used here. Theoretically, however, these five scales regarding use of religion to gain control are an important place to begin. Pargament (1997) asserts that religion and psychology are unified in purpose in that they are both “concerned about suffering and its amelioration” (p.7). Where they diverge is in their understanding of the role and effectiveness of human agency and control in coping with adversity. “American psychology is a psychology of [gaining] personal control” (p.8). In contrast, Pargament argues that “an appreciation for the limits of human agency are at the heart of religion” (p.8). Taken together, “the psychology of religion and coping…. bridges a deep psychological tradition of helping people take control of what they can in times of stress with a rich religious tradition of helping people accept their limitations and look beyond themselves for assistance in troubling times” (p.9). Thus, although religion may be drawn upon for many different purposes during times of adversity, the heart of religious coping is concerned with the role and effectiveness of the strategies used to attempt to gain control in the face of adversity.

6 The meta-analysis labeled adaptive and maladaptive coping as engagement and disengagement coping, respectively. The nonreligious coping categories they identified were derived from confirmatory factor analyses of many different coping scales (e.g., Aldridge & Roesch, 2008; Compas et al., 2006; Connor-Smith, Compas, Wadsworth, Thomsen, & Saltzman, 2000) and so have particular meanings. I refrain from adopting their terminology without more supportive evidence for doing so, but it does seem accurate to refer to engagement coping as adaptive and disengagement coping as maladaptive. In addition, the meta-analysis divided the engagement category into two sub-categories (primary and secondary control engagement coping). The relationships between these two subcategories and dispositional traits was very similar, so I recombined them into a single, adaptive category.
conscientiousness (-). Fleshed out a little more, maladaptive coping was generally related to poor psychological adjustment (high neuroticism), distrusting and non-altruistic relations (low agreeableness), and overall lack of organization, planning, and reliability (low conscientiousness). *Passive religious deferral* coping captures a passivity in avoiding the stressor, and *pleading for direct intercession* captures an active but anxious wishful thinking. Wishful thinking and avoidance strategies are both manifestations of low conscientiousness. They tend to both stem from and create vulnerability to stress and anxiety (high neuroticism), and there is little concern in these strategies for the welfare of others (low agreeableness).

Based on these results, these two maladaptive coping strategies were hypothesized to relate similarly to neuroticism (+), agreeableness (-), and conscientiousness (-).

In the same meta-analysis, adaptive coping related significantly and positively to extraversion, openness to experience, and conscientiousness. *Collaborative religious coping* involves actively working in partnership with God to deal with a stressor. Such coping efforts (1) engage God to work together to solve or make sense of a problem (the social engagement aspect of extraversion), (2) are inviting of an as yet unknown experience with God (openness to experience), and (3) include thoughtful planning and intentional action (conscientiousness). Active religious surrender coping involves doing everything in one’s power to cope with a stressor and then relinquishing control of everything else to God. This strategy begins with intentional efforts to solve the problem, doing everything within one’s power (conscientiousness) and then invites warm, positive connection with God (extraversion) in placing oneself or the problem in the unknown of being “in God’s hands” (openness to experience).
Finally, I expected that greater overall religiousness would be positively related to both the adaptive and maladaptive strategies, that more dispositionally religious people would use more of all forms of religious coping. I expected self-directing coping, a sort of coping that excludes God, to be negatively related to overall religiousness. (See Table 1 in section 1.3 for a synthesis and visual representation of these hypotheses.)

**Summary of hypotheses and proposed mediation model**

As stated in the introduction, one aim of this paper is to contribute an initial report of relationships between religious coping and FFM traits. Based on correlations in the literature between nonreligious coping and the FFM, as well as the discussion in section 1.2, Table 1 displays the hypothesized correlational pattern between the FFM traits and five RCOPE scales about gaining control.

Table 2.1. Hypothesized correlations between dispositions (FFM and religiousness) and RCOPE scales

<table>
<thead>
<tr>
<th>Traits/Dispositions</th>
<th>Collaborative religious coping</th>
<th>Active religious surrender</th>
<th>Passive religious deferral</th>
<th>Pleading for direct intercession</th>
<th>Self-directing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neuroticism</td>
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<td></td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Extraversion</td>
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<td>Openness</td>
<td>+</td>
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<td>Agreeableness</td>
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</tr>
<tr>
<td>Conscientiousness</td>
<td>+</td>
<td>+</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Religiousness</td>
<td>+</td>
<td>+</td>
<td>+</td>
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<td>-</td>
</tr>
</tbody>
</table>
If these hypothesized trait–RCOPE relationships find support, it is then possible to examine potential mediation. Religious coping might function as one conduit through which dispositions get activated and then expressed into well-being outcomes. Figure 1 shows the overall, hypothetical mediation model. I tested the extent to which adaptive RCOPE scales mediated the relationship between extraversion and high well-being and maladaptive RCOPE scales mediated the relationship between neuroticism and low well-being (controlling for variance related to the other traits and related background characteristics). Including dispositional religiousness in all models both controlled for its shared variance with religious coping and well-being and tested whether or not religious coping also mediated the relationship between dispositional religiousness and well-being. This is a more complicated case because overall religiousness could potentially have both positive and negative effects on well-being, through adaptive and maladaptive coping, respectively.

Unlike personality traits, coping strategies may change significantly over the life course. They are a more malleable developmental outcome. People may learn increasingly adaptive coping strategies as they gain life experience (e.g., Carrico et al., 2006). They can also engage in efforts to intentionally improve their coping (e.g., engaging in individual therapy or spiritual disciplines), and these efforts often help people increase their use of adaptive coping strategies and decrease their use of maladaptive ones. As a result, support for these mediation models would implicate religious coping strategies as potentially important pathways and perhaps even intervention points to enhance the benefits of some traits (especially extroversion and overall religiousness), and ameliorate the potentially detrimental effects of others (primarily neuroticism).
Figure 2.1: Hypothetical model of a single religious coping strategy mediating the relationship between dispositions and well-being, correcting for measurement error and controlling for background characteristics. Note: All exogenous variables were allowed to covary. Additional covariance indicators were omitted in the drawing to make it more readable.

Method

Participants and Procedure

These analyses drew on intensive case study data collected from 122 U.S. Christians who were regular church attenders. Participants were recruited from Christian churches (Protestant and Catholic, from both predominantly European American and predominantly African American congregations) near Chicago, IL between 2005 and 2007. In order to qualify
for the study, participants had to be active members of their congregation, have voted in the 2004 U.S. Presidential election (due to the study’s other focus on political engagement), and be willing to both fill out a lengthy packet of self-report questionnaires and discuss their personal faith and political views in great detail (a complete description of the study can be found in McAdams et al., 2008).

The participants in this analysis included 73 women (60%) and 49 men (40%), ranging in age from 28 to 74 years ($M = 49, SD = 8.4$). Regarding race/ethnicity, 73% were European American ($n = 89$), 27% were African American ($n = 33$). Although there was a wide range of income and education levels, the sample was rather privileged: 44% ($n = 54$) had household earnings of $100,000 or more annually, and 85% ($n = 104$) had attained an undergraduate degree (55%, $n = 67$, had engaged in some form of graduate-level training). These background characteristics were included in analyses due to their presumed relationships with well-being, religiousness, and/or personality traits.

**Outcome Measures**

See Table 1 for descriptive statistics for all study variables, including range, mean, standard deviation and Chronbach’s alpha.

**Satisfaction with life scale (SWLS)**

The satisfaction with life scale (SWLS; Diener et al., 1985) is a five-item, cognitive (self-report) assessment of overall life satisfaction. A sample item reads, “So far I have gotten the important things I want in life.” Response choices for each item are “strongly disagree” (1) to “strongly agree” (7), resulting in a possible range of 5 to 35.

**Psychological well-being scale (PWB)**
The psychological well-being scale (PWBS; Ryff, 1989) is a theoretically-driven well-being scale, proposed to operationalize six aspects of psychological well-being: Self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth. A 54-item version of the scale was used (9 items per subscale, 28 reversed-scored items). Response choices for each item were “strongly disagree” (1) to “strongly agree” (6), resulting in a possible range of total scores from 54 to 324. Sample items include: “When I look at the story of my life, I am pleased with how things have turned out” (self-acceptance); “Most people see me as loving and affectionate” (positive relations with others); “My decisions are not usually influenced by what everyone else is doing” (autonomy); “In general I feel that I am in charge of the situation in which I live” (environmental mastery); “My daily activities often seem trivial and unimportant to me” (purpose in life, reversed); and “I am not interested in activities that will expand my horizons” (personal growth, reversed).

Although the PWB was designed to assess six different aspects of psychological well-being, past research has shown that the subscales are highly intercorrelated and that the total PWB score provides a suitable indicator of overall psychological well-being (Ryff, 1989; Ryff & Keyes, 1995).

**Five religious coping (RCOPE) scales to gain control**

The full RCOPE religious coping measure includes 21 scales that represent five theoretically-derived domains of religious coping: gaining control, finding meaning, gaining comfort and closeness to God, gaining intimacy with others and closeness to God, and achieving life transformation (Pargament et al., 2000). The data used in the current study included five RCOPE scales that assess using religion to gain control: collaborative religious coping, active religious surrender, passive religious deferral, pleading for direct intercession,
and self-directing religious coping. See Footnote 2 in section 1.2 for an explanation of why only these five scales. The questionnaire asks participants to endorse how often they tend to use particular strategies to cope with negative events in their life and not to consider the effectiveness of the strategy. Although it can be used to assess coping specific to a particular traumatic or difficult event, in this study, it was used to assess “the ways you tend to cope with negative events in your life;” (See Appendix A for questionnaire instructions and items for the five scales.) Each scale has three items, with response choices from “Not at all” (1) to “A great deal” (4), creating a possible range of 3 to 12. No items require reverse-scoring.

**Five Factor Model Personality Traits**

Five personality traits were measured using Form S (self-report form) of the 240-item NEO-PI-R (Costa & McCrae, 1992). The NEO-PI-R measures individual personality along five dimensions of the Five Factor Model: Neuroticism (characterized by impulsivity, emotional vulnerability, and a tendency to experience negative emotions, including anxiety, depression, hostile anger), extraversion (characterized by emotional warmth, assertiveness, and a tendency to experience positive emotions and seek excitement.), openness to experience (characterized by imaginativeness, an openness to ideas and values, a sensitivity to aesthetics, and sometimes labeled “Intellect”), agreeableness (characterized by a generally prosocial disposition, including kindness, trust, modesty, and altruism.), and conscientiousness (characterized by striving for high achievement, self-discipline, order, and dutifulness). Item response choices follow a five-point Likert-type scale, from strongly disagree (0) to strongly agree (4). Forty-eight items per trait were summed to create the five trait scores. The possible range for each trait was 0 to 192.
Duke Religion Index (DRI)

The Duke religion index (DRI, H. M. Koenig et al., 1997) is a 5-item scale that was designed as a brief assessment of multiple aspects of overall or dispositional religiousness, intended to improve upon single-item measures often used in mental health research settings.

Two items assess frequency of religious participation (“How often do you attend church or other religious meetings?” and “How often do you engage in private religious activities, such as prayer, meditation, or Bible study?”). Response choices for these two items range from “More than once/wk” (1) to “Never” (6). Three additional items assess religious belief and experience (e.g., “In my life, I experience the presence of the Divine (i.e., God)”). Response choices for these items range from “Definitely true of me” (1) to “Definitely not true” (5). Summing all DRI items creates a possible range of 5 to 27. All items are reverse-scored, so that higher scores indicate higher levels of overall religiousness.

Data Analysis

Correlations were run in SPSS 20 to test the relationships of the RCOPE scales with well-being, religiousness, personality traits, and relevant background characteristics. The partial mediation hypothesis depicted in Figure 1, was tested using structural equation modeling (SEM) in AMOS 19 (Arbuckle, 2007). SEM in AMOS was chosen for three reasons: (1) SEM’s ability to correct for measurement error through latent variable modeling and thereby derive more accurate estimates than regression; and AMOS’s bootstrapping option that (2) creates more accurate standard errors than ordinary least squares regression in small samples (Diaconis & Efron, 1983) and (3) can test the significance of both the direct (nonmediated) and indirect (mediated) effects of predictors on well-being, while also controlling for the influence of
relevant background characteristics (Arbuckle, 2010). If the indirect effect is significant, that indicates support for the mediation hypothesis.

Some item responses were missing from several participants’ religious coping, well-being, and personality trait questionnaires. Upon visual inspection of original paper response forms, this was most likely due to random oversight of individual items. Participants who missed entire measures relevant to the current analyses were dropped before deriving the 122-member participant pool for this analysis. To correct for missing data, item values were imputed using the expectation maximization (EM) algorithm in SPSS 19, which replaces missing values with iterative maximum likelihood (ML) estimations (Schafer & Graham, 2002). Missing value analyses confirmed the probable randomness of missing items. All scale descriptive statistics (see Table 2) and subsequent analyses were calculated after missing value imputation.

Results

Correlations of demographic characteristics with key study variables

Table 2 displays zero-order correlations and descriptive statistics for all study variables. Relations among demographic characteristics and religious coping styles took the following form: Individuals with lower household income endorsed more religious coping in general, both adaptive and maladaptive. Those with lower educational attainment endorsed significantly more passive religious deferral coping (maladaptive). The same was generally true for African Americans, as compared with European Americans. African American participants also endorsed the pleading for direct intercession maladaptive coping style to a greater degree than their European American counterparts.
Table 2.2

Correlations and Descriptive Statistics for All Study Variables

<table>
<thead>
<tr>
<th>N = 122</th>
<th>Well-being</th>
<th>RCOPE</th>
<th>FFM</th>
<th>R</th>
<th>Demographics</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. PWB</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. SWLS</td>
<td>.55**</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. RCOPE: Collab.</td>
<td>.10 .03</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. RCOPE: Active</td>
<td>.06 .03</td>
<td>.51***</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. RCOPE: Passive</td>
<td>-.30** -.16†</td>
<td>-.01 .04</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. RCOPE: Pleading</td>
<td>-.16† -.11</td>
<td>.16† .15† .38***</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. RCOPE: Self</td>
<td>-.05 -.04</td>
<td>-.51*** -.25** .12 -.06</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. N</td>
<td>-.55*** -.32***</td>
<td>-.01 .00 .18 .27** .01</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. E</td>
<td>.49*** .32***</td>
<td>-.04 .01 -.16† -.04 .07</td>
<td>-.21†</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. O</td>
<td>.23** .04</td>
<td>-.09 -.08 -.20† -.17† .08</td>
<td>.04 .40***</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. A</td>
<td>.26** .22*</td>
<td>.15† .05 .04 -.15 -.18†</td>
<td>-.40*** .00 .14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. C</td>
<td>.45*** .18*</td>
<td>.03 -.01 -.05 -.17† -.05</td>
<td>-.43*** .07 .03 .18*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Religiousness</td>
<td>-.03 -.13</td>
<td>.54*** .21† .10 .16† .42***</td>
<td>.06 .02 -.08 .15† -.03</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Gender†</td>
<td>-.02 -.04</td>
<td>-.02 -.17† -.12 -.16† .08</td>
<td>-.7 .14 -.01 -.21† -.02</td>
<td>-.04</td>
<td></td>
</tr>
<tr>
<td>15. Age</td>
<td>.23* .11</td>
<td>-.01 -.02 -.06 -.01 -.01</td>
<td>-.30** -.07 -.10 .18† .16†</td>
<td>-.10</td>
<td>-.05</td>
</tr>
<tr>
<td>Attribute</td>
<td>Coefficients</td>
<td>M</td>
<td>Range</td>
<td>SD</td>
<td>Alpha</td>
</tr>
<tr>
<td>-----------</td>
<td>--------------</td>
<td>---</td>
<td>-------</td>
<td>----</td>
<td>-------</td>
</tr>
<tr>
<td>16. Education^2</td>
<td>.03 .12</td>
<td>.11 -.04 -.34*** -.12 .04</td>
<td>-.04 .11 .27** .11 .09</td>
<td>-.02</td>
<td>.22^  .06</td>
</tr>
<tr>
<td>17. Income^2</td>
<td>.26** .35*** -.19^ -.17† -.26** -.22^ .18†</td>
<td>-.16† .24** .28** .01 .09</td>
<td>-.25**</td>
<td>.14 .19^ .43***</td>
<td></td>
</tr>
<tr>
<td>18. Race^1</td>
<td>-.03 -.34*** .14 .14 .32*** .27** -.10</td>
<td>-.02 .02 -.18† -.09 -.03</td>
<td>.24**</td>
<td>-.12 -.01 -.47*** -.52***</td>
<td></td>
</tr>
<tr>
<td>M</td>
<td>257.49 24.60</td>
<td>9.04 8.79 3.69 6.26 4.80</td>
<td>78.5 118.5 120.0 131.4 123.2</td>
<td>23.8</td>
<td>.40 .49 .0 3.4 .4 .27</td>
</tr>
<tr>
<td>Range</td>
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<td>3-12 3-12 3-9 3-12 3-12</td>
<td>10-123 67-171 76-167 92-178 68-174</td>
<td>10-27</td>
<td>0-1 28-74 1-4 1-6 0-1</td>
</tr>
<tr>
<td>SD</td>
<td>23.49 6.90</td>
<td>2.16 2.27 1.37 2.10 1.80</td>
<td>20.66 17.42 16.75 13.85 19.33</td>
<td>3.17</td>
<td>- 8.37 .78 4.37 -</td>
</tr>
<tr>
<td>Alpha</td>
<td>.89 .89</td>
<td>.76 .83 .82 .73 .70</td>
<td>.92 .87 .87 .84 .91</td>
<td>.65</td>
<td>- - - - -</td>
</tr>
</tbody>
</table>

1. Gender and race are dummy (0/1) variables. Female = 0 and male = 1; European American = 0 and African American = 1.

2. Education and income are ordered categories. For education, 1 = “High School”, 2 = “Some College”, 3 = “College (B.A., B.S., etc.)”, 4 = “Graduate Work (Post College)”. For income, 1 = “Under $20,000”, 2 = “$20,000 - $40,000”, 3 = “$40,000 - $60,000”, 4 = “$60,000 - $80,000”, 5 = “$80,000 - $100,000”, 6 = “Over $100,000”

Note: † p < .10, * p < .05, ** p < .
Correlations of key predictors with well-being outcomes

FFM personality traits were related to well-being outcomes in expected ways (neuroticism negatively and the other four traits positively). Contrary to expectations, overall religiousness was not significantly related to either well-being indicator. This was likely due to an extremely truncated range of overall dispositional religiousness in this highly religious sample. Consistent with the literature, overall religiousness was still marginally correlated with agreeableness, however (cf. Saroglou, 2002, 2010).

The correlations among religious coping styles and well-being outcomes were in anticipated directions. However, only the correlation between passive religious deferral coping and diminished PWB reached traditional significance levels (PWB, r = -.30, p < .01; SWLS, r = -.16, p < .10). Overall, the correlations of PWB with the five religious coping strategies were of greater magnitude than those of SWLS with those scales, indicating greater correspondence between religious coping and psychological aspects (rather than cognitive assessment) of well-being.

Correlations between dispositions and RCOPE scales

Table 1 in section 1.3 contains the hypothesized relationships between dispositions and RCOPE scales, and Table 2 shows the direction and magnitude of the actual relationships found in these data. Consistent with hypotheses, correlations showed that overall religiousness was positively related to the two adaptive religious coping scales (collaborative religious coping and active religious surrender) and negatively related to self-directing religious coping (the scale that assesses the degree to which an individual excludes God from their coping). Contrary to hypotheses, overall religiousness was unrelated to the maladaptive passive religious deferral and pleading for direct intercession religious coping scales.
As predicted, neuroticism was significantly and positively correlated with two of the maladaptive religious coping styles: *passive religious deferral coping* ($r = .18, p < .05$) and *pleading for direct intercession* ($r = .27, p < .01$). Unexpectedly, openness to experience was negatively correlated with *passive religious deferral coping* ($r = -.20, p < .05$). Six other trait—religious coping correlations reached trend level significance, three of which were predicted, and the remainder of the trait—religious coping correlations were not significant.

**Testing disposition—RCOPE—well-being mediation models**

The second set of analyses tested the hypothesis that each of the five religious coping scales partially mediate relationships between dispositions (especially neuroticism, extraversion, and overall religiousness) and well-being outcomes (see Figure 1 for the basic SEM model). The model also partialled out the variance related to basic demographic characteristics and adjusted for measurement error. Because the original hypotheses included testing the potential of all five of the RCOPE scales to mediate trait—well-being connections for both PWB and SWLS, the model was run ten times. Results are only presented for models with significant indirect effects.

**Passive religious coping mediates the connection between neuroticism and low psychological well-being**

Based on the correlations reported in sections 3.1 – 3.3, *passive religious deferral coping* was the only RCOPE scale expected to function as a mediator of the neuroticism—well-being connection. Partial mediation was indeed supported: *Passive religious deferral coping* partially mediated the neuroticism—PWB relationship (see Table 3 and Figure 2). This model
Table 2.3
Parameter Estimates for Direct and Indirect Effects of Neuroticism and Controls on Passive Religious Deferral Coping, Psychological Well-being, and Satisfaction with Life

<table>
<thead>
<tr>
<th></th>
<th>Passive religious deferral coping mediator</th>
<th>Psychological well-being (PWB) outcome/model #1</th>
<th>Satisfaction with life (SWLS) outcome/model #2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Direct Effects:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Passive religious deferral coping ➔</td>
<td>-- --</td>
<td>-23.61 (7.39)</td>
<td>-0.88 (2.7)</td>
</tr>
<tr>
<td>Neuroticism ➔</td>
<td>.01 (.00)</td>
<td>-0.23 (.14)</td>
<td>-0.04</td>
</tr>
<tr>
<td>Extraversion ➔</td>
<td>.00 (.00)</td>
<td>.61 (.13)</td>
<td>.20 (.05)</td>
</tr>
<tr>
<td>Openness ➔</td>
<td>-.00 (.00)</td>
<td>.01 (.14)</td>
<td>-.13 (.05)</td>
</tr>
<tr>
<td>Agreeableness ➔</td>
<td>.01 (.00)</td>
<td>.24 (.19)</td>
<td>-.13 (.07)</td>
</tr>
<tr>
<td>Conscientiousness ➔</td>
<td>.00 (.00)</td>
<td>.39 (.09)</td>
<td>.03 (.03)</td>
</tr>
<tr>
<td>Overall religiousness ➔</td>
<td>-.01 (.01)</td>
<td>.07 (.74)</td>
<td>-.23 (.27)</td>
</tr>
<tr>
<td>Male ➔</td>
<td>.03 (.06)</td>
<td>-2.64 (3.25)</td>
<td>-1.30 (1.20)</td>
</tr>
<tr>
<td>Age ➔</td>
<td>.00 (.00)</td>
<td>.30 (.20)</td>
<td>.07 (.07)</td>
</tr>
<tr>
<td>Education ➔</td>
<td>-.06 (.04)</td>
<td>-5.08 (2.38)</td>
<td>-.73 (.88)</td>
</tr>
<tr>
<td>Income ➔</td>
<td>-.02 (.02)</td>
<td>.81 (1.14)</td>
<td>.57 (.42)</td>
</tr>
<tr>
<td>African American ➔</td>
<td>.15 (.08)</td>
<td>1.69 (4.62)</td>
<td>-.03</td>
</tr>
<tr>
<td><strong>Indirect Effects:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neuroticism ➔ Passive Religious Deferral coping ➔</td>
<td>-0.135 (.108)</td>
<td>-0.116</td>
<td>none</td>
</tr>
</tbody>
</table>

\(^2\) Nevertheless, all 10 models were still run.
1. The natural log of Passive Religious Deferral coping was used to correct for positive skew.

2. L95% and U95% are the lower and upper bootstrap percentile confidence interval, based on 1000 bootstrap samples.

Note. This table shows the results for two separate models: one predicting PWB and one predicting SWLS. Except for the outcome variable, all other variables are identical. Path estimates for direct paths into Passive Religious Deferral coping are identical for both models, as is model fit ($\chi^2 = 23.09$, $df = 24$, $p = .52$; $CFI = 1.00$; $RMSEA = .00$).

$N=122$.

† $p \leq .10$, * $p \leq .05$, ** $p \leq .01$, *** $p \leq .00$
fit the data quite well $\chi^2(24) = 23.09, p = .52, \text{RMSEA} = .00, \text{CFI} = 1.00^8$. Table 3 shows all path estimates and other relevant statistics.

Of the dispositions and demographic characteristics, neuroticism, agreeableness, and African American race were significantly (positively) related to passive religious deferral coping scores, and passive religious deferral coping was strongly and negatively related to PWB, all net of the influence of the other predictors/covariates. I used bootstrapping in AMOS to produce a test of the significance of the indirect effects (including a 95% confidence interval) of each of these three characteristics (neuroticism, agreeableness, and African American race) on PWB, through passive religious deferral coping. Passive religious deferral coping partially mediated the relationship between neuroticism and PWB at traditional significance levels ($p = .03$, see Figure 2). The remaining direct effect of neuroticism on PWB then reduced to marginal significance but not to zero, indicating partial rather than full mediation. The two other indirect paths were only marginally significant (passive religious deferral coping partially mediated the relationships between both the FFM trait of agreeableness ($b = -.15, \beta = -.09, p = .07$) and of African American race ($b = -3.64, \beta = -.07, p = .09$) with PWB). The model did not hold with SWLS as the outcome. The direct effect of passive religious deferral coping on SWLS was not significant, and based on the $p$-value and size of the coefficient, this was a real difference and not simply due to small sample size and resulting lack of statistical power.

---

8 In SEM, smaller sample sizes render a $\chi^2$ test less sensitive to model fitness than in larger samples (Bentler, 2007). The root mean square error of approximation (RMSEA) and the comparative fit index (CFI) are now widely used fit indices and therefore are reported here with $\chi^2$. A RMSEA of .05 or less (must not exceed .08 to be considered an acceptable fit) and a CFI of .95 or higher indicate good model fit to the data (Hu & Bentler, 1999; Kline, 2005).
Figure 2.2: Actual model of passive religious deferral coping partially mediating the relationship between neuroticism and psychological well-being. Note: Path estimates are Beta coefficients, and only those coefficients directly related to mediation were duplicated here. All coefficients are reported in Table 3, however.

Collaborative religious coping mediates the connection between religiousness and elevated well-being

An unusual (although not entirely unanticipated) result emerged while testing the potential of collaborative religious coping to mediate the connection between dispositions and well-being (see Table 4). Although this RCOPE scale did not mediate any of the FFM—well-being relationships, the significance of the indirect effect of overall religiousness on well-being,
through collaborative religious coping was significant (see Figure 3). Adding covariates to the model revealed what might have been a suppressed zero-order relationship between overall religiousness and the well-being outcomes in this highly religious sample. That is, once overall religiousness was essentially controlled for through participant sampling, the left over aspects of personal religiousness showed the potential for both positive and negative effects.

With FFM traits and demographic characteristics in the model, the association between DRI and collaborative religious coping was amplified, as were the associations of collaborative religious coping with PWB and SWLS. Bootstrap significance tests of the positive, indirect effects of religiousness on both aspects of well-being, through collaborative religious coping, were significant at traditional levels. Further, the remaining direct effect of religiousness on well-being was negative and non-significant (after the variance in overall religiousness related to positive well-being through collaborative religious coping was partialled out). However, it was not zero, indicating partial mediation. The meaning of partial mediation in this context is unclear, since the original direct path from dispositional religiousness to well-being was already non-significant and the range of dispositional religiousness scores was quite limited. Among those who were most religious, however, removing that portion of their religiousness that collaborated with God during stressful times left a net negative effect of their religiousness on their well-being. Further testing is needed to discern whether this is a real effect or merely an artifact of the data due to the highly religious nature of the sample (and corresponding severely truncated range of the data).
Table 2.4  
Parameter Estimates for Direct and Indirect Effects of Extraversion, Overall Religiousness and Controls on Collaborative Religious Coping, Psychological Well-being, and Satisfaction with Life

<table>
<thead>
<tr>
<th></th>
<th>Collaborative religious coping - mediator</th>
<th>Psychological well-being (PWB) - outcome/model #1</th>
<th>Satisfaction with life (SWLS) - outcome/model #2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Direct Effects:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collaborative religious</td>
<td>--</td>
<td>3.46 (1.36) .32**</td>
<td>.90 (.48) .27†</td>
</tr>
<tr>
<td>coping</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neuroticism→</td>
<td>-.00 (.02) - .02</td>
<td>-.35 (.13) -.30**</td>
<td>-.01 (.05) -.04</td>
</tr>
<tr>
<td>Extraversion→</td>
<td>-.00 (.02) - .03</td>
<td>.60 (.13) .44**</td>
<td>.20 (.05) .48**</td>
</tr>
<tr>
<td>Openness→</td>
<td>-.01 (.02) - .08</td>
<td>.11 (.14) .08</td>
<td>-.12 (.05) -.28**</td>
</tr>
<tr>
<td>Agreeableness→</td>
<td>.01 (.02) .03</td>
<td>.08 (.17) .05</td>
<td>.11 (.06) .22†</td>
</tr>
<tr>
<td>Conscientiousness→</td>
<td>.00 (.01) .03</td>
<td>.34 (.10) .28**</td>
<td>.02 (.03) .06†</td>
</tr>
<tr>
<td>Overall religiousness→</td>
<td>.37 (.06) .65***</td>
<td>-1.11 (.77) -.18</td>
<td>-.48 (.27) -.26†</td>
</tr>
<tr>
<td>Male→</td>
<td>-.02 (.41) - .01</td>
<td>-3.24 (3.32) -.07</td>
<td>-1.33 (1.18) -.09</td>
</tr>
<tr>
<td>Age→</td>
<td>.01 (.03) .05</td>
<td>.23 (.20) .08</td>
<td>.05 (.07) .06</td>
</tr>
<tr>
<td>Education→</td>
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<td>-1.27 (.27) -.13†</td>
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<td>Income→</td>
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<td>1.78 (1.16) .13</td>
<td>.72 (.41) .18†</td>
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<td>African American→</td>
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<td>-5.49 (1.56) -.34***</td>
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<td><strong>Indirect Effects:</strong></td>
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<td>Duke religion index→</td>
<td></td>
<td>1.28 (1.41) L95%(^\dagger)= .11 U95%(^\dagger)= 4.30</td>
<td>.21* .33 (.36) .18*</td>
</tr>
<tr>
<td>collaborative religious</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>coping</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
1. L95% and U95% are the lower and upper bootstrap percentile confidence interval, based on 1000 bootstrap samples.

Note. This table shows the results for two separate models: one predicting PWB and one predicting SWLS. Except for the outcome variable, all other variables are identical. Path estimates for direct paths into collaborative religious coping are identical for both models, as is model fit ($\chi^2 = 23.09$, $df = 24$, $p = .52$; CFI = 1.00; RMSEA = .00).

$N=122$.

† $p \leq .10$, * $p \leq .05$, ** $p \leq .01$, *** $p \leq .00$
Figure 2.3: Actual model of collaborative religious coping partially mediating the relationship between overall religiousness and psychological well-being. Note: Path estimates are Beta coefficients, and only those coefficients directly related to mediation were duplicated here. All coefficients are reported in Table 4 however.

Discussion

The relationships between personality traits and nonreligious coping are becoming quite well-researched (cf. Charles S Carver & Connor-Smith, 2010; Connor-Smith & Flachsbart, 2007); however, the relationships between personality traits and specific religious coping strategies were entirely unknown previous to the these analyses. To the author’s knowledge, the current study is the first to shed light on the associations between FFM traits and specific
religious coping strategies. The results: Generally, neuroticism was related to maladaptive religious coping, and overall religiousness was related to adaptive religious coping. Correlations affirmed links between neuroticism and the maladaptive religious coping styles that involve (1) passively waiting for God to take control and deal with the stressor, and (2) indirectly seeking control by pleading with God for a miracle or for divine intervention. Indeed, for highly religious people, the choice to wait passively for God to take control during times of loss and stress potentially opens a door through which religiousness might have a negative impact on their life. Such maladaptive passivity is also a mediator that provides one of the pathways along which trait neuroticism unfolds into diminished psychological well-being. In other words, some of the ways that people draw on their religiousness in attempts to cope with adversity may reinforce a sense of helplessness and disempowerment in the face of life’s inherent challenges, rather than bolstering a belief in one’s agency and efficacy. Although it is important to honor religious preferences and expression, some religiously grounded strategies may not actually be effective to restore and elevate psychological well-being, even if people believe them quite earnestly.

On the positive side, seeking to control a stressor by actively partnering with God holds particular promise as an adaptive way that religious people can use their religiousness to cope with adversity. This may be one mechanism that helps to explain the positive associations between religiousness and well-being. Such a partnership activates human creativity and potential to move through adversity to a more resolved state. Pargament and colleagues proposed something similar: “The language of religion—faith, hope, transcendence, surrender, forbearance, meaning—speaks to the limits of human powers. When life appears out of control, and there seems to be no rational explanation for events—beliefs and practices oriented to the
sacred seem to have a special ability to provide ultimate meaning, order, and safety in place of human questions, chaos, and fear” (Pargament et al, 2005, p.676). Expanding Pargament’s thoughts beyond a survival-based restoration of safety, I assert that a partnership with a God who is held as one’s creator has the potential to draw something more (or at least something different) out of a person than partnership with other people. Engagement with the Divine should have the power to elevate human individuals to be and to do more than elsewise envisioned. Just as an inventor knows of the hidden capacities of his or her invention and can draw them out, so a religious person might expect their God to know and draw out their yet untapped power and potential.

As mentioned earlier, choice of coping strategy is a malleable developmental outcome, and some strategies work better than others. Most people can and do learn increasingly adaptive coping strategies as they gain life experience (e.g., Carrico et al., 2006). They can also intentionally engage in efforts to improve their coping, to increase their use of positive coping strategies and decrease their use of negative ones. Conscious choice of religious coping strategy, then, might show promise as a potential buffer against the psychological difficulties of high neuroticism, rather than merely a reinforcement of them.

Limitations

Four primary opportunities to improve the current project are as follows. First, including a comprehensive, quantitative measure of nonreligious coping strategies in these analyses would provide a revealing companion and comparison to the religious coping scales. Do nonreligious forms of coping mediate trait—well-being relationships in a similar fashion, and if so, which ones? Do nonreligious coping strategies reduce the explanatory or mediating power of religious coping strategies? Unfortunately, nonreligious coping measures were not
available in the study data to include in analyses. Similarly, the data included only five of the 21 RCOPE scales, those about using religion to gain control. The relationships among dispositions, well-being, and RCOPE scales related to meaning, spiritual comfort, spiritual intimacy, and life transformation remain largely unknown.

Second, the study was fielded to better understand religiousness among the most religious, and there was no secular comparison group. Because of the lack of seculars and of people who self-report as spiritual but not religious, the range of religiousness in the sample was truncated. Although religious people can use both religious and nonreligious resources to cope, we do not yet know how these relationships function at the lower or middle ranges of the religiousness distribution.

Third, the study captures a diverse range of expressions of Christianity, sorting into relatively equally distributed groups of mainline Protestant, evangelical Protestant, African American Protestant, and Catholic participants, the four largest religious groups in the United States today (Steensland et al., 2000). Unfortunately, the sample sizes became too small to run parallel SEM models for each of these four subgroups. As a result, it is unknown whether these mechanisms function similarly or differently for members of different religious traditions. Finally, the present study does not represent religious traditions outside of Christianity, such as Judaism, Islam, Buddhism, Hinduism, Confucianism, Paganism, etc. Natural next steps, then, are to test the disposition—coping—well-being associations in a much larger sample that includes both seculars and members of non-Christian traditions, one that also includes quantitative measures that account for the widest variety of both religious and nonreligious methods of coping with adversity.
Conclusions

Notwithstanding these limitations, the current project contributes to our understanding of the mechanisms that link personality dispositions with well-being. It ventures to explain some of the ways that religiousness and the Five Factor Model of personality traits might set people up to use their religion to create and enhance—and limit and diminish—well-being during times of adversity. In short, this line of research helps us understand how religious people with certain personality traits do religious coping, and it provides useful clues regarding how religious people may alternately exacerbate personality-related vulnerabilities and/or draw out the best that personal religiousness has to offer.
Chapter Three: Religious and Nonreligious Coping in Life Narratives

We would also bring the dead bodies back or dying bodies of Vietnamese back for questioning, and that was – it did not seem like there was a God to me…

And I think I just pulled away. I was not really believing Him.

–John, a 58-yr-old, African American/black Protestant man

They say we come to believe. And that’s the process that I’m talking about. And the believing is in the spirit of God, the higher power, or whatever you want to call Him, is really there for you all the time.

–Claire, a 64-yr-old, white, mainline Protestant woman

Chapter Two investigated the links between three constructs: Personality traits, religious coping strategies, and well-being outcomes, to test the potential for various religious coping styles to mediate the links between personality traits and well-being. Indeed, a religious coping style that included passively waiting on God to fix one’s problems, without doing anything (not even purely spiritual acts), mediated the link between trait neuroticism and poor psychological well-being. The current chapter, Chapter Three, narrows the view and eclipses personality traits to focus more closely on links between the other two constructs, religious coping strategies and quality of life outcomes (including both well-being and psychosocial maturity). The mode of inquiry in this chapter also shifts, from a purely statistical mode to a mixture that privileges qualitative, narrative data, which is quantified and then used in statistical analyses. This shift brings the “rubber meets the road” aspect of religious coping into greater relief, allowing closer
observation of how people’s religious coping discourse within the context of a life narrative might be cause and/or consequence of their overall quality of life.

One observation from Chapter Two is that how people with religious ties draw on their religion to cope with adversity varies a great deal from person to person. Although intuitively and/or personally interesting to many, this variation matters from a research and developmental perspective because religiousness is complexly related to both physical and psychological well-being (Harold G. Koenig & Larson, 2001; Harold G. Koenig, McCullough, & Larson, 2001; Larson & Koenig, 2000), and little is known about the mechanisms that facilitate these relationships. Religion is often cited as a key resource that people use to cope with adversity and create meaning from difficult life events (Pargament, 1997; Pargament, Falb, Ano, & Wachholtz, 2013), but we do not yet know much about how people actually use their religion to cope. Survey research on religion and coping, or religion and well-being, generally prompt for whether or not people pray or how often they go to church, but they do not often inquire about the contents of those prayers or the influence of the sermons or the nature of the social ties of the participant (Connor-Smith & Flachsbart, 2007; Pargament et al., 2000). Autobiographical narrative research, which by its nature invites detailed and nuanced data, has yet to delve into religious aspects of individuals’ coping discourse. This presents a welcome opportunity to contribute to an understanding of (1) religious coping in narratives and (2) how this discourse relates to both psychological well-being and psychosocial maturity.

This chapter addresses the following three questions: First, how do people use religion in their life narratives as part of their discourse on coping with life’s most difficult losses and challenges? Specifically, do qualitative, narrative accounts of coping with adversity display religious versions of secular coping types identified in the quantitative coping literature?
Second, are people who score higher on quantitative assessments of overall religiousness and of religious coping also more likely to talk about having drawn upon their religiousness to cope with life’s losses, challenges and adversity when they narrate their life story? Third, what modes of religious and nonreligious coping in autobiographical narratives seem to facilitate (or at least accompany) positive psychological adaptation and maturity, and which do not?

To address these questions, the chapter begins with a description of life narratives as an aspect of identity and then explores life narratives as a location and method for exploring religiousness and coping. The next section reviews narrative coping research and identifies at least two opportunities to advance that body of scholarship, including reaching out to the quantitative literature on stress and coping and explicitly considering people’s religiousness in their coping. The third section considers religiousness as a coping resource, examines the current methods of measuring religiousness and related outcomes, and discusses both adaptive and maladaptive uses of religiousness in coping. The introduction concludes by describing the quality of life outcomes used in the current analyses. The section focuses particularly on psychosocial maturity, measured in terms of ego development (Hy & Loevinger, 1996; Jane Loevinger, 1966), since this outcome was not described in the previous chapter.

Life Narratives, Religion, and Coping

Little is known about how religious people use and makes sense of using their religiousness to cope, so why not simply ask religious people how they coped during difficult times and then let them tell their story in their own words? Within psychology, there is a growing body of both qualitative and quantitative research that examines autobiographical life stories to discover how people make sense of the events of their lives, forge their identity, and understand their place in the world (Bruner, 1990; McAdams, 2008; Thorne & Nam, 2009).
Autobiographical narratives are qualitative accounts of an individual’s life that can be benevolently exploited in the search to understand a wide variety of psychological phenomena. In addition to being a method of inquiry, autobiographical narratives are also a representation of the self, an evolving story of meanings and connections that help explain a person’s life and sense of self in their particular sociohistorical context (McAdams, 2008).

McAdams and Pals (2006) describe the narrative layer of personality as, “Internalized and evolving life stories that reconstruct the past and imagine the future to provide a person’s life with identity (unity, purpose, meaning). Individual differences in life stories can be seen with respect to characteristic images, tones, themes, plots, and endings. Life stories change substantially over time, reflecting personality development” (p. 212). People use their stories to make meaning, to make sense of life events (both positive and negative). This is somewhat universal. However, people do differ with regard to how they narrate their stories, and these differences accumulate into developmental trajectories that can lead toward or away from well-being and maturity. For example, narrative themes of agency, redemption, and personal growth rather reliably predict psychological health and well-being (e.g., Adler, 2009; J. Bauer et al., 2008; J. J. Bauer & McAdams, 2004b; Grossbaum & Bates, 2002; Lilgendahl & McAdams, 2010; Dan P. McAdams, 2006). Thus, the narrative layer of personality represents something that people are (i.e., identity) and something that people do (i.e., make meaning, and connect and explain life experiences), and it can provide indicators of how well they are doing in life generally.

The creation or facilitation of meaning, in particular, is a chief function served by autobiographical narratives. In this way, there is an overlap in the personal and psychological utility of one’s autobiographical narrative and one’s religiousness: Both help explain a person’s
life and purpose, and both facilitate the creation of meaning. Both also rely on narrative modes to achieve these ends.

Although the formal canon of stories within Christianity is relatively set (e.g., Jesus healing a blind beggar, Jesus dying on a cross, or God striking Saul off of his horse and blinding him), the meanings that people derive from these stories, the ways that they do or do not apply them to their lives, and the stories they tell about these stories are all subject to change and development. In addition, people may create new stories or have experiences that become part of their personal canon, and these personal canons are nearly infinite in range and possibility.

Autobiographical narratives contain many of the same elements as other kinds of stories: setting, characters, plot, beginnings, endings, emotional tone, coherence (thematic, temporal, and causal), and, of course, an author (Habermas & Bluck, 2000; McAdams, 1995). It is through these elements that religion is expressed and plays its variety of roles in life narratives. Specifically, as people both author and narrate their stories, they can reveal the ways that religion helps them to cope with adversity and create meaning. This can happen in many ways, perhaps including the following.

First, religion can enter the life story as a supportive actor: The clergywoman who makes a hospital visit to pray with a cancer fighter; friends from the congregation who rally to make meals, help pay the bills, and clean his house; or the belief in a God who heals, for example. In fact, these are somewhat familiar images that the benefits of religiousness
might conjure. Religion can also appear in the life story as an antagonist, however: The
congregation that coldly excommunicates a follower because she divorced her husband and is
now with a female partner, congregants who act viciously out of their own hurt and sense of
betrayal, or the projection of a God who seems to approve of this sort of punishing
abandonment.

A second way that religion might surface in life narratives is as a passive character, a
resource or tool that is wielded by the narrator. Although religion can appear as an immense,
motivated actor that moves toward its own goals, influenced little by the narrator, it can also be
an inert instrument that is used to achieve the author’s ends. In this way religion has qualities
and functions that the author uses and values, but it has little to no agentic force of its own.
Such examples include the belief in an afterlife that may provide release from intolerable loss
or the ritual observances that can endow life with structure and meaning. Again, even passive
religion can have its dark side: Seemingly impotent and perfunctory rituals that have become
void of any substance or meaning, or the belief that a loved one died because of one’s personal
sin or shortcomings. Whether friend or foe, active or passive, religion can play a powerful role
in the life stories of the devout, the average adherent, and the apostate.

Third, religion can serve as the ethos of a life story, providing thematic and structural
coherence. For some, religion is a large-scale and pervasive “orienting system,” which provides
real guidance in regard to global motives and goals (Pargament, 1997; Park, 2005). Thus,
religion motivates action and provides a structure for evaluating possible life paths, lending
thematic and causal coherence to what otherwise might seem like a collection of random
experiences. Viewed in this way, religion is a framework people make use of, to make their
lives and stories make sense.
Finally, religion can emerge in narratives as a cultural location (an aspect of the setting). When people belong to congregations or other religious institutions, they are exposed to both local and larger systems of meaning within these religious “cultures.” These interact with and influence individual meaning-making efforts (Bruner, 1990; Hammack, 2008). The stories that individuals construct from their unique experiences are influenced by a “menu” of acceptable meanings, images, themes, and contents that broader cultures provide and approve (McAdams & Pals, 2006). For example, a Christian amidst his grief and anger over the loss of a child might believe that the child is now with God in Heaven. This belief may offer solace. A Buddhist, based on her religious context (including belief structures which incorporate neither monotheistic providence nor a Christian heaven), would narrate the meaning of such an event very differently. Perhaps she would reference the story of the Buddha helping Kisa Gotami, a bereaved mother, to know that she was not alone in her grief and that death is an inescapable part of life.

This chapter brings both religious and nonreligious ways of coping and making meaning into sharp relief within the context of autobiographical narrative scenes of coping with adversity. I investigate whether the meanings people make as they use their religion to cope are significantly related to psychological well-being, life satisfaction, and psychosocial maturity. In the following chapter, Chapter Four, I consider the influence of ethno-religious affiliation (i.e., religious setting, which is exposure to particular doctrinal teaching and traditions received through church attendance and resulting social interactions) on coping and related outcomes.

Having established the potential for religiousness to infuse autobiographical narratives, I assert that these narratives are also a good place to investigate religious coping in particular. First, by nature, the events that require psychological resources to cope with them make good
fodder for storytelling. People generally tell stories about unusual, unexpected or upsetting events of their lives. Mundane events are seldom the topic of a good story (D. P. McAdams, 2006). Second, crafting a good story is essential to integrate and move past exceptionally difficult or traumatic events, and the lack of a good (coherent) story about such events is one marker of psychological ill-health or pathology (e.g., Adler, Wagner, & McAdams, 2007; Tuval-Mashiach et al., 2004). A third reason that personal narratives are a good location to investigate religious coping is that religion is an especially symbolic and story-based phenomenon (Geertz, 1993; Greeley, 1993; McAdams & Albaugh, 2008a). The meanings of religious symbolic systems are often communicated through stories (e.g., the parables and teachings of Jesus, the messages of the Old Testament prophets to a disobedient Israel, the story of Adam and Eve and of evil entering the world, and the travels, encounters, and enlightenment of Buddha). These stories and symbols make their way into individuals’ personal canons and can be drawn upon to make sense of the world when disorientingly tragic events occur.

One way to view religiousness, then, is as a dynamic resource for personal meaning-making (Geertz, 1993; Park, 2005). Coping strategies can involve significant meaning-making processes (Park, 2010) (which may or may not draw on religious resources), and autobiographical stories are a fundamental location to work out the meanings attributed to the events and outcomes of our lives. Thus, autobiographical stories should provide a maximally illuminating window into religious coping and meaning-making activity (Thorne & Nam, 2009).

**Narratives and Coping**

There is a growing body of empirical work that links narrative representations of nonreligious coping and meaning-making with important quality of life outcomes, such as physical health, psychosocial maturity, and psychological well-being. Pals (2006), for example,
examined narratives of difficult life experiences from 83 midlife women from the Mills Longitudinal Study and found significant associations between narrative coping themes (e.g., positive self-transformation) and physical and mental health and maturity 9 years later. Similarly, among parents of children with Down Syndrome, autobiographical narrative themes of closure and happy endings were positively related to parents’ well-being (L. King et al., 2000). Further, narrative themes that captured the parents as struggling with adversity and attempting to make sense of life predicted elevated psychosocial maturity (i.e., ego development). Among a sample of divorced women, greater salience of current best possible selves and more extensive elaborations of lost possible selves and in their autobiographical narratives functioned as potential pathways to psychological well-being and psychosocial maturity, respectively (L. King & Raspin, 2004). Finally, participants’ life narratives that revealed (rather than obscured) the pain of adversity and loss and portrayed the difficult experience as transformative and producing self-insight, were linked to having both higher subjective well-being and elevated psychosocial maturity, to living what the authors deem the good life (J. Bauer et al., 2008). Adding psychological well-being, I refer to as quality of life.

From this work we learn that autobiographical storytelling relates to a broad range of measures of overall quality of life, including mature psychosocial functioning, psychological well-being, and physical health. Relatively recent longitudinal research further promotes the importance of storytelling in quality of life. Adler (2009) collected narratives of therapy (a unique coping and meaning making setting) at 12 time points and then used growth curve modeling to disentangle the temporal question of which changes first: therapy clients’ stories or their mental health. The results support a developmental view that people, “begin to construct a new story about their experiences and then live their way into it” (Adler, 2009, abstract). Thus
we see that how people narrate their coping has the potential to influence how well (or not) they emerge from coping with difficult life experiences.

The studies described above provide intriguing insight into the meaning-making and coping functions of life narratives. There are, however, two noteworthy opportunities to add to their contributions. First, this body of research generally overlooks the influence of religion on coping efforts (despite the fact that people frequently cite religion as an important resource used to cope in times of difficulty). Second, the studies explored the relations between coping and narrative identity, but they did so in relative isolation from the quantitative literature on stress and coping.

Regarding the first opportunity, it is not problematic to overlook religion in narrative studies of coping if participants simply do not mention their religiousness in their coping stories, but many times they do. Pals’ (2006) work on midlife narratives from women in the Mills Longitudinal Study did not include enough examples of the language used by participants in their stories to adequately gauge this, but King and colleagues’ (2000) study of parents of children with Down Syndrome included many examples of the autobiographical narratives generated by the participants, and these were overflowing with references to God and religiousness. For example, “The first 24 hours we were led to believe that our daughter was so bad off that we actually prayed to God to take her from us now versus later” (p. 509). Other compelling references to religiousness include, “I believe that God was telling me and preparing me [in advance],” and “She’s [participant’s daughter with Down Syndrome] definitely wired differently. And I think those wires are hooked directly to God. She’s the closest I’ve come to an angel on Earth” (p. 520). In all, 5 of the 19 narrative examples (more than 20%) demonstrated clear reference to divine or transcendent forces. To be fair, the purpose
of the project was not to evaluate the role of religion in coping. However, the authors chose not to comment on the unprompted religious references in their discussion of the narrative findings, leaving this prominent dimension entirely unexamined. One possible explanation is that perhaps the illustrative examples overrepresented the prevalence of religion in the stories. The study of divorced women’s narratives (L. King & Raspin, 2004), however, reported that nearly 20% of the women’s narratives contained references to church or spirituality (30% of the article’s narrative examples contain such references). Unfortunately, the analysis of religion in the stories did not progress beyond a simple count of the contents of different types of stories.

One narrative study did directly evaluate the role of religion in coping attempts, however. The report described African American women’s stories of how religion may have helped them in times of stress or trouble and identified eight thematic ways that religion positively influenced meaning-making and coping (Mattis, 2002). This qualitative investigation accomplished its purpose of enriching our understanding of religion in one group of women’s lives. However, it did not address potentially negative aspects of religiousness, and it did not go beyond description to test or discuss possible relationships between the coping and meaning-making themes identified and meaningful quality of life outcomes. To the author’s knowledge, this dissertation project is the first to draw on both qualitative and quantitative methods to examine how religion, coping, and meaning-making interact within autobiographical narratives to predict well-being, life satisfaction, and psychosocial maturity outcomes.

A second research opportunity is that the narrative coping investigations described above did not acknowledge or attempt to tie into the extensive quantitative literature on stress and coping. Most purely quantitative coping research traces back in one form or another to the work and theory of Folkman and Lazarus (e.g., Lazarus & Folkman, 1984) (Charles S. Carver,
Scheier, & Fulford, 2008). The theory posits there are two basic types of coping: *problem-focused* coping (actively engaging in activities to change or control the stressor) and *emotion-focused* coping (managing, alleviating, and avoiding the negative emotions resulting from the stressor). Research has revealed consistently positive associations between problem-focused coping and well-being and ambiguous relations between emotion-focused coping and well-being, presenting empirical challenge to the parsimony of Lazarus and Folkman’s model.

Further challenge comes from a review of confirmatory factor-analytic evidence regarding the overall structure of coping strategies. This report discovered a hierarchical structure to coping strategies (Connor-Smith & Flachsbart, 2007). Rather than Lazarus and Folkman’s problem-focused versus emotion-focused coping dichotomy, a distinction between *engagement* (active) and *disengagement* (passive/withdrawal) coping topped the hierarchy. The engagement dimension further sorted into *primary control engagement, secondary control engagement, and religious coping*. They describe primary control engagement as “active attempts to control the stressor and related emotions through strategies such as problem-solving, seeking support, or regulating emotions” (p. 1085), which subsumes both problem-focused coping and active emotion-focused strategies. I refer to this strategy as simply “active coping”. Secondary control engagement strategies include “attempts to adapt to a problematic situation through strategies such as distraction, cognitive restructuring, or acceptance” (p.1085), and these become most relevant when the stressor is perceived to be unchangeable. I refer to this as “meaning-related coping”. In contrast, disengagement strategies include “attempts to distance oneself from the stressor through strategies such as avoidance, denial, wishful thinking, or withdrawal” (p.1085).

Regarding religious coping, listed under the engagement coping umbrella, the description includes personal prayer, religious participation, and having faith in a benevolent
God (Connor-Smith & Flachsbart, 2007). Unfortunately, this category is not divided into positive and negative (or engagement versus disengagement) aspects of these religious coping endeavors. The authors do acknowledge that religious coping, “reflect[s] mixtures of coping goals” (p. 1087). This lack of differentiation with regard to religious coping is likely an artifact of the questionnaires/data used to develop the hierarchy. This psychometric investigation underscores the point made earlier in the present chapter, that most coping research tends to place all religious coping into one catch-all category (Pargament et al., 2000). Thus the picture of religion’s influence on coping and well-being in the research is muted and oversimplified.

Nonetheless, the advancement in our understanding of the overall hierarchical structure of coping styles presents an opportunity to follow up this empirically-driven work with qualitative, life narrative methods to find out if this hierarchy is evidenced in the ways that people actually narrate their coping processes. Further, religious forms of engagement and disengagement coping can be anticipated and sought out in the narratives as well, revealing a more vibrant and nuanced influence of religion on coping processes and quality of life outcomes. The current project does just this, by inquiring whether or not the quantitatively-derived coping hierarchy (both religious and nonreligious versions of it) emerges in people’s narrations of coping with adversity. I also examine the relationships between these narrative coping styles, overall religiousness and religious commitment, and the quality of life outcomes of psychological well-being, life satisfaction, and psychosocial maturity.
**Religiousness as a Coping Resource**

As already intimated, religion provides an important resource for many people as they cope with significant challenge or tragedy, as well as for navigating everyday stressors. The social support that people can find in their congregational affiliations has received considerable empirical attention as one way that religious involvement might help people to cope with adversity and lead to greater well-being (George, Ellison, & Larson, 2002). Indeed, survey data support that religious people themselves agree with this hypothesis: One of the benefits they expect to derive from their congregational ties is social and instrumental support in times of crisis. Responses to a special module in the 1998 General Social Survey indicated that more than three quarters (79%) of U.S. adults who attend religious services expect that people in their congregations would help them substantially if they were ill, and even more (84%) expect to receive comfort when faced with a problem or a difficult situation (Fetzer Institute/National Institute on Aging Working Group, 2003/1999). In short, among the benefits people expect to derive from their congregational ties are social and instrumental support in times of crisis.

It is abundantly clear that social support is an important facet of how people use religion to cope; however, religion is also inherently personal. Religion provides meaning and comfort and suggests connection with forces that transcend the individual (Pargament et al., 2000). Also from the 1998 General Social Survey, nearly 60% of people “find strength and comfort” in their religion much of the time (i.e., “most days” or even “many times each day”). By contrast, fewer than 14% of people “never, or almost never” find this support in their religion. Further, private religious beliefs and practices, such as prayer and specific beliefs about God, predict both the use of positive coping strategies and the outcome of good psychological health (e.g., Harris et al., 2010; Newton & McIntosh, 2010; Whittington & Scher, 2010).
Is religion a special or unique form of support during times of trouble, or is it interchangeable with other coping resources that can provide comfort and meaning and bolster long life, health, and well-being? The evidence is mixed. In support of the “interchangeable” view, one longitudinal analysis (using data from the Terman Study) provides evidence that the relationship between religious involvement and longer life is explained completely by nonreligious variables (e.g., personality traits, social ties, health behaviors, and mental and physical health; McCullough, Friedman, Enders, & Martin, 2009). In support of the “unique” view, however, another set of longitudinal analyses (using data from the Berkeley/Oakland Growth Studies) provides evidence suggesting, “something about being religious, independent of friends and social support, props people up during times of adversity” (Dillon & Wink, 2007, p. 188). In addition, numerous cross-sectional studies come to the conclusion that religious ways of coping display independent contributions to positive health and well-being outcomes (over and above the contributions of nonreligious coping, global religiousness, or demographic characteristics) (e.g., Harris, Erbes, Winskowski, Engdahl, & Nguyen, 2014; Harold G. Koenig et al., 1995; Oxman, Freeman, & Manheimer, 1995; Pargament, 1997). Based on this research, it might be the case that religious resources operate differently, or serve different purposes, than do nonreligious ones. Further, because of its focus on what is held sacred, religion may be an altogether unique personal resource (Pargament et al., 2005; Piedmont, 1999). This arguably distinctive role that religion plays in people’s lives, combined with the fact that many in the U.S. today say that they draw on their religion in times of distress (Pargament, 1997), establishes the merit of studying the particular influence that religiousness can have on individual coping, meaning-making, and well-being.
The finding that general religiousness is related to positive aspects of health and well-being is robust (e.g., Ellison, 1991; Harold G. Koenig et al., 1995; Patock-Peckham et al., 1998; Seybold & Hill, 2001). However, it is also clouded by imprecise or insufficient measurement of religiousness. In many of these studies, religiousness is measured in terms of frequency of church attendance and personal prayer, with no regard for the contents of those church services or prayers. More fine-grained measures, however, reveal that some religious expressions can be harmful, as well as helpful. For example, after accounting for common correlates of depression such as neuroticism, self-esteem, coping styles, and attribution style, Maltby and Day (2000) found that those with higher extrinsic religious orientation scores (those who use religion as a means to an end) also had significantly more depression symptoms than those with lower extrinsic religious orientation scores. The reverse was true for those with higher intrinsic religious orientation scores (those who more fully identify with and seek to live out their religious beliefs). They had significantly fewer depression symptoms than those with lower intrinsic religious orientation scores.

Evaluating religious ways of coping reveals a similarly complex picture of adaptive and maladaptive religiousness. Pargament, Koenig, and Perez (2000) developed an instrument that assesses 21 different ways that people (from Jewish and Christian traditions) use religion to cope. One indirect religious coping strategy (i.e., pleading for God to perform a miracle) and several negative meaning-related coping strategies (e.g., questioning God’s power or benevolence) significantly predicted poor physical health. In contrast, positive religious coping strategies (e.g., seeking care and comfort from religious others, providing spiritual care to others, and using religious activities to distract from the stressor) were positively related to psychological well-being. A recent religious coping meta-analysis (which drew on 49 relevant
studies, with 105 effect sizes) affirmed this general pattern (Ano & Vasconcelles, 2005). Also noteworthy, these studies that differentiate between positive and negative aspects of religiousness also generally include global religiousness measures in their analyses (e.g., frequency of church attendance, frequency of private religious activities, and/or religious salience), and they find that the influence of global religiousness measures became insignificant after the differentiated measures were introduced. Thus, we see that how people express their religiousness might be more important than whether or not they are religious at all.

**Quality of Life Outcomes**

This chapter retains a focus on the connections between religious coping and well-being from Chapter Two and then adds psychosocial maturity to these quality of life outcomes. Although some consider happiness and life satisfaction sufficient measures of well-being, others argue that personal maturity ought to play a significant role in evaluating whether or not someone seems to be living the good life (e.g., J. Bauer & McAdams, 2010; J. Bauer, McAdams, & Sakaeda, 2005; L. A. King, 2001). These researchers differentiate hedonic (pleasure-seeking) well-being from eudaimonic (happy and mature) well-being and often draw on a measure of ego development (Jane Loevinger, 1976) to assess psychosocial maturity.

The concept of ego development endeavors to describe the level of maturity at which we think about ourselves and the world. Loevinger (Hy & Loevinger, 1996) distinguishes ego development from Freud’s concept of the ego and states that the ego—in her terms—is best understood as “the unity of personality, individuality, the method of facing problems, opinion about oneself and the problems of life, and the whole attitude toward life” (pp. 3-4). She goes on to say that the core function of the ego is to create coherence among the meanings we derive from our experiences. Levels of ego development move from intolerance of ambiguity,
cognitive simplicity, and black and white thinking at the low end, to tolerance and embrace of ambiguity, cognitive complexity, and internalized value systems at the highest end. Loevinger (Hy & Loevinger, 1996) proposed that ego development progresses independently of well-being. Attaining a high level of maturity, for instance, says nothing about whether a person will also be happy. Together, then, these constructs create a fuller index of quality of life.

Following this explanation of the literature and background behind the current project, the chapter now progresses to present an overview of the current study and hypotheses.

The Present Study: Overview and Hypotheses

The above review culminates in several points. First, survey-based research on coping is at last beginning to investigate the multifaceted ways that religion can be used in coping processes, yet a good deal of the current coping scholarship still settles for simplistic measures of religious attendance or prayer in coping. Second, narrative coping research could generate more nuanced perspectives of religion in coping more readily than survey-based research, simply because the method allows participants to describe topics that are important to them—but that the researcher did not anticipate. The narrative tradition, however, has left the influence of religiousness on coping almost entirely unexplored. Third, religiousness, coping, and narrative identity are prime locations of individual meaning-making activity, and their intersection presents an exciting view into the important psychological task of creating meaning and making sense of one’s life, especially of difficult or traumatic events. The current dissertation project endeavors to advance these research areas by drawing on both qualitative autobiographical narratives and related quantitative survey measures, from 122 Christians who are regular attenders at their congregations. An overview of research questions, hypotheses, and plans for analyses are next.
Question 1: What characterizes coping discourse in narrative low point scenes of committed Christians?

Individuals’ narrative accounts of coping with adversity take center stage in this research. As illustrated above, narratives have the potential to offer rich accounts of individual religiousness, coping, and meaning-making. For the narrative analyses, I excerpted three different nadir or low point scenes from the life story accounts of a sample of committed Christian adults (overall low point scene, childhood low point scene, and faith low point scene). Low point scenes in the life story usually describe times of heightened adversity and include the ways that people coped with that adversity, sometimes drawing on their religion and sometimes not. These scenes can also contain participants’ evaluations of the events and the meanings that they made from their experiences. Based on this, the initial narrative analysis had three components: the event, the process, and the resolution.

The event. The predominant adverse event in each nadir scene was identified and then categorized by type of event (personal health threat, relationship trouble, death of close significant other, etc). This component was used primarily as a descriptive tool. However, some researchers have found that event type matters for meaning making and coping. Thorne, McLean, and Lawrence (2004), for example, found that meaning-making is more prevalent in narratives having to do with mortality and relationships (compared with those of achievement or leisure).

The coping processes. In this phase of the narrative investigation I classified coping accounts revealed in the stories into six distinctive coping styles, three nonreligious and three religious. Participants’ stories were coded for the presence or absence of all six coping types and received a total score for each. Similar to how six separate quantitative scales would
function in an analysis, participants could score high on all six, low on all six, or receive a mixture of high and low scores on each of the six independent narrative coping themes. The three nonreligious coping styles were grounded in quantitative work that identified a hierarchical structure to the numerous coping strategies assessed via questionnaire (cf. Connor-Smith & Flachsbart, 2007). Three strategies (factors) emerged near the top of that coping strategy hierarchy. These are primary control engagement coping (e.g., problem-solving, support seeking, emotion regulation; I call this active coping), secondary control engagement coping (e.g., cognitive restructuring, acceptance, distraction; I call this meaning-related coping), and disengagement coping (e.g., avoidance, denial, wishful thinking, withdrawal). As one might expect, the first two factors (or constellations of coping strategies) are associated with positive outcomes, so I refer to these as being generally adaptive. The third factor (disengagement coping) is associated with poor outcomes, so I refer to these strategies as being generally maladaptive. Together, these three coping types constitute the basis of the coding system for identifying three nonreligious coping styles in participants’ narratives.

Another facet of engagement coping emerged in the factor-analytic work referenced above: religious coping. This religious coping facet was generally adaptive, but not defined in any specific or nuanced way. It included, “Having faith in God, praying about the stressor, participating in religious services or activities,” (p. 1082). According to Pargament (Pargament, 1997, 2002; Pargament et al., 2013), religion can be used both adaptively and maladaptively to cope with adversity. Therefore, I created a coding scheme intended to capture religious versions of the three nonreligious coping themes identified in the paragraph above. I propose that religious coping can take active, meaning-related, and disengagement forms. Religious active coping might include things like prayer, social and emotional support with a pastor/priest or
with other church members, participating in religious rituals, seeking connection with God, actively forgiving others, and seeking forgiveness, for example. Religious meaning-related coping includes religious versions of (or religiously-influenced) cognitive restructuring, meaning-making, positive thinking, and acceptance. Using a religious lens to redefine an event as potentially beneficial is one way that this theme might emerge. Religious disengagement could include things like reactively leaving a church to avoid people or situations without any attempt to gain resolution or waiting for God to intervene without doing anything to personally engage the problem. Thus, participants’ narrative low point scenes were coded for six narrative coping themes: religious and nonreligious versions of active, meaning-related, and disengagement coping (see Appendix B for the coding manual).

The resolution. The third phase of the narrative investigation asked, how do the stories end? Do they have happy, good endings or unhappy, bad ones (or a mixture)? Life narratives are often laden with affective language. Emotion words in life narratives (particularly the endings) reveal the emotional valence that accompanies a narrative episode, as the narrator currently experiences it. Valence of the ending is essentially a narrative parallel or at least a complement to one of this project’s outcomes, psychological well-being. Davis, Nolen-Hoeksema, and Larson (1998), for example, propose that benefit-finding (a.k.a. a positive ending to the story) is one of the meaning-making functions necessary for healthy, adaptive coping after loss.

Question 2: Congruence

The first set of hypotheses draws on the prevalence of religious coping in low point stories. The participants in this study are all practicing Christians. That is, they go to church on a regular basis. There is also ample evidence that religiousness for these participants is a vital,
even indispensible aspect of their sense of meaning and coherence in life. As quantitative evidence of this, their scores on the Duke religion index and religious commitment inventory indicate a very high degree of religiousness. Qualitatively, McAdams and Albaugh (McAdams & Albaugh, 2008b) found that when these same study participants were asked to imagine their lives without God, the great majority of them were hard-pressed to do so. Does this religiousness show up in participants’ recounting of how they dealt with adversity in life, however? On the one hand, what people indicate in survey items or in responses to direct questions about their religiousness does not always match up with how people actually live out their lives (cf. Chaves, 2010). On the other hand, it is intuitive to think that a commitment to attending church regularly and an inability to imagine life without God would indicate a high level of religious salience in their lives, perhaps both in how people cope with adversity and in how they narrate their stories about that coping. In addition, the Fetzer report (described earlier; Fetzer Institute/National Institute on Aging Working Group, 2003/1999) suggests that most people who go to church expect support from their congregation to be a significant aspect of coping during times of adversity. Based on this, the first hypothesis tests the correspondence or congruence of (1) overall religiousness and (2) religious coping (all quantitative scales) with religious coping themes in life narratives.

*Hypothesis 1:* Total narrative religious coping theme scores will have significant and positive relationships with both overall religiousness scale scores (Duke religion index, DRI; religious commitment inventory, RCI-10), and narrative themes will correlate positively with religious coping (RCOPE) scale scores, adaptive themes with adaptive scales and the maladaptive theme with maladaptive RCOPE scale scores.
Question 3: What modes of religious and nonreligious coping in autobiographical narratives seem to facilitate positive psychological adaptation and maturity, and which do not?

Although narrative coping is foregrounded in this project, there are many supporting roles. Quantitative measures of global religiousness, religious participation, religious coping, demographic characteristics, psychological well-being, life satisfaction, and psychosocial maturity all play supporting roles to the narrative investigation. Of these, psychological well-being, life satisfaction, and psychosocial maturity claim special attention as key psychological outcomes.

Religion and well-being. Previous research finds a robust relationship between survey measures of religious participation, overall religiousness and well-being (George et al., 2002). Does the same relationship hold between well-being and religious coping in narratives? It is remarkable that survey measures of global religiousness find such a robust religiousness—well-being connection, considering religiousness is usually operationalized in one or two survey items querying behaviors such as church attendance and prayer. A replication of this phenomenon in narratives would do more than add one additional religion—well-being study to the empirical pile. Narratives tap into people’s self-concept and sense of meaning in life. Therefore, religion in narratives can reflect religious aspects of the self and the ways that people use religion to create meaning in their lives. A narrative replication, then, suggests that inherently psychological and personological facets of religiousness (rather than merely social ones) might play a role in propping people up in times of difficulty. A connection between religiousness and well-being in this context would lend support to the argument that religiousness helps bolster well-being through identity and meaning-making supports.
A natural next step is to discern which predicts psychological well-being more strongly, storied religiousness or self-report scales of overall religiousness and religious coping. The self-report questionnaires are global measures of religiousness and therefore might predict overall well-being more strongly than the mention of religious coping in specific scenes. However, narrating one’s life story is about more than just discreet episodes of life; it is an identity and meaning-making process that illuminates characteristics of individual personality (McAdams & Pals, 2006). From this perspective, I argue that spontaneous mention of religion in the life story is more indicative of an internalized and life-influencing religiousness than the endorsement of a frequency of religious involvement survey item. Therefore,

Hypothesis 2: Narrative religious coping theme scores will significantly predict positive well-being and will do so more strongly than survey measures of religiousness and religious coping (the same measures used in Chapter Two).

Religiousness, coping, and quality of life. The previous hypotheses are built around a singularly positive and adaptive view of religion in coping narratives. Next, I move to a more differentiated view, to investigate the consequences of specific ways of coping, both religious and nonreligious. The narrative coping variables include religious and nonreligious versions of active, meaning-related, and disengagement coping. I use correlations to test which of the narrative coping styles is related most strongly to well-being, positively or negatively. Stated another way, I test whether it is the presence of the helpful narrative coping styles or the absence of the harmful ones that is more strongly associated with well-being. Second, I examine whether it is the religious or the nonreligious forms of coping that hold greater sway over well-being. It is intuitively appealing (and somewhat consistent with predominant findings in the religion—well-being literature) to expect that religious forms of coping will exert greater
influence over well-being than nonreligious ones, perhaps especially if religion is an important part of a person’s life. Thus,

_Hypothesis 3:_ The magnitude of the relationships between religious narrative coping and psychological well-being and life satisfaction will be greater than those of the nonreligious narrative coping with these outcomes.

**Religiousness, coping, positive psychological functioning, and ego development.**

Next, I discuss the relationship between coping in general (religious and nonreligious) and ego development (ED). Coping and ED both function as tools of cognitive development that can evolve throughout adulthood. Although higher levels of ED are marked by a greater tolerance for ambiguity, greater cognitive complexity, and internalized value-systems, there is nothing in ED theory that directly relates higher ED with more adaptive coping styles or abilities (Hy & Loevinger, 1996). Indeed, some recent research supports the independence of coping and ED (e.g., Lynas, 2006; Sutherland, 2009). Loevinger (Hy & Loevinger, 1996) takes this even further to suggest the possibility that those at the highest ED levels may sometimes be less well-adjusted than those in the middle range, because those at the highest levels are most aware of their internal conflicts and inconsistencies. Considering an alternate view, coping processes often include significant meaning-making activity: Reframing the event, changes in conclusions about the causes of the event, and coming to a place of acceptance, for example. Such meaning-making coping efforts tend to land within meaning-related (secondary control engagement) coping, rather than active (primary control engagement) coping. The ways that coping is operationalized and measured in a study should therefore significantly influence whether or not it is found to relate to ED. For example, both Lynas’s (2006) and Sutherland’s (2009) work included primarily active coping and little to no meaning-related coping.
Therefore, their finding that ED and coping are unrelated is not surprising. Both active coping and meaning-related coping are directly assessed in the current study. As a result, I expect that there may be significant coping—ED links.

*Hypothesis 4*: Greater narrative coping, specifically meaning-related coping will predict significantly higher ED scores.

What about links between ED and specifically religious forms of coping? In contrast to the positive links between religiousness and well-being, religiousness is thought to be unrelated to psychosocial maturity (i.e., ego development, ED) (Hy & Loevinger, 1996). Remember that ED is a measure of psychosocial maturity, and there is no reason to believe that religiousness and maturity are related in any particular way. Instead, Loevinger suggests that religion is simply expressed differently at different ED levels. Is religiousness passively influenced by ED level as this suggests, or is there perhaps a reciprocal link between religiousness and ego development? Religiousness is often cited as an important meaning-making resource, and “the search for coherent meanings in experience is the essence of the ego or of ego functioning” (Hy & Loevinger, 1996, p. 4). Thus, religiousness could be a resource that enables and empowers people to consider the meaning of tragic events more fully, perhaps even resulting in elevated ED. Alternatively, religiousness could provide built-in meanings and pre-scripted end points to meaning-making processes, resulting in less pressure to move to greater levels of ego development to find meaning. Stated another way, for some their religiousness may encourage elevations to ED, and for others their religiousness may discourage its development. Situational factors, such as the severity of the stressor, may also play a role, as some negative events can be so disorienting that they shake people’s overall sense of meaning and coherence, rendering their religious (or nonreligious) meaning systems ineffective to reestablish order and coherence.
Such an intense threat to meaning would likely require a great deal of meaning-making effort to resolve. It could, therefore, create a context for greater meaning-making and growth in ED. In support of this idea, some narrative research suggests that making meaning after life-course-altering events (such as divorce) can influence ego development (e.g., L. King & Raspin, 2004). It is not obvious, therefore, whether narrative religious coping should predict lower or higher ED levels (or both).

**Endings, meaning-making and the good life.** According to Davis, Nolen-Hoeksema, and Larson (1998), two important predictors of recovery (positive adjustment) following trauma and loss are (1) finding some benefit in the loss and (2) making sense of it. Tuval-Mashiach, Freedman, Bargai, Boker, Hadar, and Shalev (2004) similarly report that (1) positive self-evaluation and (2) creation of meaning are two uniquely narrative tools that are essential to effectively cope with trauma. In support of this, Laura King and colleagues (L. King et al., 2000) found that happy endings in coping stories were associated with heightened levels of well-being. It is unclear whether narrating happy endings lead to heightened well-being or not. Perhaps greater well-being leads to narrating happy endings, or perhaps some people are simply more positive in both their story-telling and in their self-reported well-being, as a result of some yet unspecified cause. In addition, many researchers include the experience of positive emotions and the absence of the experience of negative emotions in their assessments of subjective well-being (Lucas & Diener, 2008). The story ending—well-being relationship, then, may be a simple correlation between similar constructs, rather than something causal. Or it could be a reciprocal relationship, where well-being leads to certain story conventions, which in turn lead to well-being outcomes (McLean, Pasupathi, & Pals, 2007). Based on this work,
Hypothesis 5: A higher number of positive endings and lower number of negative endings in narratives will predict positive well-being.

As mentioned earlier, Loevinger’s ego development theories propose that ED progresses independently of well-being. Attaining a high level of psychosocial maturity, for instance, says nothing about whether a person will also be happy. Research tends to confirm this independence (e.g., J. J. Bauer & McAdams, 2004a; J. J. Bauer & McAdams, 2004b; L. King et al., 2000; McCrae & Costa, 1983). It is expected, therefore, that the number of positive and negative narrative endings will not be related to maturity.

Method

Participants and Procedure

Analyses in the current chapter used the same Faith, Politics, and the Life Story (F&P) data and participants as those found in Chapter Two. The current analyses combine blend qualitative, narrative data with the quantitative measures used in the previous chapter. The portions of the F&P data relevant to these analyses are described next.

The F&P Study was designed to further our understanding of the relationships between identity, personality, religion, and politics. Consequently, all participants were interviewed for approximately two hours about their life story, their personal faith, and their politics. The interview format was based on McAdams’ (2006) life story interview, which prompts interviewees to tell the story of eight key scenes from their life story (high point, low point, turning point, high point from childhood, low point from childhood, significant adolescent memory, significant adult memory, and future scene). Additional life story scenes, along with other qualitative questions, related to religion and politics were also added to the interview. The interviews were digitally recorded and professionally transcribed. The transcripts were then
used as primary data for the narrative analyses. After the interview, each participant was
given a packet of “pencil and paper” self-report measures that required approximately two
more hours to complete. Participants were paid $100 upon completion of the self-report packet.
Among the large number of measures, the packet included the 54-item psychological well-
being scale (PWB; Ryff, 1989), the 5-item satisfaction with life scale (SWLS; Diener et al.,
1985), 18 sentence stems that comprise the Washington University sentence completion test of
ego development (a measure of psychosocial maturity; Hy & Loevinger, 1996), the 5-item
Duke religion index (which measures organizational, personal, and intrinsic aspects of
religiousness; H. M. Koenig et al., 1997), the 10-item religious commitment inventory (RCI—
10; Worthington et al., 2003), 15 items from the RCOPE religious coping measures (5 scales
that measure helpful and harmful ways that religion can be used to regain control; Pargament et
al., 2000), the 240-item NEO-PI-R Big Five personality assessment (Costa & McCrae, 1992),
and a demographic form that prompted for religious affiliation.

Outcome Measures

**Psychological well-being Scale.** The psychological well-being scale (PWB; Ryff, 1989)
is described in Chapter Two.

**Satisfaction with life scale.** The satisfaction with life scale (SWLS; Diener et al., 1985)
is described in Chapter Two.

**Ego development and psychosocial maturity.** Loevinger’s “ego” is a concept of
psychosocial function and maturity that she describes as the “unity of personality, individuality,
the method of facing problems, opinion about oneself and the problems of life, and the whole
describe Loevinger’s measure of ego development (ED) as "one of the most comprehensive
constructs in the field of personality development” (p.792). Change in ED can occur over the entire life course, albeit slowly. Higher levels of ego development are marked by differentiated and complex representations of the self in relation to others, whereas low levels are characterized by more simple representations (e.g., black and white, right and wrong). ED was measured using the Washington University sentence completion test of ego development (WUSCTED; Hy & Loevinger, 1996), the gold standard for ED assessment (Cohn, 1991). The WUSCTED prompts participants to complete 18 sentence stems (e.g., “What gets me into trouble is…,” “Being with other people…,” “Rules are…”). Each item was scored according to guidelines, aggregated for each participant, and assigned a total protocol rating (TPR). The TPRs indicate the different levels or stages of ED. Level 1 is reserved for the presocial infant who still lacks an ego; therefore, the stages begin with Level 2 (“Impulsive”: Egocentric and dependent) and progress to Level 9 (“Integrated”: Cherishing individuality). An advanced graduate student coded the responses after completing the training manual and establishing an acceptable agreement rate with practice materials (Hy & Loevinger, 1996). The ED scoring guidelines are self-instructive and have shown high levels of reliability and internal consistency (Loevinger, 1976). The current project is not concerned with the designation or description of any one particular ED level; therefore, analyses were based on participants’ aggregated item scores (rather than the TPR) to maximize variability on this outcome measure. Total scores could range from 36 to 162. Current sample scores ranged from 77 (4.3 mean item score, roughly equivalent to Level 4: Conformist, where social niceness is highly valued, there is a clear perception of right versus wrong, and rules are followed for their own sake) to 121 (6.7 mean item score, roughly equivalent to Level 8: Autonomous, where the autonomy of others is highly valued, there is a high tolerance for ambiguity, and life is seen as filled with shades of
gray). The current sample mean total score was 96.4 ($SD = 7.9$, $\alpha = .76$, roughly equivalent to Level 6: *Conscientious*, where an internalized standard of right and wrong is valued, separate from the standards of friends or family members, there are multiple possibilities to be evaluated in important decisions, and there is a value placed on achievement of goals and ideals and on improving the self).

**Measures Related to Religiousness**

**Duke religion index (DRI).** The Duke religion index (H. M. Koenig et al., 1997) is described in Chapter Two.

**Religious commitment inventory – 10 (RCI-10).** The religious commitment inventory – 10 (Worthington et al., 2003) is a 10-item scale that assesses religious commitment. Sample items include, “My religious beliefs lie behind my whole approach to life,” “I spend time trying to grow by understanding my faith,” “It is important for me to spend periods of time in private religious thought and reflection,” “I enjoy working in the activities of my religious organization,” and “I enjoy spending time with others of my religious affiliation.” Response choices for these items range from “Not at all true of me” (1) to “Totally true of me” (5). In the current study, scores ranged from 17 to 50 (maximum total score), with a sample mean of 40.7 ($SD = 7.9$, $\alpha = .90$).

**Religious coping scales (RCOPE).** The five religious coping scales related to using religion to regain control (Pargament et al., 2000) are described in Chapter Two.

**Coding the Narratives**

The life story interview prompts participants to narrate many different kinds of scenes from their lives (e.g., high point, low point, turning point, childhood, adolescent, and adult memories, as well as an imagined future scene). In addition, the F&P study asked participants
to narrate life scenes depicting the beginnings of their faith, faith low point, faith high point, and their politics. Three scenes were used in this project: Overall low point, negative childhood, and faith low point scenes (See Appendix C for the interview prompts for these three scenes). People’s narrations of very low points in their lives should reliably contain examples of the difficulties they had to cope with, descriptions of how they coped with them, and perhaps even the meanings of those scenes in their lives overall. The narratives were systematically coded for nine themes, developed a priori. These themes captured adverse events, religious and nonreligious coping, and story endings in the three nadir scenes of our participants’ life stories. Appendix B contains the full coding manual developed to code the narrative data for this project. The researcher and a trained undergraduate student coded all of the narratives. Disagreements in the coding were discussed and resolved by consensus, and final codes were used in the analyses. The following paragraphs provide an overview of the nine themes.

**Coding the event.** First, the most predominant adverse event in each nadir scene was identified and then categorized by type of event (personal health threat, relationship trouble, death of close significant other, career/job difficulty, religious disillusionment, etc.). This coding was used as a descriptive tool.

**Coding the process: Coping and religiousness.** Coding the narratives for religiousness and coping proceeded in four steps. First, coders identified all instances of coping described in the narratives. All coding was guided by a codebook developed by the researcher, based primarily on descriptions of three broad, quantitatively-derived coping strategies (cf. Connor-Smith & Flachsbart, 2007; see Appendix B). Second, coping attempts that did not include or otherwise draw upon religious resources in any way were scored for the presence (+1) or absence (0) of three nonreligious coping themes: (1) active coping (also called Primary Control
Engagement Coping in the literature; e.g., problem-solving, support seeking, emotion regulation), (2) meaning-related coping (also called Secondary Control Engagement coping; e.g., cognitive restructuring, acceptance, distraction), and (3) disengagement coping (e.g., avoidance, denial, wishful thinking, withdrawal). Each scene could receive a +1 score for none, one, two, or all three of the coping strategies, and theme scores were then summed across all three scenes, resulting in a total score for each theme that could range from zero (not mentioned in any of the three nadir scenes) to three (mentioned in all three scenes). The result was three nonreligious coping strategy total theme scores that could range from zero to three. For the third step, if coping attempts included aspects of a participant’s religiousness (e.g., religious activities, relationships, institutions, beliefs), coders attempted to classify these instances as religious versions of nonreligious active, meaning-related, and disengagement coping.

Consequently, each scene was coded for the presence (+1) or absence (0) of religious active, religious meaning-related, or religious disengagement coping. Total scores for these three religious coping themes were created in the same manner as for the nonreligious coping themes, resulting in an additional three total narrative coping theme scores that could range from zero to three.

**Coding the resolution.** The third phase of the narrative investigation involved coding each scene for the valence of each story’s ending, for the relative “goodness” and “badness” of the end result of the event and attempts to cope with it. Because positive and negative emotionality are not opposite ends of a singular dimension (e.g., happiness is not the opposite of sadness; Rafaeli & Revelle, 2006), scenes were coded for the presence (+1) or absence (0) of both positive endings and negative endings. Thus, each scene could end positively, negatively, neutrally (neither positive nor negative), or mixed (both positive and negative). Scores for each
ending type were summed across scenes, resulting in total scores for positive endings and for
negative endings that ranged from zero to three.

I coded the 122 participants’ three scenes (365 total scenes) for each of the nine
narrative themes. A trained undergraduate honor’s psychology student also coded each of the
scenes for all nine themes. Both coders remained blind to all participant characteristics until all
coding was completed. In addition, participants’ low point scenes were coded separately and
not in succession (i.e., all 122 participants’ overall low point scenes were coded and then all of
the childhood low point scenes, followed by all of the faith low point scenes). The
undergraduate coder also remained blind to the specific study hypotheses. All narrative coding
was presence (+1) versus absence (0) coding. Therefore, Winter’s (1973) category agreement
statistic was used to compute coding reliabilities. The category agreement statistic is a stronger
test than percent agreement. The Kappa statistic (Landis & Koch, 1977) was not used because
the coding is dichotomous, and the distribution of 0s and 1s was skewed for some themes
(either a high or low base rate for each theme). Because of the relatively limited distribution
and variance of the zero to three range of the narrative variables, statistical tests were limited.

Results

Narrative Coding

The codebook developed for this project is included in Appendix B.

Narrative events. For descriptive purposes, the 365 negative events that were the
subjects of participants’ low point stories were classified into 11 categories (frequency):
intergenerational conflict (e.g., with parents or children, 63), death or significant illness of
loved one (49), problems with church, the pastor, or other Christians (43), trouble with peers
(32), poor mental health (27), marriage/romance trouble (22), work problem (22), problems with God (21), abuse in childhood (12), personal health crisis (7), other (67). Naturally, the nature of the events varied based on the scene: No marriage/romance or work issues in the childhood scenes and more issues with church or God in the faith low point scenes than in the other scenes, for example. The extraordinary wide range of events used as the subjects of these low point scenes is noteworthy. Participants told stories of everything from the death of a child to problems at work, from suffering violent abuse as a child to being ridiculed by peers, from crises of personal faith to disappointment with clergy.

**Nonreligious active coping.** Nonreligious active coping occurred in 169/365 (46%) of all narrative scenes. Similarly, 105/122 (86%) of participants used this theme in at least one of their narrative scenes. The mean occurrence of nonreligious active coping across the three scenes was 1.4 (SD=.84, Range: 0-3). An excerpt from Linda’s²⁰ low point scene of dealing with postpartum depression while residing out of the U.S. is characteristic of how this theme emerged in the narratives,

“It was very frightening for me, and I remember a particular day when I was standing with my son in my arms on the balcony of our apartment and almost jumped off, almost- let him go and then jumped off after. And that was just very, very frightening and I just sat down and **called Stan’s parents [participant’s in-laws] to take the baby**, and I just went and **got myself down to the ground floor**, we were up in the 11th floor. And I was very, very shaken by that and I think that after that, **I brought myself out of it through a combination, really, really through working out**, kind of beating myself up physically, I mean **I just decided that it was not going to continue** and I talked with the doctor about it but they did not know anything about postpartum depression. **So I did bring myself out of it.**”

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²⁰ Participant #52 was not asked by the interviewer to narrate a Faith Low Point scene.

¹⁰ All names have been changed to pseudonyms, both the names of the participants and of the others mentioned in their stories.
Linda took immediate action by calling her in-laws for help and seeking the help of a doctor. Her longer-term strategy to protect herself and her new baby was to regain control over her destructive thoughts and feelings through intense physical workouts, leveraging her resources and will to defeat the depression and suicidal thoughts over time. Not everyone dealing with postpartum depression would necessarily talk about it in this way. Notable in this sample of religiously committed people is her omission of any report of attempting to rely on God or other religious resources in the midst of this disorienting and scary event. One might think that an event of such high stakes, where she felt out of control of herself, might have elicited reliance on some sort of religious resources that transcended her strong emotions, but that was not the case for how Linda recounted the event. Linda also scored a 25 out of a possible 27 on the measure of overall religiousness, a full point above the sample mean (see Chapter Two for a description of this measure), so it is not that she was less religious than others in the sample. Linda’s only mention of religiousness was to say that the experience had a positive outcome in that it gave her the ability to understand what others are going through in the ministry work she is now involved in.

Robert’s low point scene provides another example of active coping in narratives. He described how he dealt with his 20-year incarceration for drug possession, “So I got in school, and it was one of the best things that I did. I ended up getting a certificate in data processing, a certificate in small business management, my Bachelor’s Degree.” Like Linda, Robert drew strategically on nonreligious resources and was determined to make his situation better, “From the experience, I made my mind up. I had told myself that I wasn’t going to do ten years in the penal institution and not accomplish anything. I wasn’t going to go in there and come back out the same person that I was.” Unlike Linda, Robert did make some mention of religiousness. He
spoke of choosing to learn more about various religious traditions and developing that aspect of his life as a response to his incarceration as well.

**Religious active coping.** Participants mentioned using their religiousness in an active way a little less frequently than they did nonreligious active coping attempts. Religious active coping occurred in only 126/365 (36%) of all narrative scenes, but 94/122 (79%) of participants used this theme in at least one of their narrative scenes. The mean occurrence of active coping across the three scenes was 1.0 (SD=.69, Range: 0-3). Rick described how he responded after his wife discovered he was downloading sexually explicit material on his computer, “I went to a program in the city that was kind of like a discipleship program--it was a 30-week program and it went kind of through--it applied spiritual principles from Christianity to just addiction and struggle, especially in sexual addiction, and I went to that program for a year.” Where Rick sought out religious support in a setting where he could experience social support from others in a similar situation, Clara described using her religiousness to cope in a more solitary way. After finding out at the birth of her first child that her husband had been seeing a former girlfriend right before they were married, Clara explained, “So it was like I -- and the only thing, I would get up in the morning and I would read Psalms 23, Psalms 27, Psalms 37 and I think Psalms 24 before I would start my day, and those Psalms helped me through that year in my life.” Neither Rick nor Clara mentioned much if any active coping apart from religiousness. In fact, Clara spoke of actively rejecting help from others to deal with her hurt and sense of betrayal, “But she [participant’s mother] was trying to pull me out, and I didn't want to be pulled out. I wanted to be left alone.”

**Nonreligious meaning-related coping.** Meaning-related coping, the most prevalent coping theme in the narratives, occurred in 199/365 (55%) of all narrative scenes, and 116/122
(95%) of participants used this theme in at least one of their narrative scenes. The mean score was 1.6 ($SD=0.74$, Range: 0-3). Patrick described how he responded after discovering that his son’s mother was seeing another man, “And another thing that it taught me about men and machoism and all of that, oftentimes, men hold things in and they are afraid to show pain, afraid to show hurt, afraid to show weakness. I was hurting and I refused to hide and to pretend like it did not hurt. So that helped me in taking an inventory of myself and dealing with what is real in life as opposed to the images that are projected upon us by society.”

**Religious meaning-related coping.** Religious meaning-related coping occurred in 145/365 (40%) of all narrative scenes, and 103/122 (84%) of participants used this theme in at least one of their narrative scenes. The mean score was 1.2 ($SD=0.74$, Range: 0-3). Kay described a low point in her faith, where she eventually came to an understanding and acceptance of God’s role in helping her with her brother’s suicide, “Even though I think that God put things into place to answer the questions that I had, and to prepare me for my brother’s death, in hindsight I can see those things happened. I still think it took me a long, long, long, time to reconcile those two things, because if I wanted anything in my life, I wanted my brother to be okay.” Claire described coming to believe that God is always with her, despite her experience when she was two-and-a-half or three-years-old (in the mid-1940s) and her parents left her home alone at night to go to a local tavern. Claire remembered waking up alone and feeling “absolutely, absolutely terrified.” She related the early childhood experience to strong fears of being abandoned as an adult and then described the understanding she had come to at the time of the interview, “That memory doesn't haunt me now. But it did for many, many, many, many years….They say we come to believe. And that's the process that I'm talking about.
And the believing is in the spirit of God, the higher power, or whatever you want to call Him, is really there for you all the time.”

**Nonreligious disengagement coping.** Disengagement coping occurred in 67/365 (18%) of all narrative scenes, and 58/122 (48%) of participants used this theme in at least one of their narrative scenes. The mean score was 0.6 (SD=.63, Range: 0-2). Although not as prevalent of a theme as the others, nearly half of participants described disengagement as a coping strategy in at least one narrative scene. These instances were sometimes as commonplace as Kevin’s description of growing tired of being the "good kid" with no problems or needs and starting to rebel to get more attention, “I dropped out of everything. Spent a lot of time with my girlfriend. I wasn’t even seeing my friends that much and getting drunk every weekend and things like that.” There were more serious stories of drug use or addiction, and then more emotionally charged or extreme events like Gwen’s childhood low point scene, where she described witnessing a peer get hit by a car and killed while crossing the street to go to school. Although quite an understandable response, especially for a child, Gwen disengaged by avoiding conversations about death, “For years, I couldn't talk about death. I couldn't talk to people who had death in the family.”

**Religious disengagement coping.** Religious disengagement coping occurred in 53/365 (15%) of all narrative scenes, and 50/122 (41%) of participants used this theme in at least one of their narrative scenes. The mean score was 0.4 (SD=.55, Range: 0-2). Cecelia described the wishful thinking side of disengagement regarding her financial troubles, “And I was expecting God to just give me a miracle and just eradicate all these bills. You own everything, just $14,000 away, just make it happen!” John disengaged by distanced himself from God as a way to cope with the violence he witnessed while fighting in Vietnam, “We would also bring the
dead bodies back or dying bodies of Vietnamese back for questioning, and that was -- it did not seem like there was a God to me… And I think I just pulled away. I was not really believing Him.”

**Positive ending.** A positive ending occurred in 268/365 (73%) of all narrative scenes, and 118/122 (97%) of participants ended at least one of their narrative scenes with a positive ending. The mean score was 2.2 ($SD=.82$, Range: 0-3). Ending the story of a negative event on a positive note was a nearly ubiquitous phenomenon. Kelly’s ending of her story of discovering that her son had a very rare form of cancer while he was in college, just a couple of years prior to the interview, followed a common form, “It’s a very difficult experience, but there can be very good things that come out of it too. Sort of makes you think about who you are, you know, what’s important, value your friends and the people who are so helpful, and caring under those circumstances…” She acknowledged the difficulty or negative emotions related to the event and then followed up with the benefits. Among other things, respondents mentioned facing fears, learning lessons, changing how they decided to raise their children, changes to their character, and receiving the love and compassion available to them.

**Negative ending.** A negative ending occurred in 200/365 (55%) of all narrative scenes, and 107/122 (88%) of participants ended at least one of their narrative scenes with a negative ending, fewer than for positive endings. Remember that each scene could be coded for either, both, or neither ending. The mean score was 1.6 ($SD=.95$, Range: 0-3). Shaun ended her childhood story of witnessing a dog being beaten badly while living overseas this way, “It was just horrible. It was just horrible. And to this day it haunts me. Um, and it impacted me probably just...I mean, obviously just the horror of it was so bad. And then just to know that there could be just such mean, cruel cruelty. Yeah. I think it’s just really impacted me just to
know. I think I was always kind of on the lookout for other cruel, mean...sort of thing. I mean, I think it **really impacted me just for life.**” Agnes described the lasting influence of a miscarriage she had, “Well, I think, along with a lot of other things that happened in my life, it’s sort of had the impact that I kind of always wait for life to drop the other shoe, you know what I mean? It’s **hard to ever think that things are going to go really well, because I have a tendency to think something bad is going to happen.**” Alfred narrated two negative endings.

The first was at the conclusion of the scene where his older brother developed schizophrenia, “He has been at home since he was 23 or 24 years old and he is now 66. So that is the low point because I had to live through some very unusual times with my parents. It was very hard on us. It was very hard on the whole family. I have two brothers, the one that got sick and the one that is okay. And you worry that that might happen to you because it happened to your brother. And he did unusual things. He was violent at times. **It is just a very sad story.**” Although Alfred continues on to mention developments in the understanding and treatment of schizophrenia in the last 40 years, the story ending has a lasting sadness to it. The Catholic priest sexual abuse scandal is the subject of Alfred’s low point of faith scene. “It is important to me because I do not think anyone should ever view, as a child, that a priest is supposed to be a special person who is trained to be the best they can be to help people, to help all humans, humanity and then they fail so miserably. It is just the most terrible thing I can think of. That is really terrible.” Again, there is a quality of enduring badness to the ending.

**Hypothesis 1**

The first hypothesis predicted that total narrative religious coping theme scores would have significant and positive relationships with the overall religiousness scales (Duke religion index, DRI; religious commitment index, RCI-10) and religious coping scales (RCOPE). The
analyses in Chapter Two were based on the relationships between traits, coping, and well-being outcomes, holding religiousness constant. The tests in this chapter differ from those in Chapter Two in two notable ways: (1) they do not include personality traits, and (2) they use primarily narrative measures of religious coping, rather than only quantitative ones.

Correlations among narrative religious coping themes, the DRI and RCI-10 measures, and RCOPE scales are in Table 3.1. In support of the first part of the hypothesis, narrative religious meaning-related coping scores did relate significantly and positively to measures of both overall religiousness (DRI) and religious commitment (RCI-10). Those who were most religiously active and reported the highest levels of religious commitment were also most likely to use their religiousness to engage in meaning-related ways of coping with adversity. This supports the notion that (1) survey measures of religiousness also tap some aspects of an internalized religious identity, and (2) there is something internal about religiousness, beyond social support, that can provide a resource for coping with adversity in life.

The second half of this hypothesis relates narrative themes to the RCOPE scales. Full support of this portion of the hypothesis would have found significant, positive correlations between the two religious engagement coping themes in narratives (religious active coping and religious meaning-related coping) and the two scales of adaptive religious coping (collaborative religious coping and active religious surrender), and between narrative disengagement coping and the two maladaptive religious coping scales (passive religious deferral and pleading for direct intersession). The actual results were mixed (see Table 3.1).
Table 3.1

**Full Sample Correlations among Narrative Themes, Religiousness, Religious Coping, and Outcomes**

<table>
<thead>
<tr>
<th></th>
<th>Narrative Themes</th>
<th>Religiousness</th>
<th>Religious Coping</th>
<th>Outcomes</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>1. 2. 3. 4. 5. 6. 7. 8.</td>
<td>9. 10.</td>
<td>11. 12. 13. 14. 15.</td>
<td>16. 17.</td>
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<tr>
<td>N = 122</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>1. Active</td>
<td></td>
<td></td>
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<tr>
<td>2. Meaning</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>3. Disengagement</td>
<td>.19 *</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. rActive</td>
<td>.23 **</td>
<td>-.11</td>
<td>.18 *</td>
<td></td>
</tr>
<tr>
<td>5. rMeaning</td>
<td>.04</td>
<td>-.08</td>
<td>.07</td>
<td>.41 ***</td>
</tr>
<tr>
<td>6. rDisengagement</td>
<td>.08</td>
<td>-.06</td>
<td>-.03</td>
<td>.04</td>
</tr>
<tr>
<td>7. Pos Ending</td>
<td>.17 †</td>
<td>.20 *</td>
<td>.09</td>
<td>.19 *</td>
</tr>
<tr>
<td>8. Neg Ending</td>
<td>-.13</td>
<td>-.17 †</td>
<td>.04</td>
<td>-.12</td>
</tr>
<tr>
<td>9. DRI</td>
<td>.17 †</td>
<td>.08</td>
<td>-.11</td>
<td>.14</td>
</tr>
<tr>
<td>10. RCI-10</td>
<td>.15 †</td>
<td>-.02</td>
<td>-.13</td>
<td>.16 †</td>
</tr>
<tr>
<td>11. Collaborative</td>
<td>.15 †</td>
<td>-.01</td>
<td>-.11</td>
<td>.16 †</td>
</tr>
<tr>
<td>12. Active</td>
<td>-.04</td>
<td>.13</td>
<td>-.04</td>
<td>-.02</td>
</tr>
<tr>
<td>13. Passive</td>
<td>.03</td>
<td>-.13</td>
<td>.11</td>
<td>.13</td>
</tr>
<tr>
<td>14. Pleading</td>
<td>.13</td>
<td>-.07</td>
<td>.02</td>
<td>.17</td>
</tr>
<tr>
<td>15. Self-Directing</td>
<td>-.13</td>
<td>-.02</td>
<td>.03</td>
<td>-.07</td>
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<tr>
<td>16. PWB</td>
<td>.07</td>
<td>.02</td>
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<td>-.05</td>
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<tr>
<td>17. SWLS</td>
<td>-.16 †</td>
<td>-.08</td>
<td>.02</td>
<td>-.15 †</td>
</tr>
<tr>
<td>18. ED</td>
<td>.06</td>
<td>.02</td>
<td>.04</td>
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**Note.** N = 122; † p ≤ .1, * p ≤ .05, ** p ≤ .01, *** p ≤ .001
Active religious coping related positively to overall religious commitment, 
*collaborative religious coping*, and *pleading for direct intercession* coping, all at a trend level. The positive trend between active religious coping and *pleading for direct intercession* was surprising. One possible reason that active religious coping in narratives might correlate positively with a *passive* coping scale has to do with *pleading* as prayer. Praying was often mentioned in the narratives, but the study was not about prayer per se, and interviewers were not instructed to prompt participants for the specific contents of their prayers in the life narrative scenes. The decision was made that whenever unspecified prayer was mentioned in narratives (e.g., “I prayed”), it was coded as active religious coping. It is conceivable, however, that some of those prayers (if more fully elaborated) would have contained religious disengagement coping (perhaps for wishful thinking or withdrawing from God, etc.). This might have accounted for the surprising association.

The only statistically significant relationship between narrative coping and the religious coping scales was between religious meaning-related coping and the *passive religious deferral* scale. So, those who told stories where they used religion to make meaning in the midst of adversity also scored higher on a self-report scale measuring a tendency to avoid engaging with problems by passively expecting God to solve them. We see a potential for religiousness, then, to be used negatively in meaning-related coping. This idea is reinforced somewhat if we glance ahead to the results of the second hypothesis and observe the negative trend between religious meaning-related coping and psychological well-being. It seems that there could potentially be a dark side to using one’s religion in meaning-related coping efforts, and that dark side might come in the form of using religiousness as a way to avoid fully engaging to deal with adversity in life.
Overall religiousness was related to the two other narrative themes in noteworthy ways: Those who ended their stories positively were significantly more religious overall (higher DRI scores) than those who did not end their stories on a positive note, and those who ended their stories negatively were significantly less religious overall (lower DRI scores) than those who did not end their stories with any lasting negativity. It is not surprising that the more religious participants also narrated more positive and fewer negative story endings. The overarching meta-narrative of Christianity is one that goes from good (Garden of Eden) to bad (sin and separation from God) back to good again (reconnection with the Divine nature through Jesus and the promise of complete union with God, complete with perfection of body, soul, mind, spirit, and society). The more that individuals endorse and identify with a Christian form of religiousness, the more likely they are to internalize various aspects of the Christian meta-narrative, including a redemptive story that ends with an enduring positivity in the face of past (and even present) adversity.

A story arc that goes from good to bad or starts bad and remains bad has been shown to relate to poor mental health and well-being, while a story arc that moves from bad to good is associated with greater emotional health and well-being (Dan P. McAdams, 2006). Since religiousness is related to positive emotional health and well-being, one would expect a low point story arc to go from bad to good (i.e., significant adversity that ends positively). It is not immediately clear why the relationships between positive and negative endings and religious commitment were non-significant. Except for a couple of instances, the associations between the religious commitment scale and key study variables were generally smaller yet consistent with those between overall religiousness and key study variables.

Hypothesis 2
Hypothesis 2 stated that narrative religious coping theme scores would positively predict well-being and would do so more strongly than survey measures of religiousness and religious coping. This hypothesis was unsupported by the data. In fact, religious coping in the narratives trended toward lower levels of well-being. Active religious coping trended toward lower satisfaction with life scores, and religious meaning-related coping trended toward lower psychological well-being scores. This unexpected result is explored more fully in Chapter Four. Finally, global religiousness was not significantly related to well-being in this sample. In hindsight, this is most likely an artifact of intentionally choosing a highly religious sample. Using overall religiousness scores to illustrate, the distribution of scores was severely truncated, with a significant ceiling effect. The upper limit of overall religiousness scores was 27. Twenty participants (16%) received a score of 27; \( n = 25 \) participants (20%) received a 26, \( n = 21 \) (17%) received a 25; \( n = 13 \) (11%) received a 24; and \( n = 8 \) (7%) received a 23. That amounts to 87 participants (71%) who received overall religiousness scores at the top 20% of possible scale scores. Most likely, there was not enough variance in overall religiousness to detect an association.

Hypothesis 3

Hypothesis 3 stated: Religious coping in narratives would relate to well-being more strongly than nonreligious narrative coping. The data did not support this hypothesis. Narrative themes religious and nonreligious were unrelated to well-being outcomes. Similar to how religious active coping predicted diminished life satisfaction at a trend level, nonreligious active coping also predicted diminished life satisfaction at a trend level, with a nearly identical correlation coefficient. Neither was stronger than the other, and they were in the opposite direction of what was predicted. As stated earlier, religious meaning-related coping predicted
diminished psychological well-being at a trend level, also in the opposite direction of what was predicted. In this case the religious version of meaning-related coping did predict psychological well-being \(r(122) = -0.17, p = 0.06\) more strongly than the nonreligious version \(r(122) = 0.02, p = 0.86\). However, considering the trend-level significance of the stronger association and the contradictory direction of the correlation, the researcher does not find that this result represents adequate support of the hypothesis.

**Hypothesis 4**

_Hypothesis 4_ stated that greater narrative coping, especially meaning-related coping would predict significantly higher ED scores. This hypothesis was not supported in the data. The only narrative theme that had any relationship with ED was the negative endings code. Negative endings were marginally predictive of elevated ego development \(r(122) = 0.17, p = 0.07\). The great majority of scenes ended with a positive ending (73% of them), and roughly half of all scenes (55%) ended with a negative ending. Roughly a quarter of scenes (28%), therefore, ended with a mixed ending (both positivity and negativity in the ending). Given that higher ED is characterized by a greater tolerance for both internal inconsistency and ambiguity, perhaps it was specifically the negative endings paired with positive endings that drove this association. To test this idea, the researcher recoded the positive and negative narrative ending scores for each scene into four categories (positive ending only, negative ending only, both endings present, and neither positive nor negative ending) and then tested the association between the mixture of good and bad endings with ED. The result was that the negative endings drove the association. The combination of both positive and negative endings was not significantly related to ED \(r(122) = 0.01, p = 0.95\). Instead, higher ED was associated with ending narrative scenes negatively, without any lingering positivity \(r(122) = 0.19, p = 0.04\).
Hypothesis 5

Hypothesis 5 predicted a higher number of positive endings and lower number of negative endings in narratives would predict positive well-being. This hypothesis was unsupported in the data. Rather than predicting well-being, narrating stories with more positive endings and fewer negative endings was instead related to greater overall religiousness. This association is not surprising, especially given that the sample was entirely Christian and much more religious than average. The prime overarching narrative of Christianity is a redemptive one, where the story arc goes from bad to good. Adam and Eve sinned by disobeying God’s instruction not to eat the forbidden apple, and they were thrown out of paradise as a result, but God had a plan to bring them back into a pure and ideal state. Jesus died on a cross, but he rose from the dead and is now alive in Heaven. Jesus taught his disciples that, “In this world you will have trouble, but take heart, I have overcome the world” [cite]. And there are many, many examples of this meta-narrative arc in the Christian cannon. In light of that, it makes sense that many Christians who score higher in overall religiousness will have internalized that negative-to-positive narrative arc to a greater degree than their peers who scored lower on the measure of overall (Christian) religiousness.

Summary

To summarize the findings, three points: First, the new narrative coding scheme seemed to work, despite some hypotheses being unsupported. The narrative codes hung together in sensible ways, especially the engagement-oriented coping themes. For example, nonreligious active and nonreligious meaning-related coping were significantly and positively correlated with each other, as were religious active and religious meaning-related coping. Religious and nonreligious meaning-related coping and religious active coping all correlated positively with
positive endings in narratives, as did overall religiousness. And positive and negative
endings in narratives correlated negatively with each other.

The only genuinely surprising finding within the narrative codes was a positive
correlation between nonreligious disengagement coping and religious active coping. Looking
deeper into these two narrative codes, there were many instances where respondents said that
they prayed, but they did not elaborate on those prayers. Were they actively collaborating with
God, using the prayer to passively disengage from dealing with the stressor, or something else?
In these cases it was not possible to make a distinction. The researcher therefore made the
decision to code all nonspecific instances of prayer in narratives as active religious coping,
unless there was sufficient information to code them as religious disengagement. It is possible,
then, that the nonreligious disengagement code picked up common variance with some
unexpressed religious disengagement in the nonspecific mention of coping through prayer.
There is not a clear explanation for this, however.

Second, although not foregrounded in the hypotheses, it is worthwhile to point out that
religiousness was a key variable in the analyses. Overall religiousness (DRI) and religious
commitment (RCI—10), even among such highly religious individuals, were significantly
associated with religious meaning-related coping in narratives (+), positive story endings (+,
DRI only), negative story endings (-, DRI only), the two adaptive religious coping scales (+,
not RCI with religious active coping), and the coping scale that assessed excluding God from
coping (-, self-directing coping).

Third, a picture emerged in the coding and analyses that positioned religiousness as an
internalized and meaning-related resource that people drew on to make sense of their lives in
the midst of hardship and adversity, and religiousness further helped them to achieve a positive
and adaptive resolution to their story. That religiousness was unrelated to well-being was likely due to the extremely truncated range of religiousness in the sample, a tolerable limitation considering the significant value of examining how religion works (or not) among those who score at the highest levels of overall religiousness. A natural future step is to explore narratives of religion and coping among a participant pool that is much more varied in their degree of religiousness, including both seculars and those who are religious and/or spiritual and do not identify as Christian.

**Discussion**

**Question 1: What characterizes coping discourse in narrative low point scenes of committed Christians?**

This chapter addressed three questions, beginning with asking how people use religion in their life narratives as part of their discourse on coping with life’s most difficult losses and challenges. Specifically, do qualitative, narrative accounts of coping with adversity display religious and nonreligious versions of the coping types identified in the quantitative coping literature (Connor-Smith & Flachsbart, 2007)? The answer to this specific question was that participants narrated stories that included a variety of coping strategies, and these were easily classified into religious and nonreligious versions of active (primary control engagement), meaning-related (secondary control engagement), and disengagement coping strategies. Correlations among the narrative coping themes also hung together in sensible ways. Participants who narrated scenes with active coping employed this active mode in both religious and nonreligious ways (i.e., there was a significant relationship between religious and nonreligious versions of the narrative active coping themes). In addition, there was significant overlap between the two engagement coping strategies (active and meaning-related coping) in
narratives. If a participant employed nonreligious active coping, s/he was also likely to speak of using nonreligious meaning-related coping strategies. Likewise, if a participant employed religious active coping, s/he was also likely to speak of using her or his religiousness to cope in meaning-related ways as well.

In addition, these positive engagement coping strategies, especially the religious versions, were accompanied by a greater number of positive narrative endings. Religious meaning-related coping in particular coincided with narrating fewer negative endings. Although these themes did not correlate significantly with measures of psychological well-being, life satisfaction, or ego development, they still presented an overall picture of adaptive storytelling. Participants who evidenced these positive coping themes spoke of taking action on their own (or others’) behalf and of reinterpreting (or coming to accept) the difficult events of life in ways that helped the events make sense and fit within the context of their understanding of their overall life story. Alternatively, they may also have shifted their story to accommodate the event. Either way, there was a connection between actively using religion to cope and telling a story that was adaptive in its lingering positivity (L. King et al., 2000).

One reason that these adaptive life story themes were not related to positive well-being measures could be due to the method used for coding and counting the themes. Because this coding was brand new, the focus was on gaining a very broad view of religious and nonreligious coping in the narratives. A simple presence/absence (1/0) coding scheme seemed the best way to capture this. The result, however, was very low variation and subsequently decreased power to discover meaningful associations. The limited variance of the narrative theme scores also necessitated using simple correlations instead of more sophisticated statistical techniques to test study hypotheses. A natural remedy to this would be coding the
prevalence of each theme within each scene and not limiting the number of times a theme is counted. This would expand the current range of scores for each scene from a 0/1 dichotomy to a hypothetically limitless upper bound for each scene. This stands in sharp contrast to the zero-to-three possible range for total theme scores. Such a shift in coding strategy and technique would create increased variability and remove the artificial ceiling on the number of times a theme could be counted. For example, if a participant spoke of praying alone for guidance, seeking social support from fellow congregants, and asking others to pray for her or him, these would count as three instances of religious active coping in the proposed revised coding scheme. This change in coding could provide meaningful insight and differentiation from those who perhaps mentioned using prayer alone as a religious active coping method. Under the current method, both participants would receive the same score for religious active coping in the scene (1). Under the proposed scheme, they would receive different scores (3 and 1, respectively). A simple word count would then be needed to partial out the variance due to brevity or verbosity on the part of each respondent, that those who talk more would naturally have higher theme scores.

**Question 2: Congruence**

The second of the four questions addressed in this chapter addressed the congruence between pencil and paper measures of religiousness and religious coping and storied accounts of past experiences. The specific question asked, are people who score higher on quantitative assessments of overall religiousness and of religious coping also more likely to talk about having used their religiousness to cope with life’s losses, challenges and adversity when they narrate their life story? Those who were more religious overall or were more religiously committed tended to use their religiousness to making meaning when faced with difficult life
events, more so than those who did not score as high on these measures. There was not a similar congruence between the specific religious coping strategies tested via questionnaire and the broader narrative religious coping themes.

**Question 3: What modes of religious and nonreligious coping in autobiographical narratives seem to facilitate positive psychological adaptation and maturity, and which do not?**

The third question addressed in this chapter was, what modes of religious and nonreligious coping in autobiographical narratives seem to facilitate (or at least accompany) positive psychological adaptation and psychosocial maturity, and which do not? The results were strange. None of the tested relationships reached more than trend-level significance, and some of these associations were in the opposite direction from what was predicted. For example, both religious and nonreligious active coping and religious meaning-related coping in narratives were related \( p \leq .1 \) to poorer psychological well-being and life satisfaction, rather than to greater psychological well-being and life satisfaction. Possible explanations for this are illustrated in Chapter Four, which explored how the answers to these questions differ among members of the four largest Christian traditions in the United States today.
Chapter 4: Exploration and Discovery of Religious Coping Patterns in Autobiographical Narratives of Christian Adults: The Moderating Influence of Religious Traditions

To this point, Chapters Two and Three examined the connections among individuals’ personality (in traits and narratives, respectively), religious coping (in surveys and narratives, respectively), and in quality of life outcomes of midlife adults with significant religious commitments. The current chapter helps explain some of the findings in Chapter Two and deepens the work of Chapter Three by exploring narratives and key study variables through a lens of religious tradition. Religiousness is a very personal matter, to be sure (see Berger, 1967, for an argument for how religion has become a more personal and private phenomenon than it used to be). For the participants in the current study, however, their religiousness is also socially and institutionally grounded. To be included in the study, participants had to report significant commitments to a particular religious location. Namely, they had to be regular church attenders. The current chapter explores the potential influence (if any) of religious tradition, along with concomitant exposures to doctrine and ritual, presumably received through church attendance and related social interactions: Are these exposures expressed in religious and nonreligious coping in autobiographical narratives, as well as in survey measures of overall religiousness, religious coping, and quality of life outcomes?

Thus, in the current chapter, I explore Chapter Three’s hypotheses from a perspective that allows religious traditions to display their uniquenesses. I remove the constraints of a homogenizing, full-sample approach to allow the correlational data to tell a story that is unique.

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11 By religious tradition, I mean religious location or context that is influenced and shaped by social, ethnic, denominational, and historical forces (Steensland et al., 2000).
to each religious tradition included the study. Then we dive deep into the qualitative narratives to allow individual participants’ voices to put flesh on the bones of those unique correlational relationships, to explore the varieties of religious experience that emerge through the autobiographical narratives of mainline Protestants, evangelical Protestants, African American/black Protestants, and Catholics (the four largest religious groups in the United States today; Steensland et al., 2000).

“Denominations are part of larger religious traditions with well-elaborated sets of creeds, teachings, rituals, and authority structures. These dimensions of religious culture shape members’ nonreligious attitudes for well-grounded historical reasons” (p. 293; Steensland et al., 2000). If these dimensions shape “nonreligious attitudes,” then they are likely to participate in shaping the ways that religious structures are internalized and drawn upon in times of adversity or struggle as well. This chapter explores how religious traditions relate to and could even help shape religious and nonreligious coping, overall religiousness, and quality of life outcomes, as well as how they infuse autobiographical narratives.

Opportunely, the current study selected enough members from the four largest religious traditions in the United States to conduct meaningful exploratory investigations for each: mainline Protestants, evangelical Protestants, African American/black Protestants, and Catholics. These explorations begin with the two puzzles that emerged from the full sample findings in Chapter Three: (1) three of the four adaptive/engagement coping themes were negatively related to well-being outcomes, when they were expected to evidence positive adaptation to adversity, and (2) narrative religious meaning-related coping was positively related to the maladaptive passive religious deferral coping RCOPE scale, again a case of an adaptive narrative element that was associated with a maladaptive religious coping style. By
addressing these puzzles through the lens of religious tradition, we get to ask questions like (1) whether or how members of four different Christian religious traditions compose narratives of religious and nonreligious coping differently; (2) what are the different functions that narratives serve for the different groups; and (3) are seemingly adaptive narrative constructs indeed adaptive for everybody? These puzzles and questions are addressed in this chapter, in addition to investigating interrelationships among study variables from Chapter Three. Further, the narratives get greater voice in this chapter, as they are the primary mouthpiece through which each religious tradition is allowed to speak.

**Importance and Measurement of Religious Tradition**

Up to this point, this dissertation has investigated how people express their religiousness: how do they cope, religiously and nonreligiously; how do these coping styles relate to well-being; and how does religious and nonreligious coping generally emerge in autobiographical narratives? I now turn to the matter of where people express their religiousness. Does where they are religiously affiliated influence or relate to the how of their religiousness?

Societal factors—such as social structures, context, and change—are not often foregrounded by personality psychologists (R. A. Emmons, 1999). As a result, questions of whether members of different social or cultural groups engage in different personality and psychological processes remain largely unanswered. Surprisingly, psychologists concerned explicitly with the intersections of personality and religion (a case where social groupings are
readily observable) tend to ignore social context as well. What follows are five reasons for taking religious traditions into consideration when investigating intersections between religiousness and personality/identity.

A first reason to take religious traditions into account is to address the question of what characteristics do in fact distinguish members of one group from another, Evangelicals from Catholics, for example. Individual affiliations with these groups predict significant social attitudes and political behaviors (e.g., Green et al., 2007), but do they also predict personality and identity-related constructs such as religious and nonreligious coping styles and strategies, for example?

A second reason to take religious tradition into account is that different religious traditions (even within Christianity) espouse diverse religious tenents or beliefs, and recent research connects specific religious beliefs with dissimilarities in how people cope with stressful events (e.g., Newton & McIntosh, 2009; Newton & McIntosh, 2010). Although we do not yet know how potent people’s “exposure” to various religious traditions may be (and/or for whom they are most potent), theological traditions and teachings can and do color and shape religious thoughts and behaviors (Steensland et al., 2000). Alternatively, people may select into various religious traditions because those traditions reinforce particular aspects of their personality, coping, or religiousness. It is likely, then, that personality and religious coping intersect with people’s exposure and selection into religious traditions in meaningful, and as yet unrecognized, ways.

There are a few exceptions to this (e.g., McAdams & Albaugh, 2008a). Most exceptions, however, tend to focus on mental health outcomes and use personality factors in the background, as mediators or moderators of key constructs (e.g., MacDonald & Luckett, 1983; Tix & Frazier, 2005).
Third, by their very nature, narratives are influenced by people’s exposure to religious cultures and teachings. Remember that the stories that individuals construct from their unique experiences are influenced by a “menu” of acceptable meanings, images, themes, and contents that the broader culture both provides and approves (McAdams & Pals, 2006). Consequently, the various cultures that people belong to ought to influence their life stories. When people belong to congregations or other religious institutions, they are exposed to both local and larger systems of meaning within these religious “cultures.” It is reasonable to expect that religious traditions will influence individual narrative meaning-making, religious coping, and nonreligious coping, as well as quality of life outcomes, in substantive and measurable ways.

A fourth reason for taking religious tradition into consideration is that narratives are not like survey data, where people are forced to choose from predetermined response options. Narratives allow people to tell their story in their own words, unbridled to use the story mechanisms, conventions, patterns, and language they choose. We have the opportunity to view narrative identity as it intersects with religious tradition. Selection into the Faith and Politics study was based in part on regular attendance at religious services within one’s religious community. Participants had either chosen to continue in a religious tradition they received in childhood or to branch out into some new expression of their religiousness. Either way, they chose their place of religious belonging and their commitment to it. And it is natural to ask what influence (if any) their commitment and belonging to a religious tradition might have on their autobiographical narrative expressions of religious and nonreligious coping.

Prior studies that have examined religious tradition demonstrate the importance of taking this mediating factor into account (cf. Cohen et al., 2005; Hutchinson, Patock-Peckham,
identifying meaningful psychological and developmental differences between religious groups. For example, Patock-Peckham and colleagues (1998) found that the protective relationship between religious affiliation and drinking behaviors was greater for Protestant college students than it was for Catholic college students (as compared with drinking behaviors of those with “no religion”). If this study had examined only the relationship between religious affiliation and drinking behaviors for the full sample, to make a claim about the relationship between Christian religiousness/affiliation and college drinking behaviors in general, this important finding would have been missed. In addition, if the relationship was weak enough among Catholics, the full-sample correlation statistic might have been below traditional significance levels and consequently resulted in a Type II error, that there was no significant relationship between religious affiliation and drinking behaviors in college students. By not investigating differences in social and psychological phenomena between religious groups, we might be missing many such findings that could inform our understanding of where the psychology of religion and personality intersect with the social world.

Research designs like that of Patock-Peckham and colleagues are headed in the right direction, but there remains significant opportunity to improve religious classification in psychological research. The simple Protestant-Catholic divide is not sufficient to capture differences among Christians in the U.S., and most researchers are not familiar enough with the key ethnic, historical, and theological differences that distinguish among the various groups (T. W. Smith, 1990; Steensland et al., 2000). It might seem elemental to group Christians by their

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13 Not all research finds meaningful differences between religious groups, of course (e.g., Gerwood, LeBlanc, & Piazza, 1998); however, there is enough evidence of such differences in psychological outcomes to warrant asking the question far more often than we currently do.
denomination: For example, Lutherans with Lutherans, Evangelicals with Evangelicals, and so forth. But not all Lutherans are the same. Consider *Evangelical Lutherans (ELCA)*, who are not at all “evangelical” in how that label is commonly understood. Alternatively, other Lutheran denominations have more in common with Evangelical denominations than they do with other Lutherans (e.g., the Lutheran church—Missouri synod, LCMS). What is required is a thorough understanding of how the denominations relate to each other in the social world, and the history of how each came to be like some and distinct from others.

Indeed, this has been a measurement problem across the social sciences for some time now. This is not to say that social scientists have been neglectful in this area. The task is a daunting one. Experts disagree on how best to make these distinctions, and such decisions can weigh heavily into study findings (e.g., Hackett & Lindsay, 2008; Steensland et al., 2000). If not done thoughtfully, classification can lead to unintended consequences (Hackett & Lindsay, 2008).

Fortunately, sociologists have developed methods for classifying religious groups in the U.S. into meaningful categories for research purposes. The two primary methods for this are the FUND (T. W. Smith, 1990) and RELTRAD (Steensland et al., 2000) methods (Hackett & Lindsay, 2008). The FUND method places religious traditions into one of three ordinal groups, ordered along a continuum of religious conservatism: Fundamentalist, moderate, or liberal.

There are at least two discernable difficulties with this method. First, most evangelical traditions are classified as fundamentalist. The current connotation of “Fundamentalist” as a descriptor is unquestionably negative, even more so than “evangelical”. In addition, “fundamentalist Christian” is generally used to describe those Christians who generally endorse the tenents prescribed by the Christian fundamentalist movement authored in the early 1900s.
There is a marked difference between mainstream Evangelical doctrine and Christian fundamentalism. The second difficulty is that the FUND assumes that the most important characteristic distinguishing among religious groups is an ordered dimension of religious liberalism to conservatism. It excludes the influence of social and historical factors that combined to make the tradition what it is today, and for the purposes of the current study, it forces a rank-ordering that may or may not be relevant to religious coping and well-being. In contrast, the RELTRAD method (Steensland et al., 2000; based on Kellstedt et al, 1996), sorts congregations and denominations categorically and includes both ethnic and religious belonging (along with denominational histories) into its sort. The result is that these categories are allowed to vary by kind, rather than by degree, a much-improved sort for predicting religious, social and political attitudes (Steensland et al., 2000; Woodberry, Park, Kellstedt, Regnerus, & Steensland, 2012).

As an innovative move within the field of personality and religion, the current project implements this proven sociological method for sorting individuals into well-designed ethno-religious affiliations. The four most common religious traditions in the United States are familiar to most: Evangelical Protestant, mainline Protestant, African American/black Protestant, and Catholic.

Steensland and colleagues (2000) make the following distinctions among the groups.

Beginning with the two predominantly white, Protestant denominations, “Mainline

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14 The RELTRAD method was developed in the context of data available in the General Social Survey (GSS), a nationally representative sample of the non-institutionalized population of the United States, and its use has been primarily in analyses of those data with respect to political and social attitudes and behaviors. At least one personality and religion investigation referenced the method as a way to improve on the classification system it used (Cohen et al., 2005). Researchers have begun to use it with non-GSS data (e.g., Moreira-Almeida & Koenig, 2006). One goal of the current project is to familiarize psychology of religion researchers with this underutilized typology.
denominations have typically emphasized an accommodating stance toward modernity, a proactive view on issues of social and economic justice, and pluralism in their tolerance of varied individual beliefs. Evangelical denominations have typically sought more separation from the broader culture, emphasized missionary activity and individual conversion, and taught strict adherence to particular religious doctrines” (pp.293-294). To provide some tangible ways that these two groups differ, using data from 2004, mainline Protestants make up roughly 16% of the U.S. population, evangelical Protestants 25% (Green et al., 2007). Thirty-five percent of mainline Protestants endorsed an item saying they believe that God “is a person,” versus 70% of Evangelicals; 33% of mainline Protestants attend worship services every week, versus 63% of Evangelicals; and 31% of mainline Protestants say that religion is important and offers “a great deal of guidance” to them versus 58% of Evangelicals (Green et al, 2007).

Turning to African American/black Protestants, “The Black Church has undoubtedly served as the central institution in the lives of African Americans from before emancipation through the civil rights movement until the present day…Because religious and social spheres mutually influence one another to a greater extent in the African American community than in American society as a whole, the influence of denominational culture on social attitudes among African Americans is particularly strong…. While the religious-meaning system and the social organization of the Black Church are similar on the whole to those found in white evangelical denominations, African Americans emphasize different aspects and nuances of Christian doctrine, especially the importance of freedom and the quest for justice (Lincoln & Mamiya 1990; Roof & McKinney 1987). This legacy, which has historically reflected their material and psychological deprivation and their political marginality, continues to shape economic and political attitudes today. While more liberal on most economic attitudes, such as those related to
poverty and the redistribution of wealth, black Protestants are generally conservative on social and family issues (Lincoln & Mamiya 1990; Reichley 1985; Wald 1987)” (Steensland et al, 2000, p. 264). Black Protestants comprise just over 9% of the adult U.S. population and are somewhat similar to evangelical Protestants in terms of their view of God (54% believe God is a person), worship attendance (59% attend weekly worship services), and religious salience (67% say that religion is important and offers them a great deal of guidance) (Green et al., 2007).

Catholics are relatively easy to distinguish from the other three largest Christian traditions (which are all Protestant). There is also a deep divide between (non-Latino) Catholics and Protestants, not just in the United States but in the last 500 or more years of Western history, that includes brutal bloodshed over differences in doctrine and practice (Orsi, 2007). Robert Orsi (2007), a notable religious studies scholar of American Catholicism, writes that this Protestant—Catholic divide is driven at its heart by a difference in beliefs about the nature of the ritual that Protestants call *taking communion* and Catholics call *receiving the Eucharist*, as well as beliefs and actions that follow from this difference. The ritual has its roots at the Last Supper, the last meal that Jesus shared with his disciples before he was crucified. At that meal he held up bread and wine, said of them, “This is my body,” and later “This cup is the new covenant in my blood,” and he instructed them to eat and to drink (see chapter 22 in the Gospel of Luke, verses 19-20). Orsi argues that Protestants interpret Jesus’ words and actions symbolically, naturally and that Catholics interpret them literally, supernaturally. For Catholics, the communion wafer and wine literally and supernaturally become Jesus’ actual body and blood during observance of this ritual. The very nature of the Western, modern world, however, is defined by total rejection of the supernatural (Orsi, 2007). In this way, Protestants and their
traditional beliefs are more easily aligned with modern, Western religious sensibilities than are Catholics. Perhaps as a result, (non-Latino) Catholics in the United States have been on the receiving end of significant religious prejudice (Dolan, 2011).

Comparing non-Latino Catholics to Protestants, Catholics comprise nearly 18% of the adult U.S. population and are similar to mainline Protestants in terms of their view of God (32% believe God is a person), and religious salience (32% say that religion is important and offers them a great deal of guidance); although, their worship attendance is slightly higher (49% attend weekly worship services) (Green et al., 2007). The higher church attendance among Catholics is likely motivated by their more collectivistic nature (as compared with mainline or evangelical Protestants) (Lynch, 2001).

All four of these groups are represented in the present study. This allows for an exploration of how the narratives and relationships among personality, religiousness, religious coping, and quality of life are similar or different in these four largest religious groups in the U.S. today, for the purpose of advancing our understanding of religion’s role in human development and psychological adaptation to adversity.

**Analysis Plan**

The exploratory analyses proceeded in three phases. One-way ANOVAS revealed differences in mean levels of key study variables (both from narratives and from survey measures). Next, the full sample correlation table in Chapter Three was replicated separately for each of the four RELTRAD groups, to evaluate relationships among the key study variables from Chapter Three in each of the groups. Finally, participants’ narratives were selected to express differences within and among the four groups in a meaningful way. For these exploratory narrative analyses, I chose sample cases that were at the high and low ends of
relevant correlations. Then, I read those participants’ scenes with an eye toward generating hypotheses for why the correlational results might be as they were\textsuperscript{15}.

**Method**

I deepen my analyses of the narrative data in this chapter, using qualitative and exploratory methods. The participants and measures are identical to those used in the previous chapters. The only new variable introduced in the current chapter is the religious tradition moderator, described below.

**Religious tradition classification (RELTRAD).** Participants were asked to report their religion by filling in the blank “Religion: ______________” on a demographics form. Many wrote some form of denominational affiliation (e.g., “Presbyterian (USA)”, “Congregational - United Church of Christ”, “Evangelical Free”, or “Roman Catholic”). These participants were classified into one of four associated religious traditions (mainline Protestant, evangelical Protestant, African American/black Protestant, or non-Latino Catholic) using the RELTRAD (religious traditions) typology developed by Steensland and others (Steensland et al., 2000). Those who did not designate a denomination or who wrote something more general (e.g., “Christian”) were classified based on the church they were recruited from. The researcher found each church website on-line, discerned what denomination the church was affiliated with, and used the RELTRAD typology to classify participants accordingly. There were six cases where an African American participant indicated affiliation with a predominantly white evangelical or Catholic congregation. These participants were categorized according to their actual religious tradition/affiliation rather than as black Protestants (as prescribed by the

\textsuperscript{15} A note regarding how this was done: Cases were selected first, based on correlational relationships of quantitative variables (derived from both surveys and narratives). Low point scenes were then read with an eye for the a priori narrative themes and for emergent, content-based themes. Cases were not eliminated and/or re-selected to highlight emergent themes.
RELTRAD method). The final categorization resulted in 37 participants classified as mainline (white) Protestant, 35 as evangelical Protestant (5 black and 30 white), 27 as black Protestant, and 23 as Catholic (1 black and 22 white).

**Results**

The first exploratory analysis was to compute group means for each of the key study variables and then test whether or not they were statistically different (see Table 4.1 for ANOVA results). Looking first at overall religiousness, evangelical and black Protestants scored higher than mainline Protestants. Regarding religious commitment, black and evangelical Protestants scored higher than both their mainline Protestant and Catholic counterparts. The groups scored very similarly in terms of their narrative theme scores. The exceptions were that black Protestants talked about nonreligious active coping in significantly more scenes than Evangelicals did and talked about religious active coping in significantly more scenes than all three other groups.
Differences in *Mean* Levels of Key Study Variables

Table 4.1

**One-Way ANOVA of Mean-Level Differences of Key Variables among RELTRAD groups**

<table>
<thead>
<tr>
<th>Narrative Themes</th>
<th>Dependent Variable</th>
<th>Mainline Protestant</th>
<th>Evangelical Protestant</th>
<th>Black Protestant</th>
<th>Catholic</th>
<th>$F^1$</th>
<th>$p$</th>
<th>Notes$^2$</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Active</td>
<td>1.5 (.9)</td>
<td>1.0 (.7)</td>
<td>1.7 (.8)</td>
<td>1.4 (.8)</td>
<td>5.1</td>
<td>.00</td>
<td>d</td>
</tr>
<tr>
<td></td>
<td>Meaning</td>
<td>1.7 (.8)</td>
<td>1.5 (.6)</td>
<td>1.7 (.9)</td>
<td>1.7 (.8)</td>
<td>1.0</td>
<td>.41</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Disengagement</td>
<td>0.6 (.6)</td>
<td>0.4 (.5)</td>
<td>0.7 (.6)</td>
<td>0.6 (.8)</td>
<td>1.4</td>
<td>.25</td>
<td></td>
</tr>
<tr>
<td></td>
<td>rActive</td>
<td>0.9 (.6)</td>
<td>1.0 (.7)</td>
<td>1.5 (.6)</td>
<td>0.8 (.7)</td>
<td>5.7</td>
<td>.00</td>
<td>b df</td>
</tr>
<tr>
<td></td>
<td>rMeaning</td>
<td>1.0 (.6)</td>
<td>1.2 (.8)</td>
<td>1.4 (.8)</td>
<td>1.1 (.8)</td>
<td>1.8</td>
<td>.15</td>
<td></td>
</tr>
<tr>
<td></td>
<td>rDisengagement</td>
<td>0.5 (.6)</td>
<td>0.4 (.5)</td>
<td>0.5 (.6)</td>
<td>0.4 (.5)</td>
<td>0.5</td>
<td>.69</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pos Ending</td>
<td>2.0 (.8)</td>
<td>2.2 (.7)</td>
<td>2.4 (.7)</td>
<td>2.3 (1.0)</td>
<td>0.9</td>
<td>.43</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Neg Ending</td>
<td>1.9 (.8)</td>
<td>1.7 (1.0)</td>
<td>1.4 (1.0)</td>
<td>1.5 (1.9)</td>
<td>1.7</td>
<td>.18</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Overall Relig.</td>
<td>21.9 (4.1)</td>
<td>24.8 (2.2)</td>
<td>25.2 (1.7)</td>
<td>23.5 (2.7)</td>
<td>8.7</td>
<td>.00</td>
<td>ab</td>
</tr>
<tr>
<td></td>
<td>R-Commitment</td>
<td>36.8 (8.7)</td>
<td>43.6 (7.0)</td>
<td>44.1 (6.2)</td>
<td>38.6 (6.1)</td>
<td>7.9</td>
<td>.00</td>
<td>ab f</td>
</tr>
<tr>
<td></td>
<td>Collaborative</td>
<td>8.4 (2.5)</td>
<td>9.5 (1.8)</td>
<td>9.4 (2.0)</td>
<td>8.9 (2.2)</td>
<td>2.1</td>
<td>.10</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Active</td>
<td>8.5 (2.4)</td>
<td>8.8 (2.1)</td>
<td>9.1 (2.2)</td>
<td>9.0 (2.5)</td>
<td>0.5</td>
<td>.71</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Passive</td>
<td>3.2 (.7)</td>
<td>3.9 (1.3)</td>
<td>4.5 (2.0)</td>
<td>3.3 (.9)</td>
<td>6.4</td>
<td>.00</td>
<td>b f</td>
</tr>
<tr>
<td></td>
<td>Pleading</td>
<td>5.4 (2.0)</td>
<td>6.7 (1.9)</td>
<td>7.3 (1.9)</td>
<td>5.9 (2.2)</td>
<td>5.8</td>
<td>.00</td>
<td>ab</td>
</tr>
<tr>
<td></td>
<td>Self-Directing</td>
<td>5.2 (2.4)</td>
<td>4.6 (1.4)</td>
<td>4.7 (1.5)</td>
<td>4.7 (1.6)</td>
<td>0.8</td>
<td>.48</td>
<td></td>
</tr>
<tr>
<td></td>
<td>PWB$^4$</td>
<td>261.6 (21.5)</td>
<td>248.6 (22.3)</td>
<td>257.8 (25.1)</td>
<td>264.2 (23.6)</td>
<td>2.8</td>
<td>.04</td>
<td></td>
</tr>
<tr>
<td></td>
<td>SWLS</td>
<td>26.3 (5.8)</td>
<td>25.0 (7.5)</td>
<td>20.2 (6.8)</td>
<td>26.4 (5.8)</td>
<td>5.6</td>
<td>.00</td>
<td>b df</td>
</tr>
<tr>
<td></td>
<td>Ego Dev.</td>
<td>100.2 (8.1)</td>
<td>95.8 (7.2)</td>
<td>90.1 (5.7)</td>
<td>97.6 (6.9)</td>
<td>9.3</td>
<td>.00</td>
<td>ab df f</td>
</tr>
</tbody>
</table>

**Note.** Each group’s variable *mean (standard deviation)* is reported in the group’s column.

1 Degrees of freedom of the F-statistic were identical for each dependent variable: 3 df (between groups), 118 df (within groups). Variables with a significant $F$-statistic are in bold.

2 Tukey and Bonferroni post-hoc tests were used to test all group mean differences. These tests yielded identical results in terms of traditional statistical cutoffs. The letters in this column indicate mean differences between groups that are significant at the $p < .05$ level or stronger:
   a mainline/evangelical Protestant difference
   b mainline/black Protestant difference
   c mainline Protestant/Catholic difference
   d evangelical/black Protestant difference
   e evangelical Protestant/Catholic difference (none found)
   f black Protestant/Catholic difference

3 Education and income are ordered categories. For education, 1 = “High School”, 2 = “Some College”, 3 = “College (B.A., B.S., etc.)”, 4 = “Graduate Work (Post College)”. For income, 1 = “Under $20,000”, 2 = “$20,000 - $40,000”, 3 = “$40,000 - $60,000”, 4 = “$60,000 - $80,000”, 5 = “$80,000 - $100,000”, 6 = “Over $100,000”

4 between-group differences for psychological well-being only significant at the $p < .1$ level, evangelicals as compared with mainline Protestants and as compared with Catholics
Regarding religious coping (RCOPE) scales, black Protestants reported engaging in more passive religious deferral coping (maladaptive) than each of the three other groups, significantly more than mainline and evangelical Protestants. Black Protestants also scored highest on the scale that assessed pleading for direct intercession coping (maladaptive), and mainline Protestants scored lowest, significantly lower than both evangelical and black Protestants.

Finally, regarding the quality of life outcomes, although there was a significant $F$ statistic for the psychological well-being scale, between group differences were only significant at a trend level (evangelicals Protestants scored lower than both mainline Protestants and Catholics). Black Protestants reported significantly lower life satisfaction and ego development than each of the other three groups. In addition, mainline Protestants scored significantly higher on ego development than evangelical Protestants as well.

Overall, mainline Protestants in this sample scored lowest on measures of overall religiousness and religious commitment, and highest on ego development, as compared with the other groups. The black Protestants in the current sample described religious and nonreligious active coping in more narrative scenes, reported more use of passive and pleading maladaptive religious coping styles, and had lower life satisfaction and ego development than the other groups. The evangelical Protestants and Catholics in the sample did not differ in any additional ways.

Next, I turn to using the RELTRAD system as a moderator of the inter-variable (correlational) relationships tested in Chapter Three.

**Explaining the puzzles from chapter three: Exploring the unique functioning of four groups of Christians**
In this section, I explore the relationships among the key variables tested in Chapter Three, this time within each of the four RELTRAD groups: Mainline Protestants, evangelical Protestants, African American/black Protestants, and Catholics. Diving the full sample into four discreet groups turns religious tradition into a moderator of the associations evaluated in Chapter Three. Breaking the sample into these four groups helps offer possible explanations for the puzzles identified in Chapter Three, as well as explore other potentially meaningful relationships and differences in the autobiographical narratives. Again, the puzzles included, (1) three of the four adaptive/engagement coping themes were negatively related to well-being outcomes, when they were expected to evidence positive adaptation to adversity, and (2) narrative religious meaning-related coping was positively related to the maladaptive passive religious deferral coping RCOPE scale, again a case of an adaptive narrative element that was associated with a maladaptive religious coping style. The results of this exploratory RELTRAD moderation are next.

**Mainline Protestants: *Just Do the Right Thing.*** Most of the action in the mainline Protestants’ exploratory analyses centered on nonreligious active coping in the narratives, i.e., taking direct action to deal with the problem or to *Just Do the Right Thing* (see Table 4.2 for correlations among all study variables for mainline Protestants). Nonreligious active coping correlated strongly with overall religiousness \( r(37) = .45 \), religious commitment \( r(37) = .45 \), the collaborative religious coping scale \( r(37) = .53 \), and the self-directing religious coping scale (negatively, \( r(37) = -.45 \)). The nonreligious active coping theme found in their narratives seemed to be one foundational way that the mainline Protestants in our sample expressed living out their faith. The more religious they were, the more often they talked about nonreligious
<table>
<thead>
<tr>
<th>Table 4.2 “Just Do It!”</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mainline Protestant Correlations among Narrative Themes, Religiousness, Religious Coping, and Quality of Life Outcomes</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Narrative Themes</th>
<th>Religiousness</th>
<th>Religious Coping</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n = 37</td>
<td>1.</td>
<td>2.</td>
<td>3.</td>
</tr>
<tr>
<td>1. Active</td>
<td></td>
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*Note. n = 37; † p ≤ .1, * p ≤ .05, ** p ≤ .01, *** p ≤ .001*
ways that they actively coped with the adversity found in their low point narratives. The more they endorsed a collaborative style of coping with God and eschewed a self-directing (God-excluding) style in their coping, the more they talked about nonreligious active coping in their narratives. And the more they talked about nonreligious active coping in their narratives, the less often they ended their stories in a negative way ($r(37) = -.49$) and more often they tended to end in a positive way ($r(37) = .31$).

This presents a bit of a riddle. How is it that heightened religiousness diminished their religious discourse or (less likely) that diminished religious discourse of this sort leads to heightened religiousness? Perhaps the more religious the mainline Protestants are, the less compelled they feel to talk explicitly about their religious practices (e.g., Evans, 2010). Or possibly an unknown factor is influencing both.

Nancy Ammerman, a renowned sociologist of religion, offers one possible explanation. Although most people assume from survey research that mainline Protestants are less religious than evangelical Protestants, Ammerman (1997) identified a pattern and sensibility to the ways that mainline Protestants express their religiousness, one that takes a different form than traditionally evangelical exclusivity and certitude. She argues,

“Their [mainline Protestants$^{16}$] religiosity is not just a paler reflection of evangelical fervor, but different in kind. For that reason, I will not call them ‘lay liberals.’ Religious liberalism is usually taken to indicate the opposite end of a scale that is anchored by evangelicalism. That, in turn, indicates that the primary differences we should observe are differences in the certainty with which people hold traditional beliefs: evangelicals are relatively certain, whereas liberals have rejected or reinterpreted traditional ideas about the Bible, Christ's divinity, the second coming, and the like. What I want to suggest, however, is that this category of religious persons is best defined not by ideology, but by practices. Their own measure of Christianity is right living more than right believing.” (p.197, emphasis mine).

$^{16}$ Ammerman points out that others call this group “lay liberals.”
Taking appropriate action to deal with adversity in life, to *Just Do the Right Thing*,
or as Ammerman argues, to practice *right living*, is one way that mainline Protestants live out
their faith. Louis and Sophie’s stories demonstrate various examples of how high religiousness
can be storied out with largely nonreligious language, at least in terms of their active coping.
Their meaning-related coping did sometimes have a religious bent. Louis’s and Sophie’s
narratives received the highest nonreligious active coping score possible, a score of three, and
they hit the ceiling for the Duke overall religiousness measure by scoring a 27.

Louis exhibits a high degree of wanting to be good, to do good, to make good decisions.
The following scene was coded for many narrative themes, but the point of the current
discussion is only the nonreligious active coping. Examples of nonreligious active coping are in
bold. Louis began his low point scene with the following, “When I was a senior in high school,
I got a girl pregnant, and our first intention was *I was going to be a noble man and we will
get married.*” Louis’s parents, especially his mom, lobbied the couple to think more about their
futures and decide to have an abortion. And so the woman did, and then, “We broke up after we
both went to separate schools in college. I *tried to stay together* a little bit but we broke up.…
I guess in the long run, it was meant to be. I always look back on it now and wonder what if we
had made those changes and gotten married. It is still a little bit of hurt, though I have prayed
for forgiveness and everything.… For a long time I thought that I was being punished for that
decision.” Presumably the punishment Louis imagined was from God. With such a high
religiousness score and talk of praying for forgiveness for the abortion, it is not a far stretch to
suggest that Louis’s motivation to be a “noble man” was at least partly a religious one. He also
tried to *just do the right thing* by staying with the girl, even though they went to different
colleges.
The abortion came up again in Louis’s faith low point scene:

“I mentioned that, there were many times I felt like I was being punished for that whole incident about the abortion stuff. And later in life, I was working at a job, my son was born, and then I got fired from the job. I worked in another job for about a year, year-and-a-half, and then it happened again and I got laid off. I tried a number of things, and I was not being successful, and I had a very low self-esteem over it. I felt like I was a failure. This was before I really got back and understanding my faith again. My faith was there, although I was blaming myself. I thought I was a failure. I went to some counseling for it. And I remember one time, because we were running out of money and my wife was really stressing over it. I had doubts whether we were going to be in our home for another year if I kept at this rate. And I remember sitting in a car and crying and asking God why is this happening to me, why? I did not understand. What am I to do? And I feel different about everything today. I mean I have been through a couple more jobs since then. I was laid off here for six months. I went back to work in February. But I do not have those same feelings of self-doubt because I have a different outlook on my faith now than I had just five years ago. I handled it a lot differently. I did not look at it as being punished anymore because I have learned that I have been forgiven for those things in the past.”

It is possible that Louis is naturally prone to the sort of negativity and self-criticism that fueled his belief that he was being punished, and then he used his religiousness to extricate himself from that negativity. It is also possible that Louis’s self-doubt and low self-esteem after the abortion stemmed from not living up to his high moral and religious standards, and it might just have been these standards that led to or amplified his self-doubt and low self-esteem. Perhaps Louis’ religiousness was more cause than cure of his self-criticism and negativity. This is a puzzle that cannot be worked out from the data available here. What is clear, however, is that Louis tried incredibly hard (nonreligious active coping) to live up to certain standards in his life, and he went through a process of learning to accept himself in spite of the ways that he did not

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17 Although Louis talks about his faith helping him come to a place of forgiveness and acceptance, he never really opens up his faith life in these scenes to show its inner workings. We learn nothing about how he came to find that forgiveness and acceptance. He only reports that he “has a different outlook on my faith,” and “I have learned that I have been forgiven for those things in the past.” Louis’s right living and wrestling with feelings of self-doubt are the clearest views we have of those inner workings.
live up to those standards. Most importantly, he credits his deepening religiousness with coming to that acceptance.

Another small window into Louis’s form of active coping and responsibility came through his childhood low point scene. He said he was around 14-years-old when, “I remember in our two years in New York, my father lived with us for the first year, and the second year he got transferred to Southeast Asia during the Vietnam War, and he was down in Thailand. And I remember one day my mom had had a few drinks and she was crying hysterically and she left the house and she went out into the woods. It took us hours to find her, and I did not know why, and I thought my father got killed. And that was the first time my mother actually broke down. That was rather emotional [for me], just thinking about then [that time].” Louis’s father had not been killed. Louis never did find out why his mom had acted the way that she did, and he said that he saw no point in opening that conversation now. He just did the right thing in looking for her at the time that the scene took place in his childhood, and later he accepted his mom’s actions at face value and held nothing against her for creating a situation that was undoubtedly terribly frightening for a young person. Similarly, he showed no blame or upset with his parents’ actions to persuade him and his girlfriend toward the decision to have an abortion, taking the responsibility and regret fully on himself instead. In his life, Louis repeatedly talked about his choices to just do the right thing.

Sophie’s discourse provides perhaps an even clearer example of religiousness being expressed through nonreligious means. Sophie described a low point in her life when she went away to graduate school, her first time living far from home, and she felt very alone. She started off by describing the friends she did have,
“But all those relationships, except for my friends who have come with me, they were hollow, they were lost, they were superficial. That was the time that I experimented with smoking, I was eating too much, I wasn’t exercising. I tried a little marijuana. You know, there were some new and interesting things that I liked, but basically it was probably a time of minor depression. Nothing major, nothing that I ever went and got treatment for. I think about that time as in fact a sense of grounding, because at some point I’d made up my mind to get out of it. I had come home for Christmas and a friend of mine was getting married, and the home thing was bad, because I wasn’t happy where I was, and I wasn’t then happy at home, and everything was just kind of dark, and I went back to school and at that point I set myself free to do some other stuff. And I went and grounded myself by joining an outdoor, cross country [ski] club. And kind of just signed on for something. Went off to a club meeting, didn’t know anybody, didn’t even know how to get to the meeting, but I just knew that I needed this and to make this connection.

“And, the people from that organization are still my friends. That’s where I met my husband. That’s where our best man in our wedding came from. I mean, there’s a lot of things. That period of time and aloneness was dark. I had walked away from my faith in terms of practicing. I had walked away from my family. I had walked away from my friends. But yet, I managed to pull myself out...out of it. I found a way out. I shouldn’t say pull myself. It was a small light and I ran for it. And I became the less clingy, less needy out of that period of time.

“So while if I were to put it into kind of a religious perspective, I’d say to myself, that was a time when I chose not to walk with God, but God was there and held me there and got me through that. And it wasn’t a religious organization that I picked. It was a like a little light. It was just this little pin [light]. I just saw a flyer up on the local sports store, you know, a cross country ski club meeting, and I said, ‘Oh! I’m going to go off and do that.’ And I just kind of went and did it. So it was...who put that little flyer up on the board, I don’t know. But that was a saving [indiscernible].”

Sophie exhibits that she can talk a religious talk, “I chose not to walk with God, but God was there and held me there and got me through that,” but she is very clear that there were no obviously religious actions that she engaged in to get through the time, “It wasn’t a religious organization that I picked,” and “that was a time when I chose not to walk with God.” In fact, she was engaged in some activities considered offensive or prohibited by most church teachings, “That was the time that I experimented with smoking. I was eating too much. I wasn’t exercising. I tried a little marijuana.” She attributed her coming out of her depression in one
sense to, “at some point I’d made up my mind to get out of it” (to *Just Do the Right Thing*).

At the same time, she said there was “a small light,” that she ran toward. She then interpreted the natural progression of her story through a religious lens and said that God held her, even though she was not doing anything manifestly religious, as we most often understand the term. She did not attribute her successful coping to engaging in traditional religious activities, such as prayer or reading the Bible or even to relating with other Christians. Instead, she attributed God with providing many nonreligious things she could do or take hold of to pull herself out of the depression and loneliness she was in. It was joining a cross-country ski club that gave her a handhold… and a social group and a husband. The turning point in Sophie’s narrative came when she decided to engage in right living to cope with her circumstances. She decided that things would be different, and then she got out there and took advantage of the opportunities available.

The less religious mainline Protestants, on the other hand, used less nonreligious active coping in their narratives. In general, they lacked a *Just Do the Right Thing* responsibility and determination in their coping. In fact, there is a noticeable passivity in these narratives. Here are excerpts from Bill’s low point scenes (nonreligious active coping score = 0; Duke overall religiousness = 15).

“Well, it’ll probably work itself out. But right now I have an immediate supervisor who doesn’t appreciate what I’m doing and is harassing me to put out much more volume of workflow and doesn’t see all of the subtle things that I do to help clients in terms of depth. All she wants is the superficial high turnover workflow. And I’m not comfortable working that way. I am really teetering on the edge of deciding to retire a year or two sooner than I might have. Simply because of that one individual.

“As I say, I’m surrounded by people who, you know...Like younger colleagues come to me to get a second look at things that I’m doing, and I’ve got...you know, it’s sort of professorial, I mean, people coming to me for that. I feel it’s rewarding. And yet I’ve got a person blocking the way for seemingly vindictive personal reasons. I think she’s
jealous, or something like that. I can’t get her to admit it. And so right now I’m feeling...Now as it...even a week from now, this could all resolve. But it’s the kind of thing that’s very upsetting to me…. Because it’s not worth working in an environment with a wicked witch.”

Bill held himself as a victim to his boss and did not explore any of the ways that he might be either contributing to or even misinterpreting his situation. He did not explore any alternatives other than passively waiting or taking early retirement to get away. *Just Do the Right Thing* is not a prevalent way of being in his low point scenes. I am not arguing that people who score low on measures of religiousness are passive and do not do what is right. Instead, I am asking the question of what it is about being a regular church attender in a mainline Protestant denomination, yet scoring low on measures of overall religiousness, that is associated with this passive narrative way of being. Let’s look at more excerpts from Bill’s low point narrative scenes.

Bill viewed himself as a victim to others in his childhood low point scene as well. He began his response to the prompt for a low point scene from his childhood this way,

“I started to allude to it a minute ago, and that is relations with other kids. Still to this day, actually, my wife mentions to me that I have a very strong loyalty quotient, and I’ve always been disappointed in reciprocation of that. I was always willing to give more to a friend than I ever found a friend willing to give back to me. Well, I shouldn’t say that totally. I mean undoubtedly there were some. But it does mark me that I was often disappointed, that I would give and give and give, and then try to get some reciprocation when I was needing it and find that it wasn’t there. That the feeling was shallow on the other side.”

When the interviewer asked the respondent to recall a *specific* time in childhood when that happened, Bill avoided engaging the question,

“No. No. I’m afraid I don’t. I dread to think of any of those kinds of things. Or even any other negatives… Well, eventually, the way this evolved philosophically was that I began to decide that each time something would happen like that, that I would be very disappointed about, whether it was a romantic attachment or just friendship, or just even a professional relationship, that people didn’t reciprocate, I looked at it very carefully
and decided that I would not change myself. Because other people weren’t reciprocating was not reason enough to withdraw. I don’t have such high expectations of other people [anymore].”

Although Bill took steps to affirm himself in his disappointment, he ultimately downgraded his expectations of others rather than actively pursue a course of action that could result in more fulfilling relationships.

Bill even downgraded his expectations of God. His low point of faith scene was simply, “I’ve had my downs, but I’ve never been in a position to attribute it to anything religious. There were always other things that appeared to me. And God never smited me down any more than I might have deserved at the time.” One might wonder if Bill’s story has more to do with low scores on quality of life outcomes than with low religiousness: could he really have good psychological well-being and feel satisfied with his life? Remember, both narrative nonreligious active coping and overall religiousness were unrelated to psychological well-being, life satisfaction, and ego development among mainline Protestants. That said, Bill’s satisfaction with life score was the second highest among all mainline Protestants, and his psychological well-being score was right in the middle of the group’s distribution. Bill also scored in the top third for ego development. I am not arguing that greater religiousness caused mainline Protestants to take more action and responsibility for their lives, but there is clearly an association between these two qualities within this sample.

Next, Ed’s low point narratives continue to fill out the picture of this association between low religiousness (Duke score = 15) and less nonreligious active coping in narratives (theme score = 0). Ed’s overall low point story took place in childhood [bold used for emphasis].
“So, there are two similar events. Two things happened, they are very similar, and this was when I was very young. I would still put myself sometime in grammar school. And to this day, they both still haunt me when I think about it. I had two different guys in trouble by lying. And they were both based on a bicycle. I can remember I had borrowed a friend’s bike, and I also had my bike. And the bikes were damaged by people who I knew or I had damaged them myself. And I had lied that these two other guys had did it. I can remember getting pulled out from underneath the bed the first time – where I was hiding – because I was in such fear. It’s like, you know, everyone knew I had lied at that stage. And then the second incident, the cops, the police got involved. And I had to lie to get that guy out of trouble. And it still bothers me this day that I didn’t have, I couldn’t stand up and accept the blame and the punishment that went with the blame.”

Ed was still haunted by his choices as a child. He did not take the experiences as childhood lessons or see anything good in them. Instead, he engaged in tremendous self-criticism about not taking appropriate action as he recalled these low point experiences.

The next low point scene was the childhood low point scene (not quite a quarter of the way through the whole interview, preceded by only four scenes). When Ed got to the childhood low point scene in the interview he already seemed flooded and overwhelmed by the negativity in his stories. He even questioned his emotional stability because of all of the unpleasant memories and emotions coming forward that he would usually “purge out.” He began his scene this way, “Yeah. I’m starting to wonder why I am so stable at this stage of the game because all of the negative ones seem to come flowing at me. Yeah, you know, life. Though you usually purge out the bad events and hold onto the good ones, so this is good therapy for me.”

Ed went on to narrate his scene, “I had a sister who had health problems, and it created a lot of tension in the house. And I’ll tell you at the dining room table was a difficult place to be. My parents did not have a great relationship and during those times, dinner was always a battle….No one wanted to talk about what was going from the standpoint that my sister was very sick, and there were also economic problems at that stage of the game, too. So there was
an undercurrent of those things with no specifics ever being discussed. So little superficial
things would be picked on, but it was clear, looking back now, it was clear other things, the
other two things I mentioned should have been talked about in a frank way and never were.”
There is a striking parallel in how Ed’s childhood scene was negative because there were
negative life events going on that were not being talked about “in a frank way” and his
experience of his own negative memories that he would “purge out,” “with no specifics ever
being discussed.” The negativity he experienced in childhood seems to have a lingering quality,
influencing his current life-reality and experience.

Finally, Ed’s low point of faith,

“Well, again, this is a long scene. [It starts with…] trying to have children for eleven
years. And, believe me, God’s name was brought in on more than one occasion. On both
sides of it all, ‘Gee it’d be a great help,’ and ‘Gee why aren’t you helping?’ So, I would
say that I think maybe that’s when during that period there is when I first I guess
reawakening of what maybe, what religion means, or what God means. At this time I
mentioned my Catholicism and then just letting go of it. I mean, I was just maybe
subconsciously, there is still some Catholicism left in me, but I just I view that
sixteen years of wasted time. Maybe that’s, if I think about that maybe, I thought
that theology and belief was a waste of time because the faith that I was brought
into did absolutely nothing for me. I think it was a damaging experience for me at
least. So, I’m not sure how to answer that [question about a low point of faith scene].
As I look back on the Catholicism, of it all that I’m reflecting on, so we’ve have to pull
that out of the mixture there. I would go with that time period when we were trying to
have children. And sort of wondering vacillating between going back and forth between
‘Please help, please help us,’ to ‘Why are you doing this to us?’”

Ed’s low point of faith scene reveals that there is something in his religious history that may be
a contributor to his current low overall religiousness. Although he still attended church
regularly and claimed a faith tradition as his own, he clearly felt harmed by his religion in the
past and then abandoned by God in his attempts and appeals to have children.

Ed was not the only mainline Protestant in our sample who claimed and then rejected
Catholic roots. Sophie also talked about divorcing her Catholicism.
“When I was in college, I went to a Catholic university… But it was a period of time when I was questioning, but questioning more the structure of the church than the existence of God. While I was at the Catholic university, I began to become dissatisfied with the structure of the Catholic Church. I became dissatisfied with just kind of the rote-ness of the mass. I began to see that, and it’s a belief now, that it’s wrong to require priests to remain celibate. And I think that it’s not progressive, I think that it’s wrong. And there are other, you know, parts of that. So I removed myself from… I declared myself non-Catholic while I was at that university, and that meant I had to take a non-Catholic class, which was just incredibly stupid! It’s just like bizarre. But I went and I took it, and I fought with that guy….And here he was in a class with kids who weren’t Catholic, coming to a Catholic university and they had to take this stupid non-Catholic class and the guy was just close-minded, and he was…you know, we dealt with things like world ethics and stuff like that. Anyway, so I walked away from the Catholic Church when I graduated. And left that behind as well as other things in terms of practice.”

Sophie and Ed both disagreed with certain aspects of the Catholic Church, enough that they both abandoned Catholic culture and communities of practice. Ed’s narration had an angry tone to it, and he recounted being personally damaged by his experience with his Catholic tradition, “but I just, I view that sixteen years of wasted time. Maybe that’s, if I think about that maybe, I thought that theology and belief was a waste of time because the faith that I was brought into did absolutely nothing for me. I think it was a damaging experience for me at least.” Sophie’s scene also has an angry tone, but the story is less person-centered. She had her judgments of the church, but she was not “personally damaged” as a result. If anything, her sense of herself was strengthened, as she affirmed more strongly her beliefs opposing mandatory celibacy for priests. Rather than bringing a lingering negativity with her, Sophie “left that behind.”

**Nonreligious disengagement and satisfaction with life.** The only narrative theme among mainline Protestants that was significantly associated with well-being outcomes was the nonreligious disengagement coping theme, which unexpectedly predicted greater life satisfaction ($r(37) = .37$). Although disengagement coping is generally considered a maladaptive coping strategy (Connor-Smith & Flachsbart, 2007), there are times when it is
psychologically and even physiologically beneficial to disengage from a goal (e.g., when it is not realistically attainable) and then reengage with a new goal (Miller & Wrosch, 2007; Wrosch, Scheier, Carver, & Schulz, 2003; Wrosch, Scheier, Miller, Schulz, & Carver, 2003). A review of the narratives revealed that mainline Protestants’ disengagement coping in this study often did not take the form of the typical avoidance trappings of alcohol or substance abuse. Instead, the highest scorers on this theme spoke of holding their tongue and choosing not to engage people in topics they deemed unproductive or overly upsetting. They also spoke of choosing not to think about things that would be too upsetting, or they changed some aspect of their lives in order to avoid people that brought up unpleasant feelings. Perhaps they disengaged in an adaptive way. This strategy might not universally result in elevated life satisfaction; avoiding unpleasant emotions is not always the most adaptive strategy in life. However, it seemed to promote life satisfaction scores for the Just Do the Right Thing mainline Protestant participants in this sample. The interview did not necessarily prompt for evidence of goal reengagement that followed disengagement, and it might be that reengagement after nonreligious disengagement is what drove the positive result (see Wrosch, Scheier, Carver, et al., 2003; Wrosch, Scheier, Miller, et al., 2003, for evidence of the positive consequences of goal reengagement after goal disengagement). More focused investigation is required to take this idea further.

**Evangelical Protestants: Integrated.** I describe the evangelical Protestants’ profile as *integrated*. Three significant patterns emerged. First, although evangelicals matched the black Protestants in having higher overall religiousness scores than the mainline Protestants and the Catholics in this study (see Table 4.1 for ANOVA results), they differed from them by evidencing a broader relevance and integration of both religious and nonreligious coping in
their narratives and related outcomes (see Table 4.3 for evangelical Protestant correlations and Table 4.4 for black Protestant correlations). Specifically, Evangelicals who talked about coping in their narratives tended to successfully blend both religious and nonreligious meaning-related resources to cope with adversity. The second result was that Evangelicals who scored highest on the overall religiousness scale by and large also had the highest ego development scores, and then high ego development was significantly related to narrating more low point scenes with nonreligious active coping (similar to the mainline Protestants, who had higher ego development scores as a group than evangelical Protestants). Finally, although greater religiousness was not significantly related to psychological well-being or to life satisfaction, higher collaborative religious coping scale scores were. I discuss each of these findings in more detail below.

**Integrating religious and nonreligious meaning-related coping.** Nonreligious meaning-related coping corresponded with religious meaning-related coping ($r(35) = .30, p < .10$) at a trend level, and both nonreligious and religious meaning-related coping were significantly associated with diminished religious disengagement coping ($r(35) = -.36$, and $r(35) = -.34$, respectively) and greater lasting positivity ($r(35) = .37$, and $r(35) = .50$, respectively) in narratives. Those evangelicals who told more stories of religious meaning-related coping also told more stories of religious active coping ($r(35) = .34$), and they reported significantly diminished reliance on the maladaptive coping style of pleading for direct intercession ($r(35) = -.38$). So, using a meaning-related coping discourse, whether religious or nonreligious, was related to less religious disengagement and more lasting positivity in Evangelicals’ narratives. And religious meaning-related coping, in particular, was significantly related to more religious active coping in narratives and lower pleading for direct intercession scales scores.
Table 4.3 “Integrated”

Evangelical Protestant Correlations among Narrative Themes, Religiousness, Religious Coping, and Quality of Life Outcomes

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<th>Outcomes</th>
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<td>.34*</td>
<td></td>
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<td>6. rDisengagement</td>
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<td>8. Neg Ending</td>
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<td></td>
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<td>.83***</td>
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<td>.33* .41*</td>
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<td>-.18 .09</td>
<td>.35*</td>
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<td>-.05 .02</td>
<td>-.24 -.03</td>
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<td>-.13 .00</td>
<td>.12 .27 .03</td>
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<td>15. Self-Directing</td>
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<td>-.01 .01</td>
<td>-.03 .04 .20 .15</td>
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<td>16. PWB</td>
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<td>.25 .21</td>
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<td>.13 .17</td>
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<tr>
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<td>.48** .31†</td>
<td>.12 -.13 -.26 .00 -.10</td>
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</table>

Note. \( n = 35; \hat{p} \leq .1, * p \leq .05, ** p \leq .01, *** p \leq .00 \)
One trend emerged as I reread the narratives of the evangelical Protestants who used a combination of religious and nonreligious meaning-related coping in their narrative scenes, versus those who did not integrate these themes. These integrated participants were more likely to tell stories of questioning their standing with God: How could they do what they did if they were really a Christian? Both Lynn (religious meaning-related coping = 3, nonreligious meaning-related coping = 2) and Keith (religious meaning-related coping = 2, nonreligious meaning-related coping = 2) exemplify this. Lynn opened her faith low point like this, “Clearly it [her low point of faith] was the abortion, because it made me doubt my faith all together. How could I make that choice being a Christian?”

Keith similarly recounted a period of doubting that he was a Christian in his faith low point scene. He told of how he fell short of God’s expectations or standards,

“There was a low point that came during that time [one year spent at a Christian school, before moving on to college]. Sometimes when you are so intensely studying the Bible and you see what [it] talks about and some of the expectations of what a Christian should really be like. When you are reading it little by little, it is just like drinking from a fire hydrant, so to speak. That is what I felt. I felt overwhelmed and I thought, ‘Gosh, I am so far from what is expected here. There is no way that I can be a Christian.’ And I said I just felt this conviction everyday. It was not from the people saying anything. It was just in studying it [the Bible] and reading it, and just feeling so inadequate that I really questioned, ‘Did I truly have faith?’ And I just remembered getting to that low point where I just, just cannot be Christian, I am so bad.”

Whereas Lynn’s questioning came as a result of a decision she made in contradiction to her belief system, Keith’s doubts came from pursuing his faith more diligently.

Keith’s scene resolved in this way,

“I just remembered going in and everybody else was asleep in our bunk room and going to the bathroom and just praying and just saying to God saying, ‘God, right now I really question whether I am truly Christian but I know that if I am not, I want to be. So I just want to settle this with you right now. This is what I want. I want all that you offer and I want to live my life for you.’ And so, I kind of settled that question at that time, but seriously what came out of that, I felt the peace in God’s name. You know you do need
to grow, but it is a life-long process. I went to that low point and said that I’ll never be perfect. I’ll never be all that God wants on this earth, and it is a life-long process, but that low point, I needed to get to that low point to really realize that.”

The resolution to Keith’s story introduces a second defining feature of the narrative accounts of those evangelical Protestants who used both religious and nonreligious meaning-related coping. These Evangelicals concluded that some of the difficulties they endured were actually prerequisites to gaining greater spiritual insight and understanding. For Keith, he said that he needed that period of intense questioning to get to a point where he realized that his life was about growing into what God wants him to be, not about having to be there already.

Lynn’s version of this happened in her low point scene, where she told of being sexually assaulted during the summer between her junior and senior years of high school and then described a period of darkness (“the dark ages”) following the assault.

“It was really life changing for me, because I didn't tell very many people. And people I did tell, they acted like it wasn't that big of a deal, friends of mine….But it was very clear to me that I made choices that contributed to that, so I think the feeling of guilt was more prominent than the feeling of fear in many ways. I had been at a party with people I didn't know real well, with people I thought I trusted, but then I really didn't know a whole lot about them. I remember for a long time after that going over like what I wore that night, if that had an impact on it. But I think what was most profound is it set the stage for a period of darkness that went on for a couple of years, through college. And I would say it probably lasted, that would have been like ’87 maybe. And it probably wasn't until maybe ’95, ’96 where I really felt healed from that experience. So it was quite a dark period. The dark ages. Damn.

“So my understanding of that isn't necessarily focused on that event as much as my understanding of forgiveness and redemption, so like that whole period of my life, if that makes sense. And I don't think about that [the sexual assault] a lot. I think that it was something that brought me to a place that I kind of needed to go through [“the dark ages” that followed the assault]. Like my whole idea of who I am and who God is, is so much bigger because of that period.”
Those Evangelicals who did not integrate nonreligious and religious meaning-related coping in their narratives did not make similar claims about the necessity of difficult times to their spiritual formation.

**Evangelical self-criticism.** What is perhaps most striking about the Evangelicals’ stories overall, is the degree of harsh self-criticism they engaged in, whether they integrated nonreligious and religious meaning making coping or they did not, and regardless of their satisfaction with life, psychological well-being, or ego development level. Many Evangelicals spoke of themselves in ways that were quite critical or harsh or that displayed a belief that they were damaged in some way. Lynn’s story about the sexual assault is a good example of this critical edge. She wanted to share the blame for being sexually assaulted. What did she wear or do that contributed to someone attacking her? She said quite matter-of-factly, “It was very clear to me that I made choices that contributed to that.” Lynn also spoke about her abortion in ways that were self-critical, “How could I make that choice being a Christian?” Or Keith’s low point of faith, “I just remembered getting to that low point where I just, just cannot be Christian, I am so bad.”

Sarah (religious meaning-related coping = 0, nonreligious meaning-related coping = 2) was very critical of herself as a child in her childhood low point scene, “I remember, we were making a Christmas tree and I do not know if it is fourth grade, and then we were supposed to fold it this way but I folded it the wrong way, so the tree was kind of limping and I can still remember that. And I was ashamed that I did not do that right. I did not understand the direction and I do not know if some of it was, there is so little grace in my family that I extended that. I passed that along to myself, and that maybe I expected more of myself and I failed. I guess.”
Sarah also saw herself as damaged because of a lack of guidance and training in her childhood, and then she allowed herself to be verbally abused by her boss in her overall low point scene,

“Well, I just found out about, I guess during four years ago, the real ramification of growing up in my family... we never learned how to relate to people normally. And so that has been such a huge roadblock to what I might I consider a success... I just was so sad realizing that my life could have been so different had I had parents that... it is really hard when you are over 50 and you find out that your life could have been so different had you been raised with the skills to relate to people properly and to relate to yourself properly. So, I spent a lot of years grieving over that.... I worked for this woman that was the meanest person I have ever worked with, and so she abused everybody. Did not matter who it was and apparently, it was fine with her boss. So, it was really hard but I think if I had to work with her today, I think I would react much differently to it and that I would probably go talk to her about it and not just think, ‘You are my boss,’ or ‘you can treat me any way you want,’ but just talk to them and let them know that I’m here to do the work but I expect to be treated in a certain way, not abusive.”

And later Sarah followed up by saying,

“I never connected with myself, and I never really felt like I connected with anyone else. And there is always this continual trying-to-figure-out-how-can-I-do-this-and-I-do-not-know-how-to type thing, or I do not how to connect to people. And now, through doing the therapy and things, now things are changing, at least I’m in process. But I guess one thing that I think is that I’m a lot more, I do not know if the word is compassionate, but a lot more understanding if people do not -- a lot more maybe understanding of, you know, people are messed up. Yes, everybody is messed up in some way and cut people slack, not expect perfection from people or they have to just to cut people some slack, offer some grace type of thing. I did not get that at home growing up and so I did not even give that to myself so, yes, I guess that is the biggest thing.”

In her low point of faith scene, Sarah built on this further and narrated this desperate prayer for a broken self, “I can go back to just realizing at 50, how my life never worked for me.

And I asked Him, ‘Lord, why can’t I just have had one parent that could at least lead me the way to having normal relationships with people?’” Finally, Doug (religious meaning-related
coping = 0, nonreligious meaning-related coping = 1) took his self-criticism to the extreme, to the point of wanting to take his own life through suicide.

These stories of intense self-criticism sometimes ended with greater compassion for themselves, but most often they ended with elevated empathy and understanding for others. Lynn ended her story of self-criticism after her abortion with this response to the interviewer’s question of how it affects her today, “I wouldn’t say it affects me [today]. I think that it prepared me to be able to encourage and minister to young gals that have gone through that.”

Sheryl said this about the experience of grieving the death of her grandmother and father, “I think it’s helped me to understand when other people go through a similar situation. It’s a scriptural principle. But learning that and really being able to feel pain with other people when they go through that. But it wasn't too long after my dad died that another man's father in the church died. And somebody else's grandmother died or something like that. And it's just—my heart just broke for them because I knew the pain. And not everybody goes through the pain the way I did, we don't all experience that the same, but I think just being able to immediately feel that heartbreak… It changed me in that I was able—I now care about people a lot more. I'm not a real people person. I'm very task-oriented. It just helped me to be a lot more in touch with people and caring about them and who they are.”

Or Sarah’s new found understanding of other people’s imperfections, “And now, through doing the therapy and things, now things are changing, at least I’m in process. But I guess one thing that I think is that I’m a lot more, I do not know if the word is compassionate, but a lot more understanding if people do not – a lot more maybe understanding of, you know, people are messed up. Yes, everybody is messed up in some way, and cut people slack, not expect perfection from people or they have to just to cut people some slack, offer
some grace type of thing.” Finally, Doug’s story, “Yes, it has definitely given me a greater appreciation or a greater empathy with people who are depressed. Yes, [indiscernible] suicide. And I can see why people would want to do that.”

These Evangelicals moved from a position of criticism to one of greater understanding in their narratives, but it is not entirely clear whether this increased empathy and understanding extended as fully to themselves as they indicated it did for others. It was as if they reluctantly adopted a less self-critical stance and saw more value in their ability to help others than in their ability to be compassionate toward themselves. Again, these examples span the entire range of Evangelicals’ life satisfaction, psychological well-being, and ego development scores.

_Ego development, religiousness, and nonreligious active coping._ The strong associations between ego development and both overall religiousness and nonreligious active coping among evangelical Protestants were unexpected. Those who both reported more nonreligious active coping ($r(35) = .46$), as well as those who were the most religious overall also had the highest ego development scores (were the most psychosocially mature; DRI $r(35) = .48$, RCI $r(35) = .31$). These findings contrast with common media portrayals of highly religious evangelical Protestants rejecting nonreligious resources in favor of purely religious ones and relying on one-dimensional views of the social world. The most religious evangelical Protestants in this sample seemed to integrate religious and nonreligious aspects of their lives, and they did so with greater maturity and capacity for cognitive complexity as

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18 See for example the film _Jesus Camp_, which offers a portrayal of Evangelicals that may accurately reflect some charismatic fundamentalist groups but not the majority of evangelical Protestants. Mark Noll (Noll, 1993), however, a historian of Christianity in America and himself an Evangelical, affirmed the validity of popular images of anti-intellectualism among Evangelicals in his now famous critique, _The Scandal of the Evangelical Mind_. More recently, sociologist Michael Lindsay (2007), identified and interviewed elite Evangelicals, who do not fit Noll’s critique, including thought leaders and research scientists like Francis Collins (who headed the Human Genome Project).
compared with less religious evangelicals. These findings also contrast with Loevinger’s (1996) suggestion that ego development and religiousness ought to be independent, with religiousness finding a different expression at each level of ego development. That said, this sample is not representative of Evangelicals as a whole. In contrast with the general population of evangelical Protestants, this sample had higher incomes and more advanced education (see Lehrer, 1999), and was drawn strictly from a major metropolitan area. Evangelicals from other regions of the country, from rural areas, or those with lower SES might very well not display this association between ego development and religiousness. Also, the range of religiousness was very truncated. Twenty percent ceilinged out on the Duke measure of overall religiousness (score = 27), and 24 of the remaining 28 Evangelicals scored a 23-26. It is unclear whether or not this association would hold for a group of Evangelicals with a broader range of overall religiousness.

Religiousness and well-being. The connection between religiousness and well-being that was anticipated in the full sample in Chapter Three was also absent among evangelical Protestants; however, there was a strong relationship between collaborative religious coping scores and both psychological well-being ($r(35) = .55$) and life satisfaction ($r(35) = .46$). For comparison, overall religiousness was positively related to collaborative religious coping in the full sample and in all four RELTRAD groups, although non-significantly among the black Protestants. So, the more religious people were in this sample, the more they tended to choose a religious coping style of collaborating with God to help them deal with their loss or work out a problem. Collaborative religious coping was positively but weakly related to well-being in the full sample and among black Protestants, not at all related to well-being for mainline Protestants, and was negatively related to well-being for Catholics (at a trend level). Far from
being a universally adaptive coping style, *collaborative religious coping* seemed quite adaptive for evangelical Protestants, somewhat adaptive for black Protestants, neutral for mainline Protestants, and possibly detrimental for Catholics. Alternatively, it could be the case that it’s those Evangelicals who scored highest on psychological well-being who then endorsed a *collaborative religious coping* style and those Catholics who scored lowest on psychological well-being who then endorsed the *collaborative religious coping* style, that Evangelicals collaborate with God when things are going well, and Catholics collaborate with God when well-being is low. Either way, Protestants and Catholics differ from one another in terms of the mix of their religious coping and psychological functioning. And for evangelical Protestants, choosing to collaborate with God in terms of working together, making sense of the situation together, and putting plans into action together with God is a strong corollary and/or tool of adaptive psychological functioning.

**Black Protestants: Waking the talk.** Black Protestants scored highest on both religiousness measures, narrowly edging out the Evangelicals, but how that religiousness related to other study variables was quite different from Evangelicals (see Table 4.4 for black Protestants). Where Evangelicals’ religiousness was related to the psychosocial maturity
Table 4.4 “Walk the Talk”

Black Protestant Correlations among Narrative Themes, Religiousness, Religious Coping, and Quality of Life Outcomes

<table>
<thead>
<tr>
<th>Narrative Themes</th>
<th>Religiousness</th>
<th>Religious Coping</th>
<th>Outcomes</th>
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<tr>
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<td>n = 27</td>
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<tr>
<td>1. Active</td>
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<td>9. 10.</td>
<td>11. 12. 13. 14. 15. 16. 17.</td>
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<tr>
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<tr>
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<td>-.40* -.41* .06 .06 .54**</td>
<td></td>
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<tr>
<td>15. Self-Directing</td>
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<td>-.37† -.36† -.33† -.07 .65*** .38†</td>
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<tr>
<td>16. PWB</td>
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<td>.51** .68***</td>
<td>.32 .04 -.39* -.36† -.47†</td>
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<td>17. SWLNS</td>
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<td>.19 .40* .21 .06 -.03 .03 -.11 .54**</td>
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<td>.23 .24 -.08 -.03 -.12 .13 -.16 .12 .04</td>
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</table>

Note. n = 27; † p ≤ .1, * p ≤ .05, ** p ≤ .01, *** p ≤ .001
outcome (ego development), greater religiousness among black Protestants was strongly related to the well-being outcomes: psychological well-being (DRI $r(27) = .51$, RCI $r(35) = .68$) and life satisfaction (RCI $r(35) = .40$). For black Protestants, greater religiousness was not significantly related to any narrative coping themes, however. Regardless of how high or low they scored on the religiousness measures, they displayed similar prevalence of religious coping discourse in their narratives. Many have made note of the social and political importance of the Christian church in African American communities (cf. Pattillo-McCoy, 1998; Steensland et al., 2000). And there is a religious/church discourse that accompanies social life within these communities that is not present in predominantly white civic environments and that serves both religious and secular purposes (Pattillo-McCoy, 1998). Consequently, religious talk in the autobiographical narratives of black Protestants does not necessarily represent greater internalization of a religious identity and might instead signal greater identification with and internalization of a historic cultural discourse.

Clearly it is not sufficient to simply Talk the Talk (i.e., talk about religious coping without actually being more religious overall) to get the well-being boost associated with greater religiousness. To unlock the well-being rewards of overall religiousness, black Protestants in this sample needed to Walk the Talk as well (at least in terms of higher scores on assessments of overall religiousness and religious commitment).

Also in contrast with the Integrated Evangelicals, there seemed to be an either-or nature to the meaning-related coping discourse among black Protestants. They tended to use either nonreligious or religious meaning-related coping ($r(27) = -.42$), but not both. There was a similar negative association between nonreligious meaning-related coping and religious active coping ($r(27) = -.44$), while religious active coping and religious meaning-related coping hung
together quite solidly ($r(27) = .54$). For black Protestants, if they engaged in a religious
coping discourse, they did so quite strongly, and if they didn’t… then they didn’t. The
significant narrative correlates of well-being for black Protestants included nonreligious
disengagement coping (life satisfaction, $r(27) = -.41$) and nonreligious active coping (life
satisfaction, $r(27) = .39$; psychological well-being, $r(27) = .37$). These nonreligious coping
themes, rather than the religious ones, predicted well-being. Further evidence of the necessity
of black Protestants’ Walking the Talk came as religiousness and well-being were both
negatively related to the maladaptive religious coping scales: overall religiousness (pleading
for direct intercession, $r(27) = -.40$; self-directing religious coping, $r(27) = -.37$), religious
commitment (pleading for direct intercession, $r(27) = -.41$; self-directing religious coping,
$r(27) = -.36$) and diminished psychological well-being (passive religious deferral, $r(27) = -.39$;
pleading for direct intercession, $r(27) = -.36$; self-directing religious coping, $r(27) = -.47$).
Greater religiousness was associated with diminished maladaptive religious coping, as was
higher psychological well-being. It seems that being more genuinely religious enabled black
Protestants to make better use of their religious resources to cope most adaptively with
adversity.

These associations lend support to the findings from Chapter Two, which suggest a
causal relationship between maladaptive religious coping and diminished well-being, and
warrant further investigation as to whether diminishing reliance on maladaptive religious
coping styles in fact mediates the relationship between greater religiousness and enhanced
psychological well-being, among black Protestants in particular.

There is a theological trope in many traditionally black churches that says, “Let go and
let God.” To the extent that this truism is taken to mean that one should abdicate personal
efforts or actions to deal with adversity while expecting that God will just take care of things (passive religious deferral coping), it might create unintended negative consequences for psychological well-being. It is conceivable that those who are most religious understand this saying in a more balanced way, where one might do all one can and then disengage from those aspects of adversity that cannot be controlled or influenced, leaving them to God…. Walking the Talk.

To examine this idea more closely, I read the low point scenes of those black Protestants who scored highest and lowest on psychological well-being for differences in how they talked about their religiousness. Did they talk about using it the same way, or were there differences that the coding scheme did not pick up? As it turned out, those who scored highest in psychological well-being had a particular maturity to how they talked about their faith, primarily in terms of when God did not answer their prayers in the ways they hoped. These next examples are from the two black Protestants who scored highest on both the psychological well-being and overall religiousness measures. Willard (PWB score = 292; DRI score = 27) was romantically interested in a woman in his church. “She was beautiful, saved, went to the same church…. and we got along pretty well.” And God told him not to pursue an exclusive romantic relationship with her.

Willard started his low point of faith scene by describing some of the ground rules he had for engagement with God and with people,

“When you believe God for something – and I believe God for something; I trust Him and His Word 100%... there is no doubt, because men did not save me. And I trust God as my Father, that he could keep His Word because people will not keep it. They will break their word, make you mad. I tell you that I asked the Lord for something in life. It was not His will and He knew. Sometimes we have the tendency to try to make God do something. And God sees your life way before you were even here and created. And you ask him for something, and God told me, ‘No.’”
Willard continued on to describe this specific instance of God telling him “No”, including what looks like an indication that the woman would not be faithful long-term.

“There was a time I asked Him for a young woman's hand in marriage. He told me, ‘No, son. No, Willard, no.’ I tried to reason with Him in reference to, ‘Well, we go to the same church. We pray…’ But anyway, He just told me, no. I said, ‘Well, Lord, you sent her into my life.’ He said, ‘Yes, I did. I did send her. She is not your wife, son.’ And he showed me that she was not my wife. He showed me that she would walk.”

When the interviewer asked Willard whether he actually asked the woman to marry him, he said,

“No. No, I asked God first. No, no, no, no. I wanted to be with her but I go to Him first and said she looked pretty good. And she did man, I would really love to take her as my wife. And He said, ‘Willard, I said no.’ ‘Well, God, what do you mean no?’ You argue with God. That is a foolish thing to do. But there is one thing you will learn: God will not violate your will. You go and do what you want to do. Things go wrong for you. He is a parent. But also at the same time, God has rules set and he already knows what is going to hurt you. He knows what is good for you. He knows what is not good for you. And when that came to me, it hurt you [me] naturally speaking. We went to the same church, so forth and so on. But he told me—the best thing that… I believed was… that happened to me in a long time because down the years I saw why He said no. I am like, ‘God, I want this.’ He said no right then and there because He saw what our life was going to be like years way ahead of me. I could not see it. God saw it and He knew it. So He said no and whether people want to acknowledge it – He saves our lives many times.

Next we turn to Cecelia’s (PWB score = 296; DRI score = 27) story of dealing with significant personal debt. Recall excerpts of this example of religious disengagement coping from Chapter Three.

“I was in deep financial trouble. I think it was from ’87 to ’90. No one’s fault but my own. Working [??] credit cards caught up with me. I prayed and prayed and prayed and prayed. I admitted; I owned up; I did everything. And I was expecting God to just give me a miracle and just eradicate all these bills. ‘You own everything, just $14,000 away, just make it happen!’ And it didn’t happen, and the bill collectors were calling me at work. They were calling me at home. They were after me like I don’t know what. And I guess the God that I had painted, He just wasn’t going to respond that way, and I was so tired or working every day and before I even got paid, it was already gone. In fact, I was, in my mind, four checks ahead before I even finished one check. What I didn’t understand was that God was teaching me to learn the value of money. So instead of me seeing some positive in it, because the sadness and the grief was the
process, going through the process was a low ebb for me. It did not drag me out of the church or anything like that, but it caused me learn God in a whole new way. I didn’t want to learn Him that way. I wanted Him to be – ‘All the other stuff I prayed for it seemed like You just Poof! Poof! You did it, bam! for other people. Now I need you to do something for me,’ and it didn’t happen. So that was a low ebb for me.

When the interviewer asked if Cecelia ultimately saw the experience as positive or negative, she responded unequivocally,

“It was the best thing that could have happened to me. I ended up – In that process I lost my apartment on the lakefront. ‘God, where are you? I’m moving from the lakefront to 95th and Racine.’ Talk about girl in the hood? I was in the hood, between two dope houses and total devastation. What that did for me though was, it was part of my preparation for the type of ministry that I – I didn’t see myself as a minister. I was just glad to be part of the Body of Christ. I didn’t know I was called to do even more so. And so it put me in connection with people that I probably would have never interacted with before. So it was part of the process.”

Willard and Cecelia shared the experience of asking God for something and getting an answer back that they did not like. Whether it was in the form of direct conversation, “Yes, I did. I did send her. She is not your wife, son,” or natural life circumstances of a $14,000 debt not being “eradicated,” these participants with the highest psychological well-being scores were willing to engage with an aspect of their experience of God that they either disagreed with or did not like. Both also gave themselves to their experience. Willard chose to follow what he believed that God told him, and he did not pursue a romantic relationship with the woman he was attracted to. Cecelia went even further to acknowledge her subjective part in deciding what qualities of God she would choose to believe and then allow the experience to further shape those beliefs, “And I guess the God that I had painted, He just wasn’t going to respond that way…. but it caused me learn God in a whole new way. I didn’t want to learn Him that way.”

Willard and Cecelia also shared a theme of viewing God as a positive and loving influence, even when their circumstances would suggest otherwise. Although Cecilia ended up
living in a dangerous neighborhood, with drug dealers as neighbors, she said God’s unwelcome response to her, “was the best thing that could have happened to me.” Willard shared a similar belief, in his case that God knew things that he didn’t and that everything would be ok if Willard just followed God’s instructions. It also stands out that there is a personification of God that is not as obvious in the other stories. Willard spoke to God and reported a very specific answer in return. Cecelia made a very personal appeal to God in saying, “You did it, bam! for other people. Now I need you to do something for me.” In fact, these stories have some of the tenor of parent-child interactions: “Why not, [God]?” and “You did it for other people.” There is an intimate style of interaction between God and people in these stories. And then the participants followed up their more child-like questions with adult or parental understanding… the parent actually knew best and even though it hurt to work through the debt or disappointment, the experience resulted in something valuable for the adherent.

Turning to the participants with the two lowest psychological well-being scores among the black Protestants, we see a story with a different nuance to how religiousness is talked about.

For her overall low point story, Bianca (PWB score = 215; DRI score = 27) described being mistreated by her ex-husband during their 30-year marriage,

“The low point was my marriage, ha, ha, ha, ha. And that is 30 years of that and I just remember getting up in the morning and very early in the morning….to get the kids ready for school. I would be walking down the stairs and I would be saying, there is a Scripture song that says, ‘Weeping endureth for the night but joy cometh in the morning.’ And I said to myself, ‘Lord, when is my morning coming?’ I said to myself, ‘If I had a gun, I would blow my brains out.’ That is a low point.”

When asked what the scene means for who she is now, Bianca explained,
“Number one, it means a person can overcome a situation, or God. I do not want to think God can bring you out of the situation. That is number one. Looking back, it seemed so dark and it seems so impossible. I am just amazed to look back.

So, who I am now … my personal opinion also with going into the ministry—and that is even before I realized my calling—I feel society is sending the wrong message to women. And society is [still] in this day and age sending a message, ‘You must stay with your husband no matter what, no matter how miserable he is.” And, almost, he is being entitled to do as he pleases in terms of how he treats you. And so I think women need to hear a different message. Now, it is not like I am running around advocating divorce. But I think that women need to … I hate to use the word ‘assert themselves’ in terms of ‘I deserve to be treated better.’ That is basically it.

Like Willard and Cecelia, Bianca (who also scored the top score possible on the overall religiousness scale) prayed a prayer of desperation, “When is my morning coming?” Unlike Willard and Cecelia, Bianca did not say that she believed that she got an answer of any kind. Where Willard and Cecelia reported being drawn closer to God or to learning something new about God, Bianca showed no similar redraw back to God. Instead, she redoubled her efforts outward, toward women who she sees as being in similar circumstances.

Bianca also had trouble reconciling the disparity between her beliefs and her present circumstances. Truly, domestic violence is a complicated and often difficult situation to navigate, and one could argue that the differences in the stories could simply be due to the disparity in level of severity of the events. However, the main point of the current project, of most autobiographical narrative investigations, is how people tell their story, more so than the specific events in those stories. For comparison’s sake, however, Cecelia told an equally traumatic story for her overall low point scene, about being molested at three-years-old by her 18-year-older brother and then of the lasting effects of that experience. Despite this similarity of severity of the bad event, her way of talking about her religiousness was different from Bianca’s. Cecilia and Willard also talked about growing in their understanding and trust of God,
whereas Bianca said, “it means a person can overcome a situation, or God. I do not want to think God can bring you out of the situation.” Where Cecilia and Willard’s stories highlighted their belief in God’s power and authority, Bianca reported being bolstered in her self-reliance and in her message to other women to “assert themselves” as she had learned to. To be clear, I am not evaluating the contents of the actions or faith beliefs described in the stories; instead, I am asking the question of whether some of these ways of activating one’s religiousness might be related in any way to well-being outcomes for black Protestants, a hypothesis to be tested in future work.

Duane’s psychological well-being score was in a similar range as Bianca’s, but his overall religiousness score was the second lowest among black Protestants (PWB score = 224; DRI/Duke score = 22). His low point of faith story supports this emerging idea that nuanced differences in the way that black Protestants talk about using their religiousness to cope with adversity are indeed related to their well-being.

“Okay. My low-point in religion would have to be after me and my youngest son’s mom broke up, and I used to pray that we could get back together. I used to pray that He would allow me to be the father to my son, the man that she wanted me to be. It seemed like my prayers weren’t answered. It seemed like I would get so close to it materializing, and then it would just, poof, up in smoke. And I would say a prayer. Actually, I would ask the Lord to see to it that me and her could see eye-to-eye again and get back together.

And during that time I kind of let myself go really down. I wasn’t caring too much about much of anything. I wasn’t taking care of my business. I left my house. I was living in my car. I was drinking and drugging all the time, and I’ve come to understand now, at this point in time, that I wasn’t making the proper effort. Now, the Lord kept me alive. He kept me healthy, but during that time I wasn’t taking the necessary steps to win her love back, to win my family back. But I was putting it all on God at that time in my life, and I had to put forth some effort too. I’ve grown to understand that now, but I never said, “I hate the Lord,” or nothing like that, but I did kind of ask him, ‘Why me?’ I was kind of questioning, ‘Why me? Why are you hurting me? What did I do? Show me what I got to do, what I’m supposed to do,’ at that time. I think that would be about my lowest point?
Although Duane did not score as highly as Bianca on measures of overall religiousness, he included significant religious language and content in his story (underscoring the earlier point that overall religiousness did not relate significantly with the religious coping narrative themes). Duane offered desperate prayers for things he could not figure out how to get on his own. And like Bianca, his story of engagement with God seemed to be primarily about being rescued from his circumstances. It did not have any hint of learning about or increasing trust in what he held sacred or transcendent.

**Catholics: Mixtures of loss and gain.** Finally, the fourth of the four RELTRAD groups. The story that emerged for Catholics has four distinctive aspects (see Table 4.5 for all correlations). First of all, and most significantly, this is the only group for which both nonreligious and religious active coping in narratives predicted significantly diminished life satisfaction ($r(23) = -.56$ and $r(23) = -.50$, respectively). Looking at it another way, the Catholic participants with the highest life satisfaction scores tended not to talk much or even at all about the active steps they took (religious or nonreligious) to deal with life’s difficulties. Herein lies the answer to the first puzzle from Chapter Three. It was the Catholic group alone, and not any of the Protestant groups, that drove the trend-level negative relationship between both religious and nonreligious active coping and life satisfaction.
Table 4.5 “Mixtures of Loss and Gain”

*Catholics’ Correlations among Narrative Themes, Religiousness, Religious Coping, and Quality of Life Outcomes*

<table>
<thead>
<tr>
<th></th>
<th>Narrative Themes</th>
<th>Religiousness</th>
<th>Religious Coping</th>
<th>Outcomes</th>
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<tr>
<td>1. Active</td>
<td>.04</td>
<td></td>
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<td>2. Meaning</td>
<td>.02</td>
<td>.26</td>
<td></td>
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<tr>
<td>3. Disengagement</td>
<td>.31</td>
<td>.37</td>
<td>.29</td>
<td></td>
</tr>
<tr>
<td>4. rActive</td>
<td>-.15</td>
<td>-.24</td>
<td>.09, .39</td>
<td></td>
</tr>
<tr>
<td>5. rMeaning</td>
<td>.07</td>
<td>.07</td>
<td>.04, -.17, -.14</td>
<td></td>
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<tr>
<td>6. rDisengagement</td>
<td>.22</td>
<td>.24</td>
<td>.06, .45, .35, -.37</td>
<td></td>
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<tr>
<td>7. Pos Ending</td>
<td>-.11</td>
<td>.19</td>
<td>.11, -.24, -.46, .12, -.49</td>
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<td>8. Neg Ending</td>
<td>.10</td>
<td>.22</td>
<td>.14, .03, .03, .16, .34, -.21</td>
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<tr>
<td>9. Religiousness</td>
<td>.11</td>
<td>-.10</td>
<td>-.17, .18, .01, .14, .00</td>
<td>.36</td>
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<td>10. Relig Commitment</td>
<td>.25</td>
<td>.32</td>
<td>.00, .38, .27, -.13, .49, -.28</td>
<td>.41, .06</td>
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<tr>
<td>11. Collaborative</td>
<td>.02</td>
<td>.41</td>
<td>.02, .14, .18, .22, .41, -.22</td>
<td>.64, .19, .51</td>
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<tr>
<td>12. Active</td>
<td>.34</td>
<td>.11</td>
<td>-.09, .08, .01, .25, .17, .07</td>
<td>.25, .29, .31, .19</td>
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<tr>
<td>13. Passive</td>
<td>.31</td>
<td>-.07</td>
<td>-.05, -.26, -.40, .56, -.24, .14</td>
<td>-.04, .00, -.27, .02, .25</td>
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<tr>
<td>14. Pleading</td>
<td>.05</td>
<td>-.20</td>
<td>-.20, .16, .00, .03, -.17, .12</td>
<td>-.46, -.12, -.32, -.41, -.03, -.09</td>
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<tr>
<td>15. Self-Directing</td>
<td>-.27</td>
<td>-.25</td>
<td>-.30, -.32, -.25, -.31, -.15, -.10</td>
<td>-.17, .09, -.35, -.17, -.63, -.09, .43</td>
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<tr>
<td>16. PWB</td>
<td>-.56</td>
<td>-.26</td>
<td>-.06, -.50, -.16, -.05, -.18</td>
<td>.11, .32, -.18, .02, -.31, -.06, -.08</td>
</tr>
<tr>
<td>17. SWLS</td>
<td>-.12</td>
<td>.13</td>
<td>.03, -.20, -.15, .32, -.24, .22</td>
<td>.43, .09, .22, .47, -.06, .11, -.16, .03, .03</td>
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*Note. \( n = 23; \dagger p \leq .1, * p \leq .05, ** p \leq .01*
Identity-shaping events in childhood low point scenes: Exploring the negative association of nonreligious active coping in narratives with life satisfaction. To learn more about the negative relationship between narrative nonreligious active coping and life satisfaction, I re-read all of the passages in Catholics’ narratives coded for nonreligious active coping, to discover possible clues as to why nonreligious active coping in narratives and life satisfaction would be related in this way. There was no obvious difference in the nature of the active coping examples given by those who scored lowest versus highest on life satisfaction. So I kept reading. The primary distinction, instead, lay in the negative events described for the childhood low point scene. The childhood low point narratives of Catholics with the lowest life satisfaction and highest narrative active coping scores were about things like parental abuse, parental alcoholism, and being bullied by peers. These types of events all have the potential to be identity-altering in a very negative way, often beyond the power of a child to control or even make sense of. The childhood low point scenes of those with high narrative active coping scores provided clear indications of this lingering influence on identity and personhood. Maurice, a 53-year-old African American Catholic (nonreligious active coping score = 2, satisfaction with life score = 14), said this about the present-day effects of his mother’s abusive anger and a of particular episode in childhood, “She made my brother and I take off our clothes and whipped us with a belt on our bare bottoms, which it’s an episode that I’ve tried to minimize most of my adult life…. To this day it still creates a negative psychology, a sense of being unworthy, a sense of, at my core, not being a completely worthy person. It’s probably a real formative, critical component in not feeling deserving of a fully successful, fully joyous, fully happy existence.”
Amelia, a 52-year-old Catholic woman (nonreligious Active coping score = 3, satisfaction with life score = 17) ended her childhood low point scene where she described being “picked on by the boys” this way, “If you are very, very short and the guys are very, very tall, it is very frightening, and it stayed with me.” This final sentence gives the scene a sense of incompleteness. It is not done; there is not significant psychological distance from the event, and Amelia carried it with her to the present day. Her language was even in the present tense, “it is very frightening,” as if the intimidation was still happening at the time of the interview.

In contrast, the childhood low point narratives of those with high life satisfaction and low narrative active coping scores were about things like getting in trouble with authorities for mistakes or for bad behavior. These topics, especially the way they were framed, seemed to have far less power to influence identity in a negative way. Patricia, a 50-year-old Catholic woman (nonreligious active coping score = 0, satisfaction with life score = 33), described this childhood low point scene:

“Well, none are extremely dramatic but if you go for a fairly early one, I would have been about four years old and my little sister was hospitalized with meningitis, and they thought that she was going to die. So much so that she received confirmation, a sacrament that is usual given when the child is older because they thought she had last rites and everything, and our family, I mean literally, we got down on our knees and prayed for her every night while she was in the hospital, and she recovered. And she is fine, and it was considered a little bit of a miracle that she lived and even more amazing that she had no mental retardation or other issues after being in a coma. She was extremely hard hit with the viral meningitis… And so she was fine, but I do remember feeling a bit adrift because my mother was in the hospital a lot and various people were taking care of us. So I just knew that this was a scary, hard time for our family. I mean that is a pretty early memory but to a child it is a basically a scary time.”

When asked what impact the event might have on who she is today, Patricia’s response was, “I do not know, maybe because our family really believes in the power of prayer, and we believe our prayers were answered. So I can say that given that I do have strong faith, that may
have been an early contributor to it.” The lingering influence of this story, as Patricia told it, is one of positive influence. Rather than diminishing her sense of herself, she used the memory to bolster her identity as a person with a strong religious faith. Also of interest is that she had to search her memory for “negative experiences” to talk about and said that she doesn’t have any memories that are all that dramatic. I think most people would say that having a sibling near death and then recover against the odds qualifies as dramatic.

Perhaps there was objectively more “bad stuff” that participants with the low life satisfaction scores had to cope with, and that is why their heightened active coping scores predicted diminished life satisfaction. They talked more about active coping because they simply had more bad stuff to cope with. There is no way to determine whether or not this is true with the data available. It could also be the case, however, that those with greater life satisfaction experienced similarly bad, identity-altering events in their lives but selected less psychologically damaging events for their life narrative scenes or chose to focus on the more positive, identity-affirming aspects of those events. For example, it seems that Patricia’s way of interacting with her past is one that focuses on the positive aspects, but without dismissing or disowning the negative aspects. She said that it was very scary and that she felt adrift from her mom when her sister was in the hospital. She did not negate these negative feelings and experiences but seemed to have integrated them into the experience as a whole. In contrast, Maurice said that he had tried to minimize the negative aspects of his scene his entire adult life.

Also, those participants who scored lowest on satisfaction with life and highest on active coping in narratives tied their current personality back to the events of their childhood in some way. Essentially, each one said that s/he would be a different person—or not have a certain belief pattern or negative aspect of their current life—if the event hadn’t happened or if
it had happened in a different way. Of course, this may not or may not be true. It could be the case that each would be just as fearful or worry just as much or something else, but perhaps having an event to attribute the personal attribute to infused that characteristic with some sense of immutability and contributed to the belief that one has been damaged in some way: I once was whole, innocent, but that changed forever when this bad thing happened.

Even if one of these rationales is accurate—that one group simply had more bad stuff in life to cope with, or that the other group had as much adversity but told different, better stories, or that life experiences simply provided anchors to stabilize negative personality aspects and make them seem immutable—it is not clear why the relationship would hold only for Catholics. Another interesting observation was that this difference in life events was only relevant for the childhood low point memories. There was not such a distinct difference in the events described in overall low point or faith low point scenes. Future research could uncover whether or not active coping described in childhood memories really holds more sway over adult life satisfaction than coping described in other life narrative scenes (perhaps for Catholics in particular).

Turning to religious active coping in Catholics’ narratives, I wondered how much of the correlation of religious active coping with life satisfaction ($r(23) = -.50$) was due to an overlap with the variance shared by nonreligious active coping with life satisfaction ($r(23) = -.56$). Perhaps it was simply the active part of the coping that was important, not whether it was religious or nonreligious. So I ran partial correlations. The correlation of religious active coping with life satisfaction, when the variance associated with nonreligious active coping was partialled out, reduced to $r(23) = -.40$, and the correlation of nonreligious active coping with life satisfaction, when the variance associated with religious active coping was partialled out,
reduced to $r(23) = -.50$, not very significant or meaningful reductions. Next, I set to discover what narrative elements might undergird the negative association between narrative religious active coping and life satisfaction.

*From loss to gain: Exploring the negative association of religious active coping in narratives with life satisfaction.* First of all, in addition to their high scores on nonreligious active coping, Maurice and Amelia also had the strongest combination of high scores on religious active coping with low life satisfaction scores, so we can use their stories in this comparison as well. At the other end of the continuum, however, it was Alexia (Alex), Alfred, and Roberta who scored high on life satisfaction but very low on religious active coping. The key narrative similarity among this group was the degree to which participants integrated the joyful, positive, or beneficial aspects of their low point scenes with the sad, angering, hurtful, or scary aspects of those events. Alex, for example, a 57-year-old Catholic woman (religious active coping score = 0, satisfaction with life score = 32), told a low point story about miscarrying her first child (Sally or “Santa Fe Sal” as she affectionately called her), just a few weeks from Sally’s due date.

“My doctor was a personal friend and we were laughing about what an easy, healthy pregnancy I had and, you know, I hadn’t been sick very much – And I went in and they couldn’t get her heartbeat…. And that my approach on life is that there are bad things that happen in the world, but, yes, bad things happen to good people…. But [not] having a healthy [baby] was never anything that my family had not...had had any experience with....it totally knocked me off my feet. We nearly divorced about it. This baby was due in two weeks. We found her dead on like December 21st…. I just wanted this over with. The doctor said, no, you can’t...I mean, it’s not a good idea. You need to let her come, to have her be born. So [sighs] finally she was born on December 28th, and, you know, that was...**having her come out was also—well, was just a mixed, terribly mixed feelings because even having a bad child come out of you is still incredible.** And, and I didn’t get to hold her. But afterwards...it was actually worse afterwards than it was during the birth because.....Anyone who’s had a child knows that the ultimate vulnerability is that child. It totally transforms a person. And I was now vulnerable. I went around the house hugging anything the size of a baby [laughter].”
Alex went on to describe the ways that she coped over time, the therapy she sought out when she started crying uncontrollably six months later, and the repair that eventually came to her marriage. The key element here is the mixture of joy and loss, Alex’s ability to take in the miracle of birth, even when that birth was to a child who had already died. She did not negate or distance herself in this story from the pain and sadness and difficulty of her loss. She nearly lost her marriage over it as well. But Alex had the capacity to hold the good with the bad, at least in how she tells the story now.

Alfred, a 59-year-old Catholic man (religious active coping score = 0, satisfaction with life score = 33) whose low point scenes provided the examples of narrative negative endings in Chapter Three, also demonstrated an ability to hold the positive with the negative in his overall low point scene.

“That is when my brother got ill. He was also the [inaudible] in electrical engineering and worked at Motorola and he had a wonderful life up until then, perfect, everything normal, ordinary, regular. He worked actually on some of the first things that turned into cell phones, actually. But he got ill and he has schizophrenia and it is a disease that you think can get better. And he did get better. He got ill so he was out of work for a year or two and he went back to a job and then he went to work under his laboratory, and then he knew he had to quit on the laboratory because it did not work. He has been at home since he was 23 or 24 years old and he is now 66. So that is the low point because I had to live through some very unusual times with my parents. It was very hard on us. It was very hard on the whole family. I have two brothers, the one that got sick and the one that is okay. And you worry that that might happen to you because it happened to your brother. And he did unusual things. He was violent at times. It is just a very sad story.”

When the interviewer asked Alfred what effect he thinks that experience has on who he is now, Alfred responded, “Well, I can tell you for sure that I’m pretty much an optimistic person. I always felt maybe that I’ll help find a cure. At first you take it like you are part of the problem, my parents, of course, mostly, but they are not. It is a chemical imbalance. It does not work for some reason. I learned a lot about my parents, myself and like I said, the mental health scene.
He has a lot of special talents for anyone who had such a problem or any handicapped person. I might not have felt that way if I did not have a brother that became ill in that fashion.”

There is a sad tone to the overall story; however, Alfred saw through the overlay of schizophrenia to appreciate his brother’s “special talents” and also to see the ways that he, Alfred, had grown as a human being because of his brother’s illness. He now has eyes to see and appreciate the unique abilities of people who do not function in the mainstream, where he believed he would have missed or discounted them before.

Alfred’s low point scene in childhood also displays this integration of good and bad, but in a different way. He integrated his experience of the death of his grandfather when he was 10-years-old into a broader view of the cycle of life and death. “I know I was afraid when I was very little of people who died. My grandfather was probably the first one…. It was three in the morning, it was deep at night and I could tell about what my mother said that my grandfather died, and it hurt because grandpa was a special grandfather figure, strong, healthy, and he died at 70 years old…Connected with that was the funeral and the wake, and I was really kind of afraid to get too close to the one who was dead. It was just a childhood thing and I grew out of it, thank God….We have to learn how to accept that people die because it is the cycle of life. All people will die…. It kind of helped me to learn that.”

Finally, Roberta was a 60-year-old Catholic woman and the only religious professional among the Catholics in our sample (religious active coping score = 0, satisfaction with life score = 35). This is her overall low point story.

“I remember a very sad time. When I was in 8th grade, I just graduated from 8th grade, and I had been babysitting for a number of years; 6th, 7th and 8th grade for this family. They have seven children and the little girl, one of the little children had leukemia. I
babysat with the family and somehow I grew very close to her, and she died that summer, and that was just the first time I really experienced death. Somebody that I really cared about. She was only seven and I was 14. But for some reason, she had a huge impact on me. And her loss was very hard for me.” When the interviewer asked what impact that loss had on who she is today, Roberta replied, “Not the event, but the person had a huge impact. It was her absence I guess, but I often credit my religious vocation to my association with Laura. There were moments that I had with her that I felt… oftentimes, you can look at someone in the eye and you feel like you have had a real connection with that person, I felt that a couple of times when she was very sick. And that just really stuck with me and I felt somehow there was a higher calling involved in that.”

Alex, Alfred, and Roberta all told stories of deep loss, Alex lost her baby, Alfred lost his brother to schizophrenia and his grandfather to death, and Roberta lost a little girl she used to babysit to leukemia. They all spoke of deep pain and loss and hurt associated with these experiences. There was no sense in their stories that they pulled away or minimized the painful emotions they felt during these times. Quite to the contrary, their language embraced the pain, hurt, and loss. Alex, “It totally knocked me off my feet. We nearly divorced about it,” combined with periods of nearly uncontrollable sobs six months later. Alfred, “It is just a very sad story.” And Roberta, “That was just the first time I really experienced death. Somebody that I really cared about…. And her loss was very hard for me.”

Their stories also spoke of gain in the face of immutable loss, and it was the gains that they brought with them from the past events into their present realities. Alex gained an experience of the aliveness of her own vulnerability and of the miracle of childbirth; Alfred gained compassion and perspective; and Roberta found deep connection with the divine, with a dying girl, along with her vocational calling. This stands in sharp contrast with the stories of Maurice and Amelia, who each painted a picture of past pain and hurt inextricably interwoven into their current reality. Maurice, “To this day it still creates a negative psychology, a sense of being unworthy, a sense of, at my core, not being a completely worthy person. It’s probably a
real formative, critical component in not feeling deserving of a fully successful, fully joyous, fully happy existence.” And Amelia, “It is very frightening, and it stayed with me.”

I wondered if the mixture and transmutation of loss into gain in Alex, Alfred, and Roberta’s stories was related to their psychosocial maturity/ego development, which measures people’s ability to hold contrasts and engage in evaluations that include shades of grey. Their ego development scores, however, were in the middle of the Catholics’ distribution of ego development scores. Perhaps they displayed emotional maturity and integration, something distinct from psychosocial maturity.

**Three other interesting findings for the Catholics.** The other three correlational relationships unique to Catholics are less dramatic than the one just described and developed. First, religious active coping in narratives was associated with significantly more positive story endings \((r(23) = .45, p < .05)\), and religious meaning-related coping was associated with significantly fewer negative story endings \((r(23) = -.46)\). Stated another way, Catholic participants seemed to narrate their way into positive story endings through religious action and narrate away from negative endings by using religious resources to make meaning after difficult situations. The nonreligious narrative coping themes, however, were not at all influential in regard to story endings like they were for the other three groups.

Next, the two measures of religiousness (overall religiousness: DRI, and religious commitment: RCI) among Catholics were only correlated at a trend level of significance \((r(23) = .36)\), in contrast to highly significant \((r = .70 \text{ to } r = .83)\) correlations among the other three RELTRAD groups. The relationship between the DRI scale of overall religiousness and the other study variables operated among Catholics in a way that was relatively consistent with the way it operated among the other groups: It related positively and significantly with the adaptive
religious coping scales and negatively with the self-directing religious coping scale. The DRI overall religiousness scale also predicted significantly greater levels of psychosocial maturity among Catholics, as it did for Evangelicals. In contrast, correlations between RCI religious commitment and other key study variables were non-significant. It seems, then, that the primary difference was in the way that Catholics interacted with the religious commitment measure, compared with how the other three RELTRAD groups interacted with it. The RCI was created to capture religious commitment regardless of religious tradition (Buddhist, Muslim, Hindu, etc.), but this Catholic/Protestant difference likely reveals a weakness in the measure’s ability to achieve its intended purpose.

Finally, overall religiousness (DRI) among Catholics was related to higher ego development ($r(23) = .43, p < .05$), just as it was for Evangelicals.

**Discussion**

Like a prism that splits white light into its distinct wavelengths, using religious traditions as a moderator allowed participants’ stories to burst forth in more vivid color. The phenomena investigated in Chapters Two and Three were tested as universal relationships: Do hypothesized relationships among religiousness, religious coping, and quality of life hold true among most Christians? It does not seem reasonable, however, to expect that religiousness, religious coping, and quality of life all look the same and relate to each other in the same ways for Baptists as they do for Catholics, or for Episcopalians, or Evangelicals. The strength of the research in this chapter lies in its ability to discover and describe the personality and inner workings of different religious groups.

Chapter Three asked, what modes of religious and nonreligious coping in autobiographical narratives seem to facilitate (or at least accompany) positive psychological
adaptation and psychosocial maturity, and which do not? Those full sample results were strange. None of the tested relationships reached more than trend-level significance, and some of these associations were in the opposite direction from what was predicted. For example, both religious and nonreligious active coping and religious meaning-related coping in narratives were related ($p \leq .1$) to poorer psychological well-being and life satisfaction, rather than to greater psychological well-being and life satisfaction. The current chapter explored potential explanations for this puzzle. Once the sample was divided into discrete religious traditions using the RELTRAD method (Steensland et al., 2000), the picture became much clearer. Religious active coping was indeed positively predictive of life satisfaction for evangelicals, but it predicted significantly poorer life satisfaction for Catholic participants. These contrasting correlations essentially cancelled each other out, suppressing any relationships at the full sample level.

Results for nonreligious active coping in narratives as broken out by RELTRAD group was equally complex: Nonreligious active coping in narratives predicted positive psychological well-being and life satisfaction for black Protestants, but the same theme predicted diminished life satisfaction for Catholics. In addition to potential explanations for this surprising association discussed earlier in the chapter, it could be the case that life satisfaction is better understood as a predictor of narrative themes, rather than as an outcome. Well-being and ego development are both relatively stable individual difference variables, resistant to large enduring shifts (J Loevinger, 1998; Lucas & Diener, 2008), and it could be that these constructs actually create part of the matrix through which people experience their lives and then choose to craft their story. Perhaps those who are more satisfied with their lives feel less compelled to talk about the specific and tangible ways that they coped with prior negative events, at least
among Catholics. Why this might be the case is not quite clear. However, some possibilities include the following.

The Catholic tradition includes features not found in Protestant traditions. Going to confession with a priest and then making tangible offerings of penance to make up for everyday wrongdoings or indiscretions is one example of a Catholic tradition that Protestants commonly reject. Protestant traditions in contrast do not consider human effort to have any potentially meritorious quality. This is a foundational historical, theological difference between Catholic and Protestant traditions, where Protestants believe that people are made righteous or innocent before God purely by their faith, and Catholics believe that righteousness is co-created by God and people together, through right actions (Livingstone). It could be the case, then, that a tangible effort to make things right in the face of difficulty or hardship is closely associated (in the Catholic mind) with penance and a sense of having done something wrong. Perhaps these participants ascribed negativity to themselves or to their sense of well-being and life satisfaction as a result. Although the specific reasons are beyond the scope of the current study to discern, it is clear that navigating the differences related to religious traditions is important to understanding how people adapt to stress and loss in the social world (Torgler & Schaltegger, 2014).

A second potential suppressor effect was discovered through the RELTRAD exploration. This effect emerged in the relationship between nonreligious disengagement coping and satisfaction with life scale scores. The association was negative for black Protestants, as one would expect, but it was positive for mainline Protestants (and nonsignificant for Evangelicals and Catholics). Mainline Protestants described a type of disengagement coping in their narratives that led to greater life satisfaction, while the disengagement coping of black
Protestants was associated with significantly diminished life satisfaction. This may have been a consequence of the significant SES difference between these two groups.

**Conclusion**

The current exploration was a hypothesis-generating research endeavor, and the findings invite further investigation. Because coping behaviors are not fixed but can be learned and improved upon over time, it is important to understand how religious traditions intersect with choices of coping strategies. With more complete understanding of these associations, earnest adherents can make more informed choices about the teachings and traditions they follow. Religious teachers and pastoral counselors can be better informed about the natural consequences of their recommendations. They can also be inspired by stories of the devout that contain profound mixtures of both loss and gain or receive perspective on how members of other religious traditions cope with adversity.
Chapter Five: Conclusion

It goes without saying that life has its challenges. People are hungry for answers to often-unanswerable questions and for effective strategies for navigating the uncertain territory of stress, adversity and loss. The broader U.S. culture provides more clichés than we can count about “rainy days”, “lemons”, and times when “the tough get going” that all attempt to address this essential human desire for control in the midst of difficulty. Religious teachings and traditions provide answers, too, of course. In fact, some of the key psychological purposes that religion serves are to attempt to explain the unexplainable, to provide comfort and a sense of control in the midst of suffering, and to offer tools and strategies to cope (Pargament et al., 2000). Although religion is now generally recognized as an adaptive psychological resource (e.g., Ellison, 1991; Harold G. Koenig et al., 1995; Patock-Peckham et al., 1998; Seybold & Hill, 2001), little is known about the actual mechanisms of religiousness that lead to elevations in well-being. Perhaps at this point even less is known about those aspects of religiousness that diminish or compromise well-being. The dissertation project sought to investigate these mechanisms from many different angles: by means of top down hypothesis testing, bottom up theory generation; quantitative, mixed method, and qualitative analyses; and moderating the analyses by social context (religious tradition).

The key questions addressed through these methods were: Among highly religious Christians in the U.S. (1) how do religious coping strategies that are used to gain control relate to personality traits; (2) do these religious coping strategies operate as mechanisms that lead from personality traits toward—or away from—heightened well-being; (3) what modes of religious and nonreligious coping in autobiographical narratives seem to facilitate positive psychological adaptation and maturity, and which do not; and (4) how are these relationships
similar or different among members of the four largest religious traditions in the U.S.
today? Extensive case-study data on 122 highly religious Christians provided both the
quantitative surveys and the detailed autobiographical narrative data used in the analyses.

Chapter Two was the purely quantitative analysis, and it provided a first-ever glimpse
into the associations between Five Factor Model personality traits and Pargament’s five scales
assessing the use of religiousness to gain control. These analyses found that neuroticism was
generally related to maladaptive religious coping, and overall religiousness was generally
related to adaptive religious coping. For this highly religious sample, the choice to wait
passively for God to take control during times of loss and stress opened a door through which
religiousness could have some negative impact on their life. This passivity emerged as a partial
mediator that provided one potential pathway along which trait neuroticism might unfold into
diminished psychological well-being. As a result, there is initial evidence in this dissertation
project that some of the ways that people draw on their religiousness in attempts to cope with
adversity may reinforce a sense of helplessness and disempowerment in the face of life’s
inherent challenges, rather than bolstering a belief in their agency and efficacy. Although it is
important to honor religious preferences and expression, some religiously grounded strategies
may not actually be effective to restore and elevate psychological well-being, even when
people believe them quite earnestly.

On the more positive side, Chapter Two’s analyses revealed that seeking to control a
stressor by actively partnering with God is a potentially adaptive mechanism through which
religious people could use their religiousness to cope. This may be one mechanism that helps to
explain the positive associations between religiousness and well-being. Such a partnership
potentiates human creativity to move through adversity to a more resolved state. This work of
understanding the role of religious coping in human development and psychological adaptation rises in importance when we recognize that coping strategy selection is a malleable developmental outcome, that most people can and do learn increasingly adaptive coping strategies as they gain life experience (e.g., Carrico et al., 2006), makes. Rather than focusing on the relative stability of personality traits, this work shifts the attention to intentional efforts to improve coping, to increase the use of positive coping strategies and decrease the use of negative ones. As a future research project, it will be important to investigate whether and how intentional and conscious choice of religious coping strategies might show promise as a buffer against the psychological difficulties of high neuroticism, rather than religious coping strategies providing a mechanism to reinforce them.

Chapter Three moved from purely quantitative analysis to a mixed method approach, from coping in quantitative scales to quantifying coping found in qualitative autobiographical narrative data. This analysis also added ego development as a quality of life outcome. As stated in the chapter, these shifts bring a “rubber meets the road” aspect of religious coping into greater relief, allowing closer observation of how people’s religious coping discourse within the context of a life narrative might be cause and/or consequence of their overall quality of life.

Circling back to the potential for coping strategies to change over the life course, either naturally or through intentional action, life narratives are one location where such change can be measured and perhaps even facilitated. Initial longitudinal research shows that narrative change precedes well-being changes (Adler, 2009). If people can shift how they narrate their coping, perhaps this is one road to also shifting their resulting well-being after difficulty, loss or trauma. How people narrate their coping has the potential to influence how well (or not) they emerge from coping with difficult life experiences.
Conceptually, Chapter Three bridged a gap between quantitative and narrative perspectives on coping research by bringing a quantitatively-derived coping typology into the current narrative-based investigation. It also filled gaps within narrative coping research, by recognizing the prevalence of religiousness in narratives as a meaningful coping resource. The coding scheme developed for this project revealed an intricate portrait of religiousness and coping in personal narratives of adversity. Chapter Three’s analyses, however, did not evidence the anticipated connections between religiousness and religious coping in narratives and quality of life outcomes. In fact, some of the correlations were in the opposite direction. Instead, the primary driver of results was overall religiousness (quantitatively measured). Overall religiousness, which potentially influenced well-being through adaptive religious coping strategies (as shown in Chapter Two), was also associated with greater narrative religious meaning-related coping and with more positive endings and fewer negative endings.

Chapter Four was born by viewing Chapter Three (and aspects of Chapter Two) through a prism of religious tradition. When the full sample was refracted into four subgroups (mainline Protestants, evangelical Protestants, black Protestants, and Catholics), previously hidden patterns emerged. Clearly the sample sizes are small and results must be interpreted in that light; however, some compelling patterns among variables and stories emerged that invite further investigation. This project raises questions about the specific narrative correlates of religiousness and prompts further research to understand (1) the active nonreligious language and expression of mainline Protestants’ religiousness, (2) the integration of religious and nonreligious resources in Evangelicals’ coping, (3) the necessity for black Protestants to actively participate in their religion to reap its benefits, and (4) the poignant mixtures of loss and gain of the most religious Catholics found in the current sample. More generally, this
research makes a compelling argument for sampling and sorting research participants by religious tradition whenever possible, rather than massing them together on a single, uniform continuum of religiousness.

This dissertation began with questions regarding how it is that some people successfully use their religion to cope with adversity, and others do not. Also, which individual characteristics or traits influence their choice and expression of religious ways of coping? Both quantitative and autobiographical narrative data spoke to these questions, and the results paint a more complete picture of how neuroticism and overall religiousness combine with passive and collaborative religious coping, respectively, to influence well-being. The results also include a colorful mosaic of highly personal stories of religiousness, coping, and quality of life. These illuminate the necessity to consistently consider religion’s social side (i.e., ties with historically grounded ethno-religious traditions) when contributing to the critical endeavor of deepening our understanding of religion’s role in human development and psychological adaptation to adversity.
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Appendix A

Religious Methods of Coping to Gain Control: 5 RCOPE Scales (Pargament et al., 2000)

Collaborative Religious Coping—seeking control through a partnership with God in problem solving

*1. Tried to put my plans into action together with God.
*2. Worked together with God as partners.
*3. Tried to make sense of the situation with God.

Active Religious Surrender—an active giving up of control to God in coping

*1. Did my best and then turned the situation over to God.
*2. Did what I could and put the rest in God's hands.
*3. Took control over what I could, and gave the rest up to God.

Passive Religious Deferral—passive waiting for God to control the situation

*1. Didn't do much, just expected God to solve my problems for me.
*2. Didn't try much of anything; simply expected God to take control.
*3. Didn't try to cope: only expected God to take my worries away.

Pleading for Direct Intercession—seeking control indirectly by pleading to God for a miracle or divine intercession

*1. Plead ed with God to make things turn out okay.
*2. Prayed for a miracle.
*3. Bargained with God to make things better.

Self-Directing Religious Coping—seeking control directly through individual initiative rather than help from God

*1. Tried to deal with my feelings without God's help.
*2. Tried to make sense of the situation without relying on God.
*3. Made decisions about what to do without God's help.

Note: Scale items were alternated and not presented in block form. Also, scale names and definitions were not on the questionnaire. Instructions for the questionnaire read as follows:

Instructions: The following items deal with the ways you tend to cope with negative events in your life. There are many ways to try to deal with problems. Obviously different people deal with things in different ways, but we are interested in how you tend to deal with negative events. Each item says something about a particular way of coping. We want to know to what extent you've done what the item says. How much or how frequently? Don’t answer on the basis of whether it worked or not – just whether or not you tend to do it. Use the following scale from 1 – 4 to rate each item. Try to rate each item separately in your mind from the others. Make your answers as true FOR YOU as you can. Circle the answer that best applies to you.

1 – Not at all  2 – Somewhat  3 – Quite a bit  4 – A great deal
Appendix B

Coding Manual: Religious Coping in Narratives

Final Draft (3/3/11)

McAdams’ (2006) life story interview prompts participants to narrate many different types of scenes from their lives (e.g., high point, low point, turning point, childhood, adolescent, and adult memories, as well as an imagined future scene). In addition, the Faith &Politics Study prompted participants to narrate life scenes depicting the beginnings of their faith, faith low point, faith high point, and their politics. Three of these scenes are used in this project: Low point, negative childhood, and faith low point scenes (See Appendix A for the interview prompts for these three scenes). People’s narrations of very low points in their lives should generally contain examples of the difficulties they had to cope with, descriptions of how they coped with them, and perhaps even the meanings of those scenes in their lives overall. In total, there are 12 narrative codes. These attempt to capture the adverse events, religious and nonreligious coping with those events, and story endings—in each of the three nadir scenes of our participants’ life stories.

12 Narrative Themes:

1. The Event: Event Text

The Coping Process

2. Active: Nonreligious Primary Control Engagement Coping

3. Meaning-related: Nonreligious Secondary Control Engagement Coping

4. Disengagement: Nonreligious Disengagement Coping

5. Religious Active: Religious Primary Control Engagement Coping

7. Religious Disengagement: Religious Disengagement Coping

**Story Endings**

8. Positive Ending

9. Negative Ending

**The Event**

The first decision a participant makes as they narrate an episode of their story is to choose a life event to talk about. Similarly, the first task a coder will complete when coding a narrative low point scene is to identify the negative event that is the subject of the participant’s story. This should be relatively straightforward. However, some participants do describe two or more events, in which case the coder will have to decide which is the predominant event and usually only code the coping associated with this event. The following points should help clarify:

- Participants often identify the event clearly before they get too far into the story. For example, “It would have to be the death of my father….”
- If the participant does not identify the event immediately, then it will likely be early in the story.
- When a participant talks about one event and then begins to describe another (unrelated) event, the first event is given preference. That is, unless the participant clearly states that they have changed their mind and now wish to talk about a different event than the
one they began with. In this case, we follow the participant and code only the second event.

- If a participant begins with one story, and this leads to another story that is closely related or part of the original story, then all coping related to both events should be coded.

Procedure: (1) Simply enter text into the spreadsheet that succinctly describes the event (or highlight text in coding software). (2) Select an appropriate event category from a drop-down menu (e.g., personal health threat, relationship trouble, death of close significant other, career/job difficulty, religious disillusionment, other).

**The Coping Process**

Once the negative event has been identified, the coder should read the narrative for evidence of 8 different narrative coping themes: Nonreligious Primary Control Engagement Coping, Nonreligious Secondary Control Engagement Coping, Nonreligious Disengagement Coping, Religious Primary Control Engagement Coping, Religious Secondary Control Engagement Coping, Religious Disengagement Coping, and Other Religious Coping. These 7 themes are independent. That is, a story may contain elements that qualify as any one of the themes, multiple themes, all themes, or none of them. Each theme is scored as present (+1) or absent (0) from each scene.

Coding will proceed from 2 different vantage points, to assure that all instances of religious and nonreligious coping are identified. First, coders will read through the scene for any evidence of coping with the negative event. These coping attempts will be coded for nonreligious forms of Primary Control Engagement, Secondary Control Engagement, and
Disengagement coping. Second, coders will look for evidence of religion used to cope and then code these instances for religious forms of Primary Control Engagement, Secondary Control Engagement, and Disengagement coping.

2. Nonreligious Active Coping (Nonreligious Primary Control Engagement Coping)

In essence, this collection of coping styles is “aimed directly at altering objective conditions, such as the stressor or one's emotional response to the stressor” (p.977) (Connor-Smith, Compas, Wadsworth, Thomsen, & Saltzman, 2000, p. 977). It is what a person does to take charge of some aspect of the situation. This theme includes efforts aimed at various types of problem-solving, support seeking/emotional expression, and emotion regulation. Carver, Scheier, & Weintraub (from the development of the COPE scale; 1989), describe active coping, planning, suppression of competing activities, restraint coping, and seeking social support (PCE) coping strategies in the following ways:

- “Active coping is the process of taking active steps to try to remove or circumvent the stressor or to ameliorate its effects. Active coping includes initiating direct action, increasing one's efforts, and trying to execute a coping attempt in stepwise fashion” (p. 268).
- “Planning is thinking about how to cope with a stressor. Planning involves coming up with action strategies, thinking about what steps to take and how best to handle the problem” (p. 268).
- “Suppression of competing activities means putting other projects aside, trying to avoid becoming distracted by other events, even letting other things slide, if necessary, in order to deal with the stressor” (p. 269).
• “Restraint coping is waiting until an appropriate opportunity to act presents itself, holding oneself back, and not acting prematurely” (p. 269).

• “People can seek social support for either of two reasons, which differ in the degree to which they imply problem focus. Seeking social support for instrumental reasons is seeking advice, assistance, or information. This is problem-focused coping. Seeking social support for emotional reasons is getting moral support, sympathy, or understanding. This is an aspect of emotion-focused coping. We have distinguished between these two social support functions because they are distinct conceptually. In practice, however, they often co-occur” (p. 269). [These are both PCE coping]

Very general examples of this theme might include (Connor-Smith, et al., 2000):

1. Thinking of different ways to change the problem or fix the situation (making a plan), also creating and carrying out a plan of action.

2. Keeping feelings under control when necessary, then letting them out when they won't make things worse.

3. Letting someone or something know how they feel (could be a parent, teacher, friend, brother/sister, stuffed animal, pet; NOT God or religious person).

3. Nonreligious Meaning-Related Coping (Secondary Control Engagement Coping)

The key component to this collection of coping styles is a focus “on adaptation to the problem” (Connor-Smith, et al., 2000, p. 977). This is often what a person does when the situation cannot be (readily) altered or fixed. This theme includes efforts aimed at distraction (especially relevant for dealing with chronic physical pain), cognitive restructuring (e.g., considering the opportunities for personal transformation or growth that might arise as a result
of the stressful experience), positive thinking (e.g., seeing the bright side or thinking things are not so bad after all), meaning-making, and acceptance. Carver, Scheier, & Weintraub (from the development of the COPE scale; 1989), describe positive reinterpretation (reappraisal and growth) and acceptance coping strategies in the following ways:

- Positive reinterpretation (positive reappraisal) and growth includes “construing a stressful transaction in positive terms ” (p. 269).
- They describe acceptance as both “acceptance of a stressor as real” and “acceptance of a current absence of active coping strategies” (p. 270).

Very general examples of this theme might include (Connor-Smith, et al., 2000):

1. Telling oneself that everything will be all right.
2. Thinking about the things that they are learning from the situation, or something good that will come from it.
3. Realizing that they just have to live with things the way they are.
4. Keep their mind off the stressor through positive or productive activities (e.g., by exercising, seeing friends [different from social support because the interaction is not for the purpose of stressor-related consolation or problem-solving], doing a hobby)

(Note: Flag instances of things like playing video games, overeating, and watching TV, which might be more accurately put in disengagement coping.)

Based on Park’s (2010) review and summary of the meaning-making and coping literature, narrative scenes will be coded for evidence of meanings made in response to stressful events. Park identifies nine key types of meaning: A sense of having “made sense”, Acceptance, Reattributions and causal understanding, Perceptions of growth or positive life changes, Changed identity/integration of the stressful experience into identity, Reappraised meaning of
the stressor, Changed global beliefs, Changed global goals, and Restored or changed sense of meaning in life. Descriptions of meanings made from Park (2010, pp. 260-261):

- **Sense of having “made sense”:** “There are “vast variations in understanding of questions regarding making sense. For example, bereaved family members referred to acceptance, growth, predictability, and other notions in describing the sense they had made (Davis et al., 1998). One participant stated “It makes sense, but I hate it. I don’t understand why cancer has to be, but it just is.” Another said he had made sense of his loss and continued, “The sense of his death is that there is no sense. Those things just happen” (Davis et al., 1998,p. 561). In open-ended responses, people with multiple sclerosis described their “sense made” mostly in terms of new opportunities, goals, and personal growth (Pakenham, 2007), which sounds very much like posttraumatic growth, described below.”

- **Acceptance:** “The extent to which individuals report having achieved a sense of acceptance or of having come to terms with their event has also been considered meaning made (Evers et al.,2001). Individuals’ open-ended responses regarding having made sense cited in Davis et al. (1998) and Pakenham (2007) evinced a great deal of acceptance, suggesting that acceptance is a common type of made meaning.”

- **Reattributions and causal understanding:** “Several theorists have proposed that an understanding of the cause of an event is an important type of meaning made (e.g., Janoff-Bulman & Frantz,1997; cf. Thompson & Janigian, 1988). Although attributions are assumed to occur instantaneously as part of the appraisal process (Lazarus, 1991), researchers typically assess attributions long after the event has occurred and consider them products of meaning making attempts (e.g., Davis et al., 1998; Dollinger, 1986;
see Tables 2 and 3). Such attributions may more accurately be considered reattributions, as they have likely undergone considerable alteration since the event (Westphal & Bonanno, 2007).

- **Perceptions of growth or positive life changes**: “This type of meaning made is perhaps the most commonly assessed (e.g., Abbey & Halman, 1995) and has garnered increased attention in recent years (e.g., Calhoun & Tedeschi, 2006). Many people report positive changes, such as improved relationships, enhanced personal resources and coping skills, and greater appreciation for life, as a result of highly stressful experiences (Park & Helgeson, 2006). Although such changes are usually conceptualized as personal growth, people also identify other positive changes, some of which are simply perks (e.g., diabetic children getting snacks; Helgeson, Lopez, & Mennella, 2009) or fortunate side benefits (e.g., financial gain; McMillen, Smith, & Fisher, 1997). In all of these ways, the appraised meaning of the stressor is transformed to a more positive (and presumably less discrepant) one, regardless of whether the perceived changes are veridical (Park, 2008a).”

- **Changed identity/integration of the stressful experience into identity**: “Another potentially important outcome of meaning-making involves identity reconstruction, shifts in one’s personal biographical narrative as a result of experience (Gillies & Neimeyer, 2006). For example, cancer survivorship has been described as involving integration of the cancer experience into one’s self-concept, along with a sense of “living through and beyond cancer,” resulting in a revised identity (Zebrack, 2000). In spite of the theorized importance of identity change, very little research has focused on it as an outcome of meaning making (cf. Neimeyer, Baldwin, & Gillies, 2006).”
- **Reappraised meaning of the stressor**: “Individuals often transform the appraised meaning of an event, rendering it less noxious and more consistent with their preexisting global beliefs and desires. For example, individuals may come to see an event as benign relative to that experienced by others (Taylor et al., 1983) and sometimes see themselves as relatively fortunate that the event was not worse (Thompson, 1985). They may also reappraise the nature of the event, as in reconstruing their relationship with the deceased in bereavement (Bonanno & Kaltman, 1999), or reevaluate the implications of the event in more positive ways (Resick et al., 2008).

- **Changed global beliefs**: “In addition to resolving discrepancies by changing the appraised meaning of stressors, individuals can make changes in their global meaning. For example, global belief changes may involve coming to see life as more fragile or changing one’s view of God as being less powerful or benevolent than previously thought (Epstein, 1991; Park, 2005a).”

- **Changed global goals**: “Meaning making can also result in identifying goals that are not attainable and abandoning them or substituting alternative goals (Martin & Tesser, 1996; Thompson & Janigian, 1988). For example, couples going through fertility treatment may decide that having a biological child is less important than rearing a child and shift their efforts toward adoption (Clark, Henry, & Taylor, 1991). There are many instances of people experiencing great traumas or losses, such as through violence or war, and going on to devote their lives to a related cause (Armour, 2003; Grossman, Sorsoli, & Kia-Keating, 2006).

- **Restored or changed sense of meaning in life**: “Through meaning making, people may experience reductions or increases in their sense of meaning in life (Janoff-Bulman...
& Frantz, 1997). Few studies have focused on changes in or restoration of a sense of meaning in life as an outcome of meaning making, but such restoration may be an important outcome of the meaning-making process (Jim, Richardson, Golden-Kreutz, & Andersen, 2006; Park, Malone, Suresh, Bliss, & Rosen, 2008).

Other Meanings-Made:

- **Counter-factual thinking**: Any evidence that the participant is comparing current circumstances with what might have been counts as a meaning made.

  Note: A stressful event necessarily creates a distance between "reality" and the participant's previously held beliefs. This dissonance is not coping or meaning making. It is simply part of the stressful event, a threat to the person's previously held beliefs. The exception to this is if the participant explicitly describes coming to terms with this new belief/reality (this is coping and meaning making). What is not coping & meaning making is when the person says something like, "I was mugged, and I never thought that would happen to me." That is a stressful event and a previous belief that was challenged by the event. Coping & meaning-making takes the form of the participant adding something like, "that was a tough lesson to learn, that I am more vulnerable than I'd previously thought." This second example is evidence that the participant's belief has indeed shifted as part of a coping and meaning-making process.

**4. Nonreligious Disengagement Coping**

The key component to this collection of coping styles is a disengagement from the event and any efforts to positively adapt to it. This theme includes avoidance, denial, wishful thinking, withdrawal, or substance abuse. Carver, Scheier, & Weintraub (from the development of the COPE scale; 1989), describe denial (D) coping strategies in the following ways. “We chose to
operationalize denial here as reports of refusal to believe that the stressor exists or of trying
to act as though the stressor is not real” (p. 270). This can also include refusal of the participant
to talk about the event or related emotions.

Very general examples of this theme might include (from Connor-Smith, et al., 2000):

1. Trying to stay away from people and things that make them feel upset or remind them
   of the problem.
2. Regarding the stressor, they tell self, "This isn't real."
3. They deal with the problem by wishing it would just go away, that everything would
   work itself out.
4. Abusing drugs or alcohol

**Religious Coping**

Once coders evaluate the overall coping strategies used in each scene, they will further
evaluate whether or not the participant draws on their religion to narrate their coping processes.
This proceeds in three steps: coding for religious versions of the three coping styles described
above, for religious coping that does not fit in those 3 coping styles, and for religion in the
narratives that is not related to coping.

First, coders will evaluate whether the religious coping represents religious versions of
active, meaning-related, and disengagement coping. Each scene will be coded for the presence
(+1) or absence (0) of each of these. Most of the coping literature has placed religious coping in
its own category, a catch-all that measures a proclivity to using religion to cope. The result is a
generally positive and undifferentiated view of religious coping. Work by Pargament and others
(e.g., Ano & Vasconcelles, 2005; Pargament, Koenig, & Perez, 2000) points to both positive
(adaptive) and negative (maladaptive) ways of using religion to cope with adversity. It is an open question whether or not religious ways of coping map directly onto the coping typologies developed to assess nonreligious coping. Coders will endeavor to identify instances of active, meaning-related, and disengagement coping that involve the participant’s religion. Pargament, Koenig, & Perez (2000) developed an instrument to assess a variety of different religious coping strategies, the RCOPE. The specific religious coping strategies in the RCOPE were classified into active, meaning-related, and disengagement coping forms, to help coders identify some of the ways that people have already been discovered to use their religion to cope.

Second, coders look for the presence (+1) or absence (0) of religion (e.g., religious activities, relationships, institutions, beliefs) as a coping resource that does not fit into religious active, religious meaning-related, and religious disengagement coping categories. Religion is used to cope, but in some different way. Note, if a participant mentions religion, but it is completely incidental to the coping story, that mention will not be counted here. Third, each scene will be read for the overall presence (+1) or absence (0) of religion (e.g., religious activities, relationships, institutions, beliefs) in participants’ stories that is unrelated to coping.

5. Religious Active (Religious Primary Control Engagement) Coping

In essence, this collection of coping styles is aimed at changing either the stressor or related emotions by drawing on religious resources. People use their religion to take charge of the situation in some way. Similar to nonreligious PCE coping, this theme includes efforts aimed at various types of problem-solving, support seeking/emotional expression, and emotion regulation. The difference is that these activities include some aspect or form of religion and/or
spirituality. All aspects of PCE coping described in the earlier section apply here, too.

Explicitly religious PCE coping strategies may include:

- **Collaborative Religious Coping**: “Seeking control through a partnership with God in problem (e.g. Worked together -with God as partners)”

- **Active Religious Surrender**: “An active giving up of control to God (e.g. Did what I could and put the rest in God’s hands)”

- **Seeking Spiritual Support**: “Searching for comfort and reassurance through God’s love and care (e.g. Sought God’s love and care)”

- **Religious Purification**: “Searching for spiritual cleansing through religious actions (e.g. Confessed my sins)”

- **Seeking Spiritual Connection**: “Experiencing a sense of connectedness with forces that transcend (e.g. Thought about how my life is part of a larger spiritual force)”

- **Seeking Support from Clergy/Church Members**: “Searching for comfort and reassurance through the love and care of congregation members and clergy (e.g. Asked others to pray for me)”

- **Seeking Religious Direction**: “Looking to religion for assistance in finding a new direction for living when the old one may no longer be viable (e.g. Prayed to find a new reason to live)”. Note: Depending on the details, this sort of coping may be both religious active (e.g., praying to engage God in the problem) and religious meaning-related (e.g., gaining new acceptance/understanding of the situation) coping.

- **Religious Forgiving**: “Looking to religion for help in shifting from anger, hurt and fear associated with an offense to peace (e.g. Asked God to help me overcome my
bitterness).” Note: There might be an acceptance aspect to this type of coping. If so, that would count as religious meaning-related coping.

- **Religious Conversion**: “Looking to religion for a radical change in life (e.g. Looked for a total spiritual reawakening)” Note: This could be religious meaning-related coping if it seems like cognitive restructuring.

- **Religious helping**: “Attempting to provide spiritual support and comfort to others (e.g. Tried to give spiritual strength to others)” Note: This could be an active strategy to gain intimacy & support (religious PCE coping) or an attempt at distraction from the stressor (religious SCE coping).

- (Note: **Marking Religious Boundaries** (“Clearly demarcating acceptable from unacceptable religious behavior and remaining within religious boundaries (e.g. Avoided advice that was inconsistent with my faith)” could be an engagement strategy if it seems like an active pursuit of religious goals; however, it is more likely an avoidance of different others (religious disengagement).


This coping strategy includes efforts aimed at distraction, cognitive restructuring, meaning-making, positive thinking, and acceptance. All aspects of meaning-related coping described in the earlier section apply here, too. Pargament’s (Pargament, et al., 2000) research on religious coping includes several forms of cognitive restructuring that may be present in the narratives:

- Benevolent Religious Reappraisal: “Redefining the stressor through religion as benevolent and potentially beneficial (e.g. Tried to find a lesson from God in this event)”
• Religious Distraction: “Engaging in religious activities to shift focus from the stressor (e.g. Focused on religion to stop worrying about my problems)”

• Religious helping: “Attempting to provide spiritual support and comfort to others (e.g. Tried to give spiritual strength to others)” Note: This could be an active strategy to gain intimacy & support (religious active coping) or an attempt at distraction from the stressor (religious meaning-related coping).

7. Religious Disengagement Coping

This coping strategy includes efforts aimed at avoidance, denial, wishful thinking, withdrawal, or substance abuse, as they relate to the participant’s religiousness. All aspects of D coping described in the earlier section apply here, too. RCOPE subscales that most clearly fit into this category include:

• Passive Religious Deferral: “Passive waiting for God to control the situation (e.g. Didn’t do much, just expected God to solve my problems for me)”

• Pleading for Direct Intercession: “Seeking control indirectly by pleading to God for a miracle or divine intercession (e.g. Pleased with God to make things turn out okay)”

• Marking Religious Boundaries: “Clearly demarcating acceptable from unacceptable religious behavior and remaining within religious boundaries (e.g. Avoided advice that was inconsistent with my faith)” Note: This could be a form of social withdrawal.

• Interpersonal Religious Discontent: “Expressing confusion and dissatisfaction with the relationship of clergy or members to the individual in the stressful situation (e.g. Wondered whether my church had abandoned me)”. Note: Although this could be seen as a negative religious PCE coping attempt (the flip side of seeking social support),
Tobin et al (1989) find evidence that social withdrawal is primarily a disengagement coping strategy.

**The Resolution: Story Endings**

The third phase of the narrative investigation involves coding each scene for the affective valence and “goodness” versus “badness” of the participant’s story ending. First the ending must be identified. The portion of the story that is most proximate to the current day is the story ending. This could be the last thing that the participant tells about the negative event, and/or it could be what he or she says is happening at the time of the study interview. It is also the literal last words of the narrative, the part of the story that the participant chooses to cap the story off with.

Because positive and negative emotionality are not opposite ends of a singular dimension (e.g., happiness is not the opposite of sadness; Rafaeli & Revelle, 2006), scenes will be coded for the presence (+1) or absence (0) of both positive endings and negative endings.

Hypothetically, each scene can end positively, negatively, neutrally (neither positive nor negative - unlikely), or mixed (both positive and negative). Scores for each scene will be summed, resulting in total positive ending and negative ending scores, with a possible range of 0 to 3 for each.

**8. Positive Ending Valence**

The coder should assess whether (1) the story ends in an objectively positive way or (2) the narrator tells the story in a way that leads you to conclude that they believe it was a good ending. First, to get a +1, the ending can include positive feeling words (e.g., happiness, joy,
excitement, hopefulness) or describe an event/ending that most would consider a positive one (e.g., completed a goal, grew from the experience, the participant got what they wanted, or their life “returned to normal”). Second, even if the ending does not seem objectively good to the coder, if the participant talks about the ending such that he or she found it to be a good ending, this receives a +1 as well.

9. Negative Ending Valence

The coder should assess whether (1) the story ends in an objectively negative way or (2) the narrator tells the story in a way that leads you to conclude that they believe it was a bad ending. First, to get a +1, the ending can include negative feeling words (e.g., sadness, fear, shame) or describe an event/ending that most would consider a negative one (e.g., they failed to complete a yet desired goal, they have lasting regret, or their life was forever marked or changed in some negative way). Second, even if the ending does not seem all that bad to the coder, if the participant talks about the ending such that he or she found it to be a bad ending, this receives a +1 as well. From King (2004): Examples of unhappy endings for parents of Down Syndrome children include the following.

- “Images of adults with DS [Down Syndrome] flooded my mind. They were not pretty images. I was afraid he would die from the surgery and more afraid that he wouldn’t.”
- “Finding out was devastating. I was depressed, didn’t want him. When I told my mother, she fainted. My other child became so upset due to the circumstances that she vomited. It was simply devastating.”
- “We were given an Exceptional Parents magazine. On the way home from the blood test, I found a picture of a crib with a lid on it, like a cage. I remember wondering, what do
we have? What are we faced with? I also remember thinking that now we’ll never be normal”
Coding Manual References


Appendix C

Interview Prompts for 3 Low Point Scenes (from the Faith, Politics, and the Life Story Study)

**Overall Low Point Scene**

“Thinking back over your entire life, try to remember a specific experience or event in which you felt extremely negative emotions, such as deep sadness, fear, strong anxiety, terror, despair, guilt, shame, etc. This does not necessarily have to be the worst thing that ever happened in your life, if you are not comfortable talking about that. But it should be something pretty bad. Even though this memory is unpleasant, I would appreciate your attempt to be as honest and detailed as you can be in describing it. What led up to this negative scene? What happened in the event? Who was involved? Where and when did it happen? What were you thinking and feeling in the event? Why is it an important event? What impact has this low-point event had on who you are today?”

**Negative Childhood Memory**

“The fifth scene is an early memory from childhood that was emotionally negative. Please go back in time and try to recall a scene from your childhood, as early as possible, that today stands out as vivid or important in some way and which you experienced at the time in an emotionally negative way. This would be a “bad” memory from childhood. Please describe this negative scene from childhood in detail. What led up to this event? When and where did it happen? Who was involved? What were you thinking and feeling? Why is it an important event? What impact did it have on you?”
Faith Low Point Scene

“Now, please try to identify a scene in your life having to do with your religion or spirituality that stands out today as a low point. This would be a negative religious or spiritual experience. It might be a period of profound doubt or questioning, a period of fear or sadness in your spiritual life, a time when your religious or spiritual orientation to life reached a very negative level in some sense. Please describe the scene in detail. When and where did it occur? Who was involved? What were you thinking and feeling at the time? How did the scene resolve itself? Why is this scene important to you today?”