

Religiosity and Sustainable Development: Application of Positive Psychology

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Positive psychology emphasizes human strength and potential, as much interest in building the best things in life as in repairing the worst. One of the four pillars in positive psychology is resilience. Resilience refers to a set of individual-level variables that protect well-being under stressful circumstances. Resilience also implies ability to resist, effective coping, recover from, and succeed in the face of adverse life experiences. This paper attempts to test empirically the model of resiliency and the importance of religiosity in developing resilient adolescents by using structural equation modelling (SEM). The adolescents' conception of resiliency measures dimensions such as active skills, future orientation, risk taking and independence while religiosity is examined through one's ability to cope and become involved in religious activities. This study was done on a total sample of 308 adolescents from the east-coast of Malaysia. The Resiliency Belief Scales (Trammel, 2003) and Religiosity Scale (Boswell, 2003) were employed in this study. Analysis of the items resulted in a well-fitting model with composite reliability (CR) of .64 and variance extracted (VE) of 72% ($\chi^2/df = 1.199$; GFI = .943; CFI = .989; RMSEA = .025; AIC = 259.806). The direction and magnitude of the factor loadings were substantial and statistically significant. This shows that the model fits with the sample of data in this study. Religiosity explains 70% of variance in resiliency.

Key words: (*Sustainable Development, Positive Psychology, Religiosity, Resilience, Adolescence*).

Introduction

Positive psychology has been developed since Martin Seligman's APA president address in 1998 (Wong, 2011). Positive psychology has effectively changed the landscape of mainstream psychology and it continues to grow exponentially in the research, teaching and applications of psychology. Virtue, meaning, well-being and resilience are the four pillars of positive psychology. Resilience in recent years has been the focus of an increasing number of books, articles and research in the human survival, service and including the field social work (Cabness, 2003).

There is no consensus regarding operational definitions of resiliency. Resiliency finds its theoretical and empirical roots in the developmental psychopathology literature on vulnerability to stress (Cabness, 2003). Resilience is the capacity for and outcome of adjustment in spite of challenging or threatening circumstances. Therefore, resilience is the positive pole of the vulnerability-resilience continuum (Wong, 2011). Resilience is seen as an internal factor which is highly influenced by the environmental factors and the individual's developmental process (Holmes, 2006).

Religiosity was found to strengthen the individual's ability to fight back against the pressure exerted by the environment (Griffing, 2002). This implies that a deeply religious individual will be in the position to withstand all kinds of pressures and problems encountered in his or her life and be able to develop and enjoy good mental health. Thus, the goal of education should not simply be to educate individuals cognitively but also spiritually so that they can stand up to any forms of adversity (Carlton, 1991).

Literature Review

Pearce and Haynie (2004) considered religiosity as one of the protective factors needed to develop a resilient individual. However, in the past, psychologists, such as Sigmund Freud, did not pay much attention to the possibly crucial role of religiosity in human development. Nevertheless, psychologists like William James and Carl G. Jung did emphasize on the importance of the attribute in human development in their work (Chase, 2001). The transformation made of DSM-III R to DSM-IV (Diagnostic and Statistical Manual of Mental Disorders) has led to the acceptance of religiosity as an additional condition to be emphasized in clinical observation. To date, religiosity is believed to be an important factor which helps to heighten one's internal strength or ability to deal with hardships and misfortunes such as trauma, divorce, loss of jobs and physical disability (Eubanks, 2006).

Adolescents are usually categorized as the vulnerable or at-risk group in society because their behavior tends to be easily influenced by the environment they live in. In an attempt to make

such transition, many may fail due to their inability to withstand the real-life overwhelming challenges. Resilience should be established among adolescents because it can protect them against health risk behaviours such as suicide ideation or attempts (Morrison, 2003). This study focused on adolescents because as individuals age from childhood to adulthood, they pass through a critical period during which the characteristics of maturity, cognitive skills, coping skills and relationships develop. According to Resnick et al. (1993), the major health risks facing the estimated 34 million adolescents in the U.S. today are traceable to psychosocial, behavioral and economic factors (Morrison, 2003). In 2006, Malaysian government has approved additional expenses of RM6.1 million per year to handle social problems, especially among adolescents (Malaysia's Education Ministry, 2006).

However, literature reviews have given more emphasis on risk factors compared to factors that contribute strengths (Borman & Rachuba, 2001). By focusing on strength or resilience, we can recognize the potential each individual has. Furthermore, resilience can function as innate drivers to achieve self-actualization, increased motivational energy to grow, potential buffer to stress, capacity to bounce back, recover from adversity and sustainable development among adolescents.

The main purposes of this study are to develop a model of resilience and to examine whether religiosity contributes to resilience of adolescents. The objectives of this study are:

1. To establish the reliability and validity of Resiliency Belief Scale (RBS) and Religiosity Scale (RS); and
2. To develop a model of resilience and examine whether religiosity contributes to resilience of adolescents.

Methodology

Sample

This study involved a total sample of 308 adolescents from the east-coast of the peninsular of Malaysia, representing 45% male and 55% female sample. The sample was divided into two groups: 160 and 148 respectively, for cross-validation analysis. An approved letter from Ministry of Education and State Department of Education was attached with the questionnaire. The questionnaire was group administered to the students during their regular class hours with permission from their school principals and teachers. The participants were given brief description of the research project and the process of informed consent was performed.

Instrument

The two instruments used in this study are Religiosity Scale and Resiliency Belief Scale. Religiosity Scale (RS) was developed by Boswell (2003). This five-point response scale consists of 8 items that measure religious involvement and religious coping.

Resiliency Belief Scale (RBS) based on Mrazek & Mrazek, 1987 and was developed by Jew, 1997 (as cited in Trammel, 2003). The scale consists of 45 items. Conceptualization of RBS is based on three factors; active skills, future orientation, risk taking and independence. The active skills focus on the skills needed to be resilient such as rapid responsiveness to danger in order to avoid harm, information seeking and cognitive restructuring of painful events. Future orientation is related to the conviction of being loved, optimism, altruism, formation of relationship for survival, positive projective anticipation and hope. Risk taking and independence are related to ability of the adolescents to take risk or decisive risk taking, confident, competence and independent.

Using back to back translation procedure, the items were translated from English to Malay by two experts in English and Malay languages. The sample was required to indicate their beliefs and conceptions of the resiliency assessment of RBS on a six-point response scale (Strongly Agree, Moderately Agree, Agree, Disagree, Moderately Disagree and Strongly Disagree). Each statement was worded in a manner to capture the meaning attached to one of the three dimensions.

Results and Discussion

The main task in this model testing procedure is to determine the goodness of fit between the hypothesized model and the sample data. To arrive at the conclusion, a confirmatory factor analysis (CFA) was conducted on the hypothesized structural model using Analysis of Moment Structure (AMOS) version 7. Assessment of the measurement model involved confirmatory factor analysis (CFA) (Byrne, 2016). CFA assessed the reliability and validity of the individual items and the overall measurement model. The program adopted maximum likelihood estimation to generate estimates in the measurement model.

Confirmation of the overall fit of the measurement model using CFA was obtained from the Maximum Likelihood estimation, Chi-Square (χ^2) statistics produced by AMOS, and various other goodness-of-fit criteria. Byrne (2016) suggested the goodness of fit indexes are the chi-square (χ^2), the smaller the chi square, the better and p value greater than .05, Goodness of Fit Index (GFI) and Comparative Fit Index (CFI) greater than .90 and the absolute fit of the model, Root Mean Square Error of Approximation (RMSEA) below .08.

The overall fit of the 53-item measurement model is summarized in Figure 1. The goodness-of-fit results indicate the hypothesized model is consistent with the data. Root mean square error of approximation (RMSEA) has been recognized as one of the most informative criteria in covariance structure modeling. The RMSEA takes into account the error of approximation in the population (Byrne, 2016).

In the analysis of data by using structural equation modeling (SEM), the researcher makes use of estimates of composite reliability and variance expected. The analysis for composite reliability (CR) resulted in high values of .64 and variance extracted (VE) of 72% which indicate that the indicators are really measure the latent.

To further validate the likelihood of the hypothesized model, cross-validation was applied on the data collected from 308 samples. The results of this analysis shows the well-fitting model (Table 1).

Table 1: Measures of Goodness of Fit based on Confirmatory Factor Analysis (CFA)

Latent Variables (Resiliency)	N1 = 160	N2 = 148	Latent Variable (Religiosity)	N1 = 160	N2 = 148
χ^2/df	1.47	1.53	χ^2/df	2.29	1.58
GFI	.90	.95	GFI	.99	.99
CFI	.94	.92	CFI	.99	.99
RMSEA	.06	.06	RMSEA	.09	.06

In the analysis of CFA, all items of resilience and religiosity have non-zero loadings to all factors. The direction and magnitude of the factor loadings for the maximum likelihood estimation were substantial and statistically significant. The model was free from offending estimates and the internal consistency estimates satisfied the standard deemed necessary in scale construction. Furthermore, analysis of the 53 items from both instruments resulted in a well-fitting model, ($\chi^2/df = 1.199$; $GFI = .943$; $CFI = .989$; $RMSEA = .025$; $AIC = 259.806$). Both fit indicators, the GFI and CFI exceeded the threshold of .90, the standard deemed important for model fit (Byrne, 2016). The root mean square error of approximation ($RMSEA = .06$) indicated a well fitted hypothesized model. Root Mean Square Error of Approximation (RMSEA) has been recognized as one of the most informative criteria in covariance structure modeling. The RMSEA takes into account the error of approximation in the population (Byrne, 2016). Values less than .05 indicate good fit and values as high as .08 represent reasonable errors of approximation in the population. For CFI (Comparative Fit Index) and GFI (Goodness of Fit Index), values close to 1.00 being indicative of good fit.



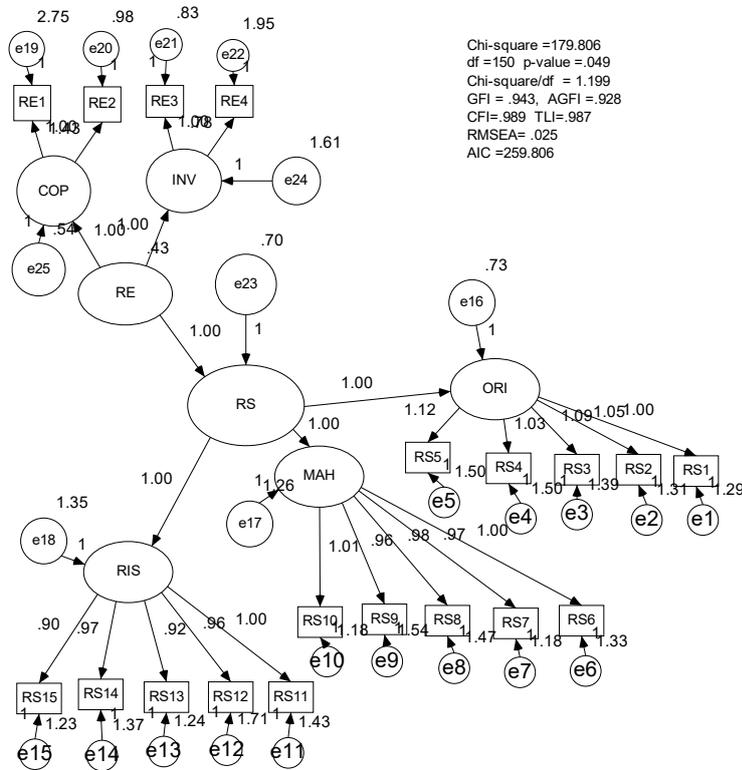
Although a value of $>.90$ was originally considered representative of a well-fitting model, a revised cutoff value close to $.95$ has recently been accepted (Byrne, 2016).

The overall fit of the 53-item structural model is summarized in Figure 1. The goodness-of-fit results indicate the hypothesized model is consistent with the data and religiosity contributes strongly to resilience in this model ($R^2 = .70$).

Religiosity explains 70% of variance in resiliency. In other words, the variation of 70% shows that religiosity strongly contributes to resilience in this age span. This study set out with the aim of assessing the importance of religion in building resilience for sustainable development among adolescents. Religion is important for resilience; find a means for expressing your spiritual needs. This can be in the form of a mosque, a fellowship support group, or an outing with friends who have similar beliefs. Religiosity is important for the human spirit. It can also help to foster resilience in adolescents. The findings lend support to the claim that religion is important for resilience. It helps in times of crisis and stress. It also provides coherence, faith, purpose, stability and a positive attitude. This study produces results which are consistent with the finding of other previous studies on religiosity and resilience (Eubanks, 2004; Griffing 2002; Chase, 2001).

The results of the present study forward evidence for construct validity for religiosity and resilience. Furthermore, both instruments demonstrated evidence of internal consistency reliability. The findings also show that the RBS and RS are reliable and valid measures to be employed in assessing resilience and religiosity among adolescents. Evidently, the current study which made use of RBS and RS in Malay version yields consistent findings with previous studies which used the English version of the measures.

Figure 1. Model of Resilience and Religiosity: The Hypothesized Model



Conclusion

This study will contribute to a greater understanding of the social and cultural foundations of resilience, shedding light on resilience building and the promotion of human sustainability. This study also has implications for educational and psychological practices, especially in building strength and potential of adolescents. Since the 53-item structure yields a valid and reliable structural model, the conception scale is therefore, useful in conducting diagnostic assessment of resilience and religiosity among youths in Malaysia. The findings of this study forward evidence that religiosity can help to foster resilience in youth. This research contributes to a greater understanding of resilience building, the promotion of mental and spiritual health of Malaysian youth which are crucial for sustainable development of youth. Future research should examine whether the present findings generalize to other samples and settings.



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