

Haigazian University

Contributions of Perceived Parental religiosity, Perceived Positive Parenting Practices and  
Religiosity to Psychological Well-being of Emerging Lebanese Adults

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A Thesis submitted to the Faculty of Social and Behavioral Sciences in partial fulfillment of the requirements for the Masters of Arts in Psychology – Emphasis: Clinical Psychology at Haigazian University.

Beirut-Lebanon

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Contributions of Perceived Parental religiosity, Perceived Positive Parenting Practices and Religiosity to Psychological Well-being of Emerging Lebanese Adults

By Grace Al Najjar

is accepted by the Graduate Thesis Committee as satisfying the thesis requirements for  
the degree Master of Arts/ Clinical Psychology

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Haigazian University

December 2019

*DEDICATION*

*Dedicated to my family.*

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### Abstract

Little is known in research on how parental religiosity affects parenting practices, children's religiosity and their well-being. Many studies have examined the relation between parents' religiosity and parenting in emerging adults, however they neither included the child's religiosity as a possible factor affecting well-being nor have used samples representing different religious affiliations: Christians, Muslims, Druze and Non-Religious. The present study explored the contributions of perceived parental religiosity, perceived positive parenting practices and emerging adults' religiosity to emerging Lebanese adults' psychological well-being. A potential mediating role of perceived positive parenting practices was predicted. An empirical quantitative survey design was conducted using a sample of 198 emerging adults distributed between Christians, Muslims, Druze and Non-Religious. Correlational and multi-linear regression analyses were done. No mediation was found between perceived positive parenting practices, perceived parents' religiosity, emerging adults' religiosity and their well-being. Maternal parenting practices were the only contributors to emerging adults' well-being. Perceived Maternal and Paternal religiosity were positively correlated to emerging adults' religiosity but negatively correlated to perceived positive parenting practices. Religiosity was not found to relate to well-being. The results were explained in terms of how religiosity was transmitted to emerging adults, the symbolic versus literal interpretation of religion and cultural factors affecting parents' openness to change and flexibility.

*Keywords:* Positive Parenting Practices, Religiosity, Well-being, Lebanese Emerging adults, Parents' Cognitive Style.

## Contributions of Perceived Parental religiosity, Perceived Positive Parenting Practices and Religiosity to Psychological Well-being of Emerging Lebanese Adults

Most of the studies that have investigated the relationship between religiosity and mental health have linked religiosity to positive mental health outcomes (Meltzer, Dogra, Vostanis, & Ford, 2011). Because of its influence on mental health, research started to focus on how religiosity is internalized, values are acquired and what influenced the latter the most.

It is common knowledge that parents play a major role in shaping their children's religious beliefs and values. Current research suggest that direct religious discussions and positive parenting practices are the main factors affecting the transmission of religiosity from parents to their children (Desrosiers, Kelley, & Miller, 2011; Gunnoe, Hetherington, & Reiss, 1999; Hardy, White, Zhang, & Ruchty, 2011; van der Jagt-Jelsma et al., 2011). For example, Hardy, White, Zhang, & Ruchty (2011) examined whether parenting style moderated the transmission of religiosity from the parents to the emerging adult. Out of the 4 parenting styles which will be referred to later in the review of literature, they found that authoritative parenting had the strongest mediating effect on transmitting beliefs and values from parents to their children. Another example is Desrosiers, Kelley, & Miller (2011) who focused as well on the role of parents and children's conversation and openness to discussion. They have found specific contributions from mothers and fathers, where mothers had the biggest influence through their spiritual transparency in their discussions with their children and fathers through their affection.

Thus, it is clear that Parents have a large amount of influence on their children's beliefs and they are able to transmit their religiosity to their children effectively when discussion and

positive parenting practices are present. Power & McKinney (2013) have studied the relationship between perceived parenting practices, perceived religiosity of the parents, religiosity of emerging adults and their psychological adjustment. Power & McKinney (2013) have used a sample from Mississippi State University (N=486) where 92.4 % were Christians, 2.9% were Atheist/Agnostic, 0.2 Mormon, 0.4 % Jewish and 3.1% others. Participants completed an online survey that included items measuring self-reports of their perception of parenting practices, perception of parents' religiosity, emerging adults' strength of faith and their well-being. They found an indirect relation between perceived parental religiosity and emerging adults' psychological adjustment through emerging adults' religiosity and positive parenting practices and a direct relation between emerging adults' religiosity, perceived positive parenting practices and psychological adjustment. Thus, when religiosity of both parents and children and parenting practices are studied together in order to examine their contributions to well-being, positive parenting played a mediating role.

The purpose of this study was to examine the contribution of each of the previous factors highlighted in research to psychological well-being in a mixed sample of Lebanese emerging adults. Unlike the previous study, the sample of the present study included mixed religious backgrounds in addition to Christianity. Whereas Power & McKinney (2013) used a sample with the biggest percentage being Christians & college students, our sample included Druze, Non-Religious, Muslims & Christians from colleges, malls, coffee shops etc. In addition to that, the present study concentrated specifically on Intrinsic Religiosity using HOGI IR scale to provide participants with clearer and more specific items that focus on internal motivation and exclude public practices as indicators of religiosity.

### **Background of the Study**

Little is known in research on the mechanisms underlying parental religiosity transmission and its effect on well-being (e.g., Hardy et al., 2011; Heaven et al., 2010; Kim et al., 2009). Heaven et al. (2010) stated that little research has studied the relation between parenting styles and religious beliefs of children when their study was done. Hardy et al. (2011) and Kim et al. (2009) highlighted the need for better understanding of the development of religiosity in the context of the family. They recommended the latter because of the relationship present between parenting practices and religiosity of both the parents & emerging adults. In addition to that research in the Arab countries studying the contribution of each of parents' religiosity, positive parenting practices and emerging adults' religiosity to their well-being is scarce. To my knowledge, published research in Lebanon includes Abdel-Khalik's study on adolescent Muslims aged 16-17 year old from governmental public schools in western Beirut (Abdel-Khalek, 2014). The purpose of his study was to study the association between happiness, health and religiosity. Results showed a positive relationship between the constructs. In addition to that, Abdel-Khalik has done similar studies and found similar results in Algeria, Egypt, Kuwait, Palestine, Qatar, and Saudi Arabia (as cited in Abdel-Khalek, 2014) however this study improves over Abdel-Khalik's by including participants from different religious backgrounds, by including college and non-college participants, by studying simultaneously the role of parenting styles and parents' religiosity and finally by differentiate between intrinsic and extrinsic religiosity.

The present study adds to previous research in several ways. First, it is using an understudied Lebanese sample. Second, the sample is more representative of Druze, Christians, Muslims & Non-Religious participants. Third, the study focused on the emerging adulthood age

18-28. It is particularly important to study emerging adulthood because at that age beliefs and values are re-examined away from the parents' influence (Gnaulati & Heine, 1997). In addition to that, the sample included college & non-college participants, which allowed us to compare between them. Finally it focused on parents' influence through how their children perceive their religiosity & parenting styles, studying simultaneously the contributions of perceived parenting practices, perceived parental religiosity and emerging adults' religiosity to their well-being so as to see which factor has the biggest contribution to well-being. We will investigate the role of positive parenting practices as a mediator between adults' religiosity, perceived parents' religiosity and well-being.

### **Self-Reports**

Some studies that focused on parental religiosity and its relation to parenting practices relied on reports from the parents (e.g. Gunnoe et al., 1999) while others relied on report from their children (e.g. Snider, Clements & Vazsonyi, 2004). However both found similar results associating authoritative parenting (and positive parenting practices) with parents' religiosity. Research suggests that adolescents' interpretations of their parents' parenting practices may have a stronger impact on adolescent outcomes than their parents' self-interpretations (Smokowski, Bacallao, Cotter & Evans, 2015). In line of this recommendation, the present study relied on the emerging adult's perceptions in gathering the required data.

### **Emerging Adults' Age**

Different researchers have highlighted the increasing importance of religiosity in the emerging adults' age. Arnett (2000) has stated that forming a worldview is a defining feature of the emerging adulthood stage and it becomes more individualized and independent of the parents' as individuals finish adolescence. Fowler (1981) earlier explained that emerging adults

choose at that critical stage their set of beliefs and develop an “owned” faith that is non-conforming and that is critically examined. This comes in alignment with Erikson’s (1968) identity formation challenge and his emphasis on participation in religious groups and social institutions that helps in forming one’s identity. When adolescents enter into the emerging adulthood stage (18-28 years), their beliefs and religious affiliations become more individualized and adopt a new reconfigured religiosity (Smith et al., 2003; Arnett & Jensen, 2002). At that stage many emerging adults question their parents’ beliefs due to less contact with the parents’ religious communities and thus the availability of a bigger space for self-reflection and critical examination of beliefs and values. However different researchers have found that although they examine old beliefs however many remain well-versed in their families’ traditional religion (e.g. Smith, 2009; Pearce & Thornton, 2007).

### **Problem Statement**

Research has highlighted the importance of well-being. It showed as well the positive correlation between well-being and religiosity while considering the transmission of religiosity from the parents to the children. Positive parenting practices significantly contributed to well-being of their children as well. This study will examine the different contribution of the 3 factors (perceived parents’ religiosity, perceived positive parenting practices and specifically emerging adults’ religiosity) to well-being in a sample of Lebanese emerging adults. It will investigate if positive parenting practices mediate the relationship between religiosity of adults, perceived religiosity of parents and well-being of emerging adults.

The following hypotheses were examined:

**Hypotheses:**

- 1- Perceived maternal religiosity is positively correlated with Lebanese emerging adults' well-being.
- 2- Perceived paternal religiosity is positively correlated with Lebanese emerging adults' well-being.
- 3- Perceived positive maternal parenting practices are positively correlated with emerging adult' well-being.
- 4- Perceived positive paternal parenting practices are positively correlated with emerging adult' well-being.
- 5- Emerging adults' religiosity is positively correlated with their well-being.
- 6- Perceived positive parenting practices will have a mediating effect between emerging adults' religiosity, their parents' religiosity and their psychological well-being.

**Significance**

Theoretically, this study contributes to the field of research by extending the previous data and exploring how religiosity, parenting practices and well-being interact in our Lebanese culture. It highlights the effect of religiosity in a country with a population that has mixed religious backgrounds unlike most of the other Arab countries. In addition to that it studies the contribution of the 3 factors together so as to investigate which factor is more dominant or has the biggest mediating effect.

In addition to that, studying factors that correlate and enhance well-being such as religiosity and positive parenting practices is crucial due to the effect of well-being on

individual's lives. In clinical practice, therapy is patient-centered leaving no place for the therapist's religious beliefs to influence the relationship between the two parties. However if religion is part of the patients' mental schema, value system, beliefs and environment, then going in depth into the patient's religious background and how it influenced his/her well-being becomes important. The religious background may be used to learn more about motives and defenses present (Koenig & Larson, 2001), and the role that religiosity is playing in the patient's life and well-being. As for family therapy, positive parenting practices can be promoted to enhance the appropriate transmission of beliefs and values and to avoid conflict if present.

### **Overview of the Methodology**

This study is an empirical quantitative survey design used with a sample of Lebanese emerging adults for the examination of the contribution of perceived parents' religiosity, perceived positive parenting practices, and personal religiosity to well-being.

After explaining the purpose of the study briefly, the participants filled out a set of demographic questions including: age, gender and religious affiliations. They were asked to fill the Hoge IR scale 3 times: for their own religiosity, perception of their father's religiosity and mother's. They filled the Adolescent Family Process (AFP) for the paternal and maternal parenting practices. Finally they filled Ryff's scale of psychological well-Being (SPWB).

The participants of this study consisted of 198 males and females Lebanese emerging adults aged between 18 and 28 years old. Participants were asked to answer the questionnaires, in basic school level English, on the material of concern to study.

The quantitative data were analyzed using SPSS descriptive and inferential statistics.

## **Definition of Terms**

**Intrinsic Religiosity:** Intrinsic Religiosity refers to dedication and commitment to God. It is defined as having a belief in God expressed in conduct and rituals or any system or worship involving a code of ethics. It reflects a religious life that finds value and meaning in the belief itself and not in the fulfillment of other basic human needs (Singh & Bano, 2017).

**Psychological wellbeing:** Ryff defined it by the presence of something positive in life, not only the absence of illness. Ryff's model includes 6 dimensions of well-being: Autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance (Ryff & Keyes, 1995).

**Emerging adulthood:** The age between 18 and 28 (Arnett, 2000).

**Positive Parenting Practices:** They are defined as practices that encourage well-being through closeness, communication, support, monitoring, and autonomy (Steinberg & Silk, 2002). It is to be distinguished from negative practices that cause conflict due to the absence of the above constructs.

## **Chapter 2**

### **Review of Literature**

The following section presents an overview of the relationship between religiosity and well-being in literature while differentiating between intrinsic and extrinsic religiosity. Parenting practices will then be emphasized first in terms of their contribution to children's well-being and then in terms of how they are affected by religiosity. Finally parenting practices will be reviewed as a mediating factor in the transmission of religiosity to their children.

#### **Religiosity and Well-Being**

According to Kim J., McCullough, M. E., & Cicchetti, D. (2009) there is a general consensus in literature on the positive role that religiosity plays in promoting positive development; however earlier research has shown inconsistent results between religion and mental health outcomes (Bergin, 1983; Larson et al., 1992).

Koenig and Larson (2001) in their meta-analysis (1950 – 2000) studying religion and mental health showed that of 100 studies in the systemic review, including cohort studies, clinical trials & observational studies, nearly 80 % of the studies done reported a positive relation between religion and mental health. Of 12 prospective cohort studies identified, 10 showed a positive relationship between religiosity and well-being between the year 1976 & 1997. When focusing on depression and religiosity, they found a consensus revealing that more religious participants had less depressive symptoms as well.

According to Koenig and Larson's meta-analysis (2001), before the year 1980, most of the studies were done using hospitalized samples from medical institutions and college students who were available to researchers. Between the 1980s and early 1990s, samples began to include participants from the community in addition to the hospitalized patients. To their surprise, self-reports started to reveal the important role that religion played in the participants' ability to cope with stress. When interviewers asked more direct questions about how much religion was used to cope with stress, approximately 90% of patients reported 'at least a moderate extent' or more. However figures varied in other parts of the world. For example, only 1 % of Swedish patients used religion to cope with stress (Cederblad et al., 1995).

Dew et al. (2008) reviewed 115 articles between 1969 and 2005 (9% prior to 1980) examining the relationship between religion/spirituality and adolescent substance use, delinquency, depression, suicidality, and anxiety. Data was obtained both through longitudinal and cross-sectional design and the age of participants varied between 12 and 21. They found at least one significant relationship between religiousness and better mental health in almost 92 % of the studies. However the heterogeneity of the measurement approaches of religiousness versus spirituality made it difficult to isolate the precise religious variable that was associated with positive health findings. They have found that only 6 articles studied explicitly spirituality referring to the individual's personal experience of the divine and not institutionally related public practices. As a result they have compared articles using several different variables—church attendance, personal importance, specific beliefs, and denomination for each mental health outcome. In 93% of cases, they could find at least one religious variable relating to better mental health.

In more recent research, Howard Ian Meltzer, Nisha Dogra, Panos Vostani and Tamsin Ford (2011) conducted a survey on a 2992 sample of adolescents in Britain to study the correlation between religiosity and childhood psychopathology. They concluded that similar to most studies done, religiosity served as a protective factor for mental health. It gave meaning to life and stress and thus enhanced coping skills. In addition to that it enhanced a healthy life style that is rich with social support and psychosocial resources (Josephson & Dell, 2004; George, Ellison & Larson, 2002).

Although there was a general consensus in the mentioned study about the positive relationship between religiosity and mental health, some studies did not show positive results. In attempt to explain the latter, some research suggested that the effects of religion on mental health may differ depending on the type of stress and its resource. Strawbridge et al. (1998) highlighted that stressors originating outside the individual like diseases, poor health and financial struggles were buffered by religion more than stressors perceived as a result of personal failure. For example humans would return to God and to prayer when they face problems that they did not cause to themselves or that are out of their control. On the other hand, when they consider themselves responsible for the problems they face or the consequences of their actions, they would not refer to God or find rest in religion. In addition to that, while analyzing the negative relationship found between religion and mental health in the older studies, Koenig and Larson (2001) indicated that old studies failed to control for covariates found in samples of convenience that included mostly students and adolescents without mature faith, or cross-sectional designs that prevented determination of causality. Another important factor which might have affected the results is the operationalization of religiosity. As Dew et al. (2008) stated only 6 articles out of 115 studied explicitly spirituality referring to the individual's personal experience of the

divine and not institutionally related public practices. Thus religiosity was measured explicitly through church attendance, personal importance, specific beliefs, and denomination without emphasizing the participants' intrinsic motives.

### **Intrinsic & Extrinsic Religiosity**

Recent research has differentiated between intrinsic and extrinsic religiosity. Singh and Bano (2017) have studied the effect of intrinsic versus extrinsic religiosity on well-being of adolescents. In their study, religious commitment has been divided into two constructs in research: extrinsic and intrinsic. The first construct describes a more instrumental and utilitarian approach to religion. It frames all religious activities that show commitment and dedication in serving an individual's goals. For example, attending church or a mosque might serve the purpose of gaining social acceptance; attending for the sake of being seen there especially if it is a social norm that grants respect and appreciation from the community. The goal might also be entertainment, gaining security and support etc. These goals serve self-interests and personal purposes rather than application of the belief itself.

Singh and Bano (2017) found a positive correlation between intrinsic religiosity and well-being. Intrinsic commitment reflects a religious life that finds value and meaning in the belief itself and not in the fulfillment of other basic human needs. It revealed a deeper commitment and a life organized by religious values and goals. For example, an intrinsically motivated person would attend church to develop a better relationship with God instead of aiming towards social acceptance and praise from others. Intrinsically motivated religious people give priority to their religious commitment over their worldly needs and wants. They strive to bring their needs and

wants in harmony with their religious beliefs and directions. Allport (1950) in fact considered intrinsic religious commitment a sign of maturity.

Garcia-Alandete & Bernabe-Valero (2013) in another study which examined the differing relationship between intrinsic and extrinsic religiosity and well-being used a sample of 180 Spanish undergraduates, 138 women and 42 men aged 18-55 years old. They showed in particular that intrinsic religiosity correlated positively with psychological well-being whereas extrinsic religiosity did not. This takes us back to the claim that it is essential to measure properly in what way a person is religious or which variables of religiosity better relate to mental health.

After elaborating on the different kinds of religiosity, the reasons behind the discrepancy between the results of previous studies examining religiosity and mental health become clearer. Thus may be explained by examining which aspect of religiosity each study focused on. Research that found a positive correlation between religiosity and mental health has emphasized intrinsic religiosity and well-being (e.g. Singh & Bano, 2017; Garcia-Alandete & Bernabe-Valero, 2013). On the other hand studies that found a negative relationship with mental outcomes have measured extrinsic religious affiliations. The differentiating factor which accounted for the discrepancy in the results was the intrinsic versus extrinsic measurement of religiosity (Mahoney, 2010; Rosmarin, Pargament, & Mahoney, 2009) in other words to the different operational definition of religiosity as explained by Hackney and Sanders (2003).

The present study accounted for the latter difference by using a scale that measures specifically intrinsic religiosity. HOGE IR scale was used to highlight the presence or absence of an intrinsic motivation to religiosity and to measure properly the effect of intrinsic religiosity on well-being.

## **Parenting Practices & Transmission of Religiosity**

**Parenting practices.** Researchers have identified four styles of parenting: authoritative, permissive, authoritarian, and neglectful (Baumrind, 1991). Authoritative parents are high on warmth, responsiveness and demandingness. Thus they hold their children accountable for their actions and set high expectations for them. Further they involve their children in developing rules and support their autonomy. Authoritarian parents are similarly demanding however do not support autonomy and are overly restrictive asserting their power. Permissive parents are warm and involved, supportive of autonomy, but not demanding. Lastly, neglectful parents are neither involved nor demanding.

However, the positive and negative aspects of each parenting style do not always perform in tandem in statistical analyses according to the work of Soenens, Vansteenkiste, & Sierens (2009) and Verhoeven, Junger, van Aken, Deković, & van Aken (2010). The absence of support for example does not necessarily mean that conflict (or any other negative practice) is present. It becomes harder to categorize parents precisely and to have specific parenting practices' details that help in clinical practice. Thus, since the previous parenting styles identified by Baumrind differ across 3 dimensions: warmth, structure and autonomy-support, it becomes more clinically significant to follow a dimensional approach to parenting and to "unpack" the frequently used typologies (Steinberg, 2001). This study used the Adolescent Family Process scale because it allowed us to measure parenting across the following dimensions: harmony through closeness & communication, autonomy through support, peer approval & monitoring, and finally conflict through disagreements & approval.

**Parenting religiosity & parenting practices.** Mahoney (2010) in a review of literature from 1999 to 2009 of studies on religiosity and parenting found a consensus in research that

religiosity was correlated with an authoritative parenting style manifested through the use of praise, affection, reasoning, non-violent discipline and non-controlling parenting. She claimed that although biblically conservative parents found in some studies tended to use corporal punishment however they tended to do so in a thoughtful, calm and consistent disciplinary style. Thus we can expect a positive correlation between parental religiosity and positive parenting practices.

On the other hand, in some research studies, parental religiosity promoted corporal punishment and rigidity, correlated with negative parenting practices (e.g. Duriez, Soenens, Neyrinck, & Vansteenkiste, 2009). The methodology on how parental religiosity was measured in the mentioned studies may be questioned here as well. Duriez et al. (2009) elaborated in his study on the moderating effect of the literal vs. symbolic interpretation of religion. A parental literal interpretation of religion was associated with conformity while a symbolic interpretation was associated with more positive parenting practices that promoted self-direction.

Parents' religiosity impact as well the kind of relationship parents establish with their children. For example, Wilcox (2002) and King (2003) found that a father's religiosity was correlated with increased time in one-on-one interaction between the father and adolescent and more involvement of the father in the family activities. Religious mothers as well who engaged in more religious activities and placed higher importance for religion in their families had more positive relationships with their children (Pearce & Axinn, 1998).

**The mediating role of parenting practices.** Parents' religiosity affects their parenting practices which consequently mediated the transmission of religiosity to the children. In different studies including Desrosiers et al., 2011; Gnaulati & Heine, 1997; Hardy et al., 2011 & van der Jagt-Jelsma et al., 2011, the influence of parents' communication about religiosity and positive

parenting practices seemed to play a significant role in the development of religiosity in their children. Positive parenting practices described in previous studies included communication, demandingness, structure, the use of non-harsh punishment, all of which described an authoritative parenting style.

Hardy et al. (2011) examined whether parenting practices moderated relations between 122 parents and their emerging adults' religiousness/spirituality. Cross-sectional data was obtained using online surveys. Hardy et al. (2001) highlighted the fact that only one study (Myers, 1996) prior to theirs, examined parenting as a moderating factor in religiousness/spirituality transmission. The purpose of their study was to investigate whether positive dimensions of parenting (warmth, structure, and autonomy-support) will strengthen the transmission of religiousness and spirituality to the children, while higher levels of negative dimensions of parenting (rejection, chaos, and coercion) will weaken the transmission. The results confirmed their claim highlighting the moderating role that parenting practices play in transmitting beliefs from one generation to another, specifying the vital role of authoritative parenting.

Hardy et al. (2011) differentiated between religiousness and spirituality. Religiousness referred to practices of particular religious communities or ideologies, whereas spirituality was more about the individual's quest for meaning and transcendence. If we compare religiousness and spirituality to extrinsic and intrinsic religiosity, we may find that both terms religiousness and extrinsic religiosity refer to religion practiced through public traditions and institutions; whereas spirituality and intrinsic religiosity refer to intrinsic motivation and commitment. However, when both religiousness and spirituality were studied, they correlated positively with

better mental health (Lawler-Row, 2010; Rosmarin, Pirutinsky, Pargament, & Krumrei, 2009) and were both considered adaptive factors of human functioning (Hood et al., 2018).

Desrosiers and Miller (2007) described another term similar to intrinsic religiosity. They described the notion “Relational Spirituality” as the personal, experiential & intrinsic sense of spirituality. It is characterized by a personal relationship with God, referring to God for Guidance, the belief in his presence in everyday experiences and experiencing forgiveness. Desrosiers et al. (2011) re-emphasized the previous notion and highlighted the fact that it has been consistently shown to be protective against more prevalent forms of psychopathology in adolescents. In pursue to explore which contextual factor facilitate the development of Relational Spirituality” in adolescents, they studied 615 adolescents and young adults aged 11-23 years old from different ethnicities and religious denominations. They found that the capacity for a personal relationship with God, which operated as a protective factor against psychopathology, is facilitated by the microcosm experience of paternal affection and love, maternal spiritual support and spiritual support in friendships or the community. Parental openness to discussion and questioning about adolescents’ existential and religious matters played a vital role. Mothers seemed to play a more vital role in the transmission of religiosity due to their bigger involvement in religious, personal and emotional discussions with their children. In comparison to parental influences, peer discussions about spirituality have exerted a similar and sometimes a stronger effect. Taken together, parenting and peer variables accounted for over 20% of the variance in level of relational spirituality, underscoring the effect of the familial and social factors on spiritual development (Desrosiers et al., 2011). Family communication was the strongest predictive factor for experiencing a relationship with God and religion in others studies as well (e.g. King, Furrow, & Roth, 2002). Thus the quality of parenting (i.e. parental relationship)

serves a conduit for the transmission of spiritual beliefs and practices, in addition to playing a moderating factor in the adolescents' embracement or negation of parental religiosity (Kelley et al., 2007).

**Social Control Theory.** Kim et al. (2009) used social control theory to explain the important role of the religious communities, in which religious families engage, in helping parents transmit their beliefs and values to their children. Through the social networks that the parents engage in and habituate their children to engage in, expected social behaviors are modeled and parental values are reinforced. Mahoney and colleagues (2001) suggested that parents' involvement in religious activities reduce parent-child conflict since through the parents' social network, the families are exposed to other families with similar values. Through these networks, peer influence has an important role. Many researchers agree that through early adulthood and late adolescents, peers serve as role models and when present in the same religious social network, they serve as religious role models (Gunnore & Moore, 2002). In the previous study, it was found that one of the best predictors of youth's religiosity is peer's church attendance during high school. However many argues on the other hand that family is the principle agent affecting religious socializing while peer and religious institutions come as secondary factors (Gunnore & Moore, 2002; Martin, White, & Perlman, 2003; Petts, 2009; Regnerus et al., 2004).

In general, therefore it seems safe to conclude that religiosity is positively correlated with positive parenting practices and to well-being. However, as mentioned earlier there are few studies studying the variables together to compare their contribution and their interconnectedness in Lebanese emerging adults.

## **Chapter 3**

### **Method**

This study is an empirical quantitative survey design used with a sample of Lebanese emerging adults to examine the contribution of perceived parents' religiosity, perceived positive parenting practices, and personal religiosity to well-being. Correlation and multi-linear regression were used in the analysis of data.

#### **Participants**

The participants (N = 198) in this study were Lebanese emerging adults aging 18-28 years, with school level knowledge of English language. Participants were both college and non-college emerging adults. The sample is convenient in the sense of accessibility to participants but it is closer to a stratified random sample considering the purpose and the selection that targets the proposed age, both college and non-college individuals and the need to have participants from different religious affiliations. They were selected from Haigazian University and the Lebanese University campuses in addition to other random public places like malls and coffee shops. All participants were informed about the purpose of the study, their rights of confidentiality and withdrawal.

A summary of the collected demographic data is found in Table 1.

**Table 1***Demographic Descriptive Statistics (n=198)*

Characteristic	N(%)
<b>Gender</b>	
Female	123(62.1)
Male	74(37.4)
<b>Age</b>	
18-22	153(77.2)
23-28	45(22.8)
<b>Religion</b>	
Christians	59(29.8)
Muslims	105(53)
Druze	21(10.6)
Non_Religious	13(6.6)
<b>Level of Education</b>	
High School	50(25.3)
Technical School	7(3.5)

BA	124(62.6)
MA	13(6.6)
Missing	4(2)
Employment	
Employed	69(34.8)
Unemployed	127(64.1)
Status	
Single	188(94.9)
Married	8(4)

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## Materials

The independent variables measured were: perceived maternal & paternal religiosity, emerging adults' religiosity and perceived maternal & paternal positive parenting practices. The dependent variable measured was: emerging adults' psychological wellbeing.

Participants were given a booklet that combined the following: 1) A participant information letter which included the purpose of the study, the name and contact information of the researcher, the statement of participants' confidentiality, as well as the right to withdraw from the study at any time during the process (See Appendix A), 2) A participant informed consent form (See Appendix B); 3) a demographic information questionnaire (See Appendix C), which comprised age, gender, education, status, employment, income and religious affiliation.

The following scales followed: 3 copies of Hoge IR (Own Religiosity (OR), mother's religiosity (MR) and father's religiosity (FR)) (See Appendix D), 2 copies of the Adolescent Family Process (AFP) (Parenting Practices of the Mother (PM) and the Father (PF) (See Appendix E) as well as the Ryff's Scales of Psychological Well-Being Scales (PWBS) 42-items scale (See Appendix F).

### **The Scale of Psychological Well-Being (SPWB) (Ryff, 1989a)**

The Scale of Psychological Well-being is a 42 items self-report scale. It measures psychological well-being based on six subscales: (a) Autonomy, (b) Environmental mastery, (c) Personal growth, (d) Positive relationships with others, (e) Purpose in life, and (f) Self-acceptance. The response format of the items ranges on a six ordered Likert scale from "strongly disagree" to "strongly agree". The subscales include positive and negative items and consisted of 7 items each. The autonomy subscale measures self-direction, independence and internal locus of control (e.g. My decisions are not really influenced by what everyone else is doing). The environmental mastery subscale measures one's ability to control and influence his / her environment (e.g. I often feel overwhelmed by my responsibilities). The personal growth subscale measures one's ability to actualize and realize his / her full potentials (e.g. When I think about it, I have not really improved much as a person over the years) . The ability to establish and maintain satisfying relationships is measured in the positive relationships with others subscale (e.g. People would describe me as a giving person, willing to share my time with others). The presence of directedness and personal goals are measured in the purpose in life subscale and finally the self-acceptance subscale highlights the presence of positive attitudes towards the self (e.g. I have a sense of direction and purpose in life). Negatively worded items are reversely coded so that high scores indicate better functioning in the area mentioned. A total

score of the 42 items can be obtained in addition to the scores of each subscale. The SPWB had the following coefficient: internal reliability .78 for autonomy, .77 for environmental mastery, .74 for personal growth, .83 for positive relationships, .76 for purpose in life, and .79 for self-acceptance. Test-retest reliability over 8 weeks ranged from .74 to .84 (Cenkseven, 2004).

In addition to its good psychometric properties, the scale has been used in studies concerned with the relationship between well-being and parenting in different countries (e.g. Huppert, Abbott, Ploubidis, Richards & Kuh, 2010).

### **Hoge Intrinsic Religiosity Scale (Hoge IR) (Hoge, 1972)**

Hoge (1972) validated a new version of the Allport-Ross Intrinsic-Extrinsic scale which focused on the intrinsic part of religiosity, had more applicability, clarity and simplicity of items and validity (Batson & Schoenrade, 1991; Kirkpatrick & Hood, 1990; Francis, 2007). While Allport-Ross items were limited to Christianity (Maltby & Lewis, 1996), Hoge IR items were neutral in their wording (e.g. using the divine instead of God). The scale strongly correlated with Allport's original one (.86) and Feagin's Intrinsic scale (.87). The 10 item scale was administered to 458 patients in the Duke hospital Study and had a high internal reliability coefficient (Cronbach's alpha .83) (Koenig, George, & Peterson, 1998). According to Liu & Koenig (2013) and to Bellu & Fiume (2004), the Hoge IR has two significant advantages. Its items are closer to the lived reality of religion on a daily basis and are not specific to the Christian religion. The response format is a Likert type scale: 1 (definitely true of me) to 5 (definitely not true) scale (the extent to which they feel each statement is true for them). Items 1,2,4,5,6,7 and 8 scores are reverse scored. Hoge IR was translated into different languages in various countries, was used in studies concerned with religiosity and mental health (Abdel-

Khalek 2007a, 2007b, 2010, 2013) and has shown to be a valid measure (Pieper 2004; Pieper and van Uden 2007; Abdel-Khalek 2007a, 2007b, 2010, 2013; Liu and Koenig 2013).

### **Adolescent Family Process (AFP)**

The Adolescent Family Process scale measures six dimensions of parenting: closeness, support, monitoring, communication, conflict, and approval. The measure contains 25 items each for mothers and fathers. The scale was validated in a number of cross-cultural samples and with mixed males and females samples (Vazsonyi, Hibbert & Snider, 2003). It has been used to study the relation between internalizing / externalizing symptoms and parenting practices. The closeness, support and monitoring subscales are rated on a 5 Likert-type scale (1= strongly disagree – 5= strongly agree). The communication, conflict and approval scales were rated on the following 5-point scale: 1= never, 2= occasionally, 3= sometimes, 4= often, 5=very often. Items on the support scale were inversely coded.

### **Procedure**

After the submission of the proposal, the IRB approval was obtained and collection of data was initiated. A pilot study was conducted on 20 Haigazian university students. Difficulties were reported by participants who had one of their parents deceased or abandoning them since childhood. As a result some of the sections in the scales were missing. These booklets were not used. Other participants were orally briefed about the latter issue to make sure that it doesn't affect their willingness to participate. A minor spelling mistake was found and corrected in the pilot. The time taken to fill the questionnaires was 20 - 25 minutes. Data from the pilot study were analyzed on SPSS to test the items' reliability. Reliability coefficients were acceptable (above .7).

A trusted MS Haigazian research colleague, who was a graduate clinical psychology student, was instructed and familiarized with the research study, helped in gathering data.

Participants were approached individually. They were asked if they are English educated and if they are willing to take part in the study, they were given the participant consent form and were briefed about the aim of the study and what is required. After confirming that they would like to volunteer and be part of the study, they filled the questionnaires and were helped when needed (in questions related to the wording of some items). University students were approached in Haigazian campus during their free sessions and non-university participants were approached in different working areas, malls, shops, cafes and on random streets in Beirut and Saida due to the convenience of the sample.

### **Statistical Analysis**

All analyses were done using SPSS (version 22). To examine hypotheses 1 through 5, we used a bivariate correlational design. For Hypothesis 6, in order to examine if Positive Parenting Practices mediated the relation between perceived religiosity of the participant, his / her perceived parents' religiosity and psychological wellbeing, we ran a series of regression analyses. Furthermore, for exploratory purposes, more bivariate correlations were led to examine which parenting practices were correlated with the RPWB subscales. Additionally, an independent sample t-test was conducted to compare results in males versus females participants.

### **Ethical Considerations**

Ethics approval was granted by the HU Committee, in line with the American Psychological Association guidelines of appropriate ethical practice.

## Chapter 4

### Results

The plan of the present chapter is first to present a preliminary analysis of the results comprising the reliability testing of the scales employed and a set of descriptive statistics of the sample used. This is followed by sets of correlational and multi-regression analyses in order to test for the proposed predictions of the study. Finally, a further exploration of the subscales of parenting practices will be presented.

#### Preliminary Analysis

Prior to analysis the data was checked for accuracy of entry and missing values. Missing items ranged from 1 to 6. Missing Completely at Random test (MCAR) was performed first to make sure that missing items were random. The test was not significant ( $P = .469$ ).

Univariate outliers were checked using z-scores and all values exceeding the absolute value of  $\pm 3.29$  were considered outliers significant at the 95<sup>th</sup> confidence interval. On basis of this criterion, no outliers were found.

Normality of the data for all continuous variables was checked through the standardized skew statistics (z skew), histograms and scatterplots. Correlations were linear. Maternal Religiosity was positively skewed as the standardized z statistic was  $z = + 2.3$  which is greater than the absolute value of 1.96 significant at the 95<sup>th</sup> confidence interval. Maternal Parenting Practices was negatively skewed as the standardized z statistic was  $z = - 2.04$ . Thus, in our sample, mothers tended to be less religious and more positive in parenting.

## Reliability Testing

Results of the Cronbach alpha of the scales used in this research alongside those obtained in previous studies are displayed in Table 2.

Table 2

### *Cronbach's Alpha of the Scales Used*

	Previous Cronbach's alpha	Current Cronbach's alpha
OR (Own Religiosity)	.83	.85
MR (Perceived Maternal Religiosity)	-	.88
FR (Perceived Paternal Religiosity)	-	.88
PM (Perceived Positive Maternal Parenting)	.82 - .87	.91
PF (Perceived Positive Paternal Parenting)	.78 - .90	.92
P (Emerging adults psychological well-being)	.78 - .83	.87

All the reliability coefficients obtained fell into the acceptable range; all the alpha scores were above .85.

## Descriptive Statistics

Descriptive data on the study measures are found in Table 3.

Table 3

### *Descriptive Data*

	Indicators	Minimum	Maximum	M	STD
Male	OR (Own Religiosity)	1.20	5.00	2.7957	.95368
	MR (Perceived Maternal Religiosity)	1.00	4.40	2.3656	.77822
	FR (Perceived Paternal Religiosity)	1.00	5.00	2.7569	.94915
	PM (Perceived Positive Maternal Parenting)	1.64	4.60	3.4508	.64039
	PF (Perceived Positive Paternal Parenting)	1.64	4.88	3.2360	.71323
	P (Emerging adults psychological well-being)	3.11	5.50	4.2457	.58843
Female	OR (Own Religiosity)	1.00	4.60	2.6055	.75631
	MR (Perceived Maternal Religiosity)	1.00	5.00	2.3772	.84504
	FR (Perceived Paternal Religiosity)	1.00	4.80	2.5149	.74724
	PM (Perceived Positive Maternal Parenting)	1.68	5.00	3.6031	.74444
	PF (Perceived Positive Paternal Parenting)	1.00	5.00	3.4194	.75712
	P (Emerging adults psychological well-being)	2.44	5.64	4.0891	.58156

## Correlational Analyses

All Pearson correlation coefficients necessary for testing Hypotheses 1,2,3,4 & 5 were computed. Results are presented in Table 4.

Table 4

*Correlation (N=198)*

		OR	MR	FR	PM	PF	P
OR / Own Religiosity	Pearson Correlation	-					
	Sig. (2-tailed)						
MR / Perceived Mother's Religiosity	Pearson Correlation	.430**	-				
	Sig. (2-tailed)	.000					
FR / Perceived Father's Religiosity	Pearson Correlation	.386**	.470**	-			
	Sig. (2-tailed)	.000	.000				
PM / Perceived Positive Maternal Parenting Practices	Pearson Correlation	-.189*	-.189**	-.187**	-		
	Sig. (2-tailed)	.019	.005	.005			
PF/ Perceived Positive Paternal Parenting Practices	Pearson Correlation	-.304**	-.260**	-.430**	.391**	-	
	Sig. (2-tailed)	.000	.000	.000	.000		
P / Emerging Adult's Psychological Well-being	Pearson Correlation	-.072	-.121	-.163*	.407**	.262**	-
	Sig. (2-tailed)	.312	.089	.021	.000	.001	

\*\* Correlation is significant at the 0.01 level (2-tailed).

### Hypotheses Testing

As can be seen in table 4, a non-significant correlation was found between Perceived maternal Religiosity (MR) & Emerging adults' Psychological Well-being (P). Hypothesis 1 was not supported. A non-significant correlation was found between Perceived paternal Religiosity (FR) & Emerging adults' Psychological Well-being (P). Hypothesis 2 was not supported. And a

non-significant correlation was found between Emerging adults' Religiosity (OR) & their Psychological Well-being (P). Hypothesis 5 was not supported as well.

On the other hand, a significant correlation was found between Perceived Positive Maternal Parenting Practices (PM) & Emerging adults' Psychological well-being (P) ( $r = .4$ ,  $P = .000$ ) (see table 4) suggesting that as perceived positive parenting practices of the mother increased, emerging adults' psychological wellbeing increased as well. Hypothesis 3 was supported.

Another significant correlation was found between Perceived Positive Paternal Parenting Practices (PF) & Emerging adults' Psychological well-being (P) ( $r = .26$ ,  $p = .001$ ) suggesting that as perceived positive parenting practices of the father increased, emerging adults' psychological wellbeing increased as well (see table 4). Hypothesis 4 was supported as well.

### **Multi-linear Regression**

Concerned with the greatest contributor to well-being, Emerging Adults' Religiosity (OR), Perceived Religiosity of the Mother (MR), Perceived Religiosity of the Father (FR), Perceived Positive Maternal Parenting Practices (PM) and Perceived Positive Paternal Parenting Practices (PF) were regressed on Emerging adults' Psychological well-being (P) (see table 5).

Table 5

*Multi-Linear Regression Analysis*

Model	Unstandardized Coefficients		Standardized Coefficients		
	B	Std. Error	Beta	t	Sig.
OR	.044	.053	.063	.833	.406
MR	-.016	.056	-.022	-.285	.776
FR	-.045	.057	-.063	-.790	.431
PM	.299	.059	.361	5.064	.000
PF	.085	.061	.107	1.377	.170

Dependent Variable: Psychological Well-Being

R square= .184

R adjusted= .162

Using the enter method it was found that Positive Parenting Practices of Mothers (PM) was the only significant predictor of Psychological Well-Being of emerging adults (P) PM( $F=10.268$ ,  $p=.000$ ,  $p < .05$ ,  $R^2 = .184$ ,  $R^2\text{Adjusted} = .162$ ) (Beta = .361,  $t(df)=5.064$ ,  $p=.000$ )(see table 5).

Since there were no significant relation between the IVs (MR & FR) and the DV (P), one condition for mediation is not confirmed and thus the mediation effect is non-existent (Preacher & Hayes, 2004).

### Further Exploration

**Emerging Adults' Religiosity as DV.** In the previous hypotheses, OR was one of the Independent variables that were regressed on Psychological well-being. Since a significant correlation was found between OR and perceived religiosity of the father and mother, we decided to study the direct relation between them and to check if parenting affected the results. A multi-linear regression was performed to study the contribution of PM & FM. OR was considered the DV and FR/MR the IVs (see table 6).

Table 6

#### *Multi-Linear Regression Analysis*

Model	Unstandardized Coefficients		Standardized Coefficients		
	B	Std. Error	Beta	t	Sig.
Maternal Religiosity	.311	.073	.303	4.258	.000
Paternal Religiosity	.179	.076	.178	2.350	.020
Maternal Positive Parenting Practices	-.056	.080	-.047	-.697	.487
Paternal Positive Parenting Practices	-.146	.083	-.130	-1.763	.080

Dependent Variable: Own Religiosity

As seen in the table above, Maternal and Paternal Religiosity significantly contributed to Religiosity of Emerging Adults. Maternal Religiosity is by far ahead of Paternal Religiosity. On the other hand, only paternal positive parenting practices seem to have a negative effect on emerging adults' religiosity but its effect reaches marginal significance.

**Maternal parenting subscales.** To take a closer look at which positive maternal parenting practices correlated more with well-being, further analysis was performed. A correlation was performed amongst the 6 subscales of parenting (closeness, support, monitoring, communication, conflict & approval) and P (see table 7).

Table 7

*Correlation between Maternal Parenting Practices & Well-Being*

		Closeness	Monitoring	Communication	Approval	Support	Conflict
Psycho-							
logical	Pearson Correlation	.345**	.131	.310**	.271**	.340**	-.306**
Well-Being							
	Sig (2- tailed)	.000	.065	.000	.000	.000	.000

\*\* Correlation is significant at the 0.01 level (2-tailed).

The final model revealed that all the maternal parenting practices (except monitoring) were significant  $p=.000$ . Thus, in our study closeness, communication, approval and support were contributing to well-being of emerging adults. However, monitoring did not.

## **Chapter 5**

### **Discussion**

The following chapter will consider the findings presented in the previous chapter. The role of religion in terms of its contribution to well-being and to positive parenting will be presented first. This is followed by an attempt to show how religion is transmitted through parenting practices and the effect of these on well-being. Finally, the different religious affiliations will be highlighted in terms of their effect on parenting and religiosity.

#### **Religiosity and Well-Being**

In previous literature, studies & meta-analyses revealed a general consensus on the positive role that religiosity plays in promoting positive development. It served as a protective factor for mental health, enhanced adaptive functioning, gave meaning to life and stress and thus enhanced coping skills. However our results did not confirm that.

Specific predictions were made concerning the relationship between perceived religiosity and well-being. On basis of that, it was expected that there will be a positive correlation between perceived religiosity of each the mother and father and well-being of emerging adults. This was not confirmed. Religiosity of the parents and well-being of emerging adults were not related.

Based on previous research, another prediction was made that emerging adults' religiosity will be positively correlated with their well-being. This was not supported as well. Emerging adult's religiosity was not related to their well-being. Cultural and social factors affected the role of religiosity in our sample.

To explain the differing results in our study we need to consider factors that may have affected previous results as well as factors that affected our results. In previous literature inconsistent results were present all the way. They pointed out that many factors may have affected their results like effect sizes being relatively small, the presence of methodological problems, bias in measurement and failure to control for covariates found in samples of convenience.

Unlike the majority of studies done, our study focused on intrinsic religiosity, since it was positively correlated with mental health unlike extrinsic religiosity (Singh & Bano, 2017). However results did not show a significant relationship between well-being & religiosity. Religiosity was not significantly contributing to well-being irrespective of the religion considered: Christians, Muslims, Druz and the non-religious. If religion had a negative effect on well-being, then we should have found a significant negative correlation between religiosity and well-being in non-religious participants. Thus, we can assume that Religion remains neutral as far as the four affiliations are considered. Its role was not significant.

One factor that distinguished our results was the way religiosity was measured. Although items in HOGE IR differentiated intrinsic beliefs from public practices, it could not reveal how those beliefs were adopted. It is vital to go to church or pray because an individual is intrinsically motivated and not to be seen by others and get admiration for that, however this is not enough. It can be done because those beliefs were transmitted from parents or the surrounding community without finding a personal meaning and choice in adopting them. This may be due to lack of communication and conservation.

According to many studies like King, Furrow & Roth (2002) and Desrosiers et al. (2011) family communication and openness to discussion about existential religious matters was the strongest predictive factor for a real religious experience. And the latter seems to function as a protective factor against psychopathology. Results in our sample showed that perceived religiosity of the parents was negatively correlated with each of communication and affection on one hand and positively correlated with emerging adults' religiosity on the other. Thus, emerging adults adopted their parents' beliefs in the absence of communication and affection.

It is safe to conclude that the transmission of religiosity from parents to the children in our study, irrespective of its positive or negative influence on well-being, is being practiced through obedience, conformity, & conservation. Emerging adults adopted their parents' religious beliefs in spite of the absence of communication and affection, which is the reason behind the non-positive role that religion has played.

### **Religiosity & Parenting**

Contrary to previous psychological research reporting a positive effect of religiosity on parenting, present results point to exactly the opposite effect. In fact, the more religious were the parents, the less positive parenting practices like communication and affection were present.

Two factors in parents' cognitive style seem to affect parenting and religiosity. Not all Religious parents are alike. They are distinguished according to how they interpret religion on one hand and to their flexibility on the other. Differentiation should be made between literal versus symbolic interpretation of religion and between conservation versus openness to change.

Parents being affected by older generations take a literal approach to religion. According to Duriez et al. (2009), a parental literal interpretation of religion is associated with conformity

while a symbolic interpretation is associated with more positive parenting practices that promote self-direction. A literal inclusion of religious content processes religious traditions in a non-critical and close-minded fashion. On the other hand a symbolic interpretation requires a deeper search for meaning in religion instead of uncritically adopting religious beliefs as they are. It develops a personalized, interpretative stance towards religiosity. A child can adopt parents' beliefs that serving God is important "Nothing is as important to my mother as serving God as best as she knows how" (HOGE-IR4) without critically finding a personal meaning and reason for that. And this is encouraged by lack of communication, personal expression and lack of explanation of motives behind those beliefs. Duriez, Soenens & Beyers (2004) pointed out that parents who adopted a symbolic interpretation of religion were higher in empathy and perspective-taking, which serve as prerequisite for parental support (Soenens, Duriez, Vansteenkiste, & Goossens, 2007). Parental religiosity in our sample was negatively correlated with communication and support (2 subscales of parenting), which is in line with literal interpretation of religion. Thus we can assume that religious parents in our sample adopted a more literal interpretation which reinforced conformity through negative practices and increased monitoring.

On the other hand, there is ample of research to show that conservative parents value conformity, stability and security. Conservation rather than openness to change tends to decrease well-being and authoritarianism. Conservation is accompanied by rigid and close-minded functioning of both parents and children.

In reference to Duriez et al. (2009) and to our findings, research should better account for parents' religious cognitive style (i.e. symbolic vs. literal interpretation of religion and conservation vs. openness to change). An open minded religious cognitive style seems to have a

direct positive effect on parenting and parents' empathy. The latter skill showed to be essential for quality rearing styles in past research (Soenens, Duriez, Vansteenkiste & Goossens, 2007).

### **Perceived Positive Parenting Practices & Well-Being**

Perceived positive maternal parenting practices were positively correlated to emerging adults' well-being. Understandably, conflict was negatively correlated with well-being whereas maternal closeness, communication, approval & support significantly correlated with emerging adults' well-being. The results were in line with previous research and predictions. The parenting practices that were measured describe an authoritative parenting style which according to a study done by Dwairy et al. in 2006, is more prevalent in our country than any other Arab country around. Results showed that maternal practices in our sample were negatively skewed indicating that more participants tended to perceive their mothers' practices as positive.

The present results showed that monitoring along with conflict were the only maternal parenting practices that did not correlate with well-being. Monitoring is indicative of over-protection, anxious rearing and parental over-control which are present in our country as well as in all Arab countries (Mousavi, Low & Hashim, 2016). Although compared to Malay, Chinese, Indian and Caucasians, the Arab countries were the highest on emotional warmth and lowest on parental rejection however they scored among the highest countries in over-protection and anxious rearing.

Thus, results showed that similar to previous research positive parenting correlated positively with well-being while monitoring and conflict did not and are still present due to the prevailing anxious rearing style in all Arab countries.

### **Transmission of Religiosity**

Although Lebanon is more authoritative than other Arab countries, however when it comes to religion we do value obedience, conservation and conformity. This is due to weakness not strength, due to fear that the new generation would question old beliefs and become more liberal or choose a different destination. Ginty (2017) described Lebanon as a deeply divided society with many physical boundaries that are a product of boundaries in the mind manifested in a world that differentiates between groups. The latter being a norm is regarded as essential for the structure and regulation of a society with divided political and religious affiliations. Identity-related conflicts are long standing and intergenerational so that even if individuals moderate their views, labels and identifiers are imposed by others. Thus, to maintain those boundaries and to protect deeply divided groups, open-mindedness to change, especially in religion, is viewed with suspicion if different parties are to maintain their secure boundaries. Since religion is an essential identifier of our identities, transmitting ones beliefs becomes a duty that parents need to maintain.

Thus, instead of finding meaning in religion with no sabotage and predispositions in inherited denominations before adopting beliefs, children are encouraged to obediently follow their parents' beliefs. This is due to our struggle to maintain safe boundaries between groups and due to fear of change.

### **Parenting as a Mediator**

In other studies made in the west, positive parenting mediated the transmission of religiosity and encouraged it. We expected similar results in our study since it is expected that

children are more convinced and encouraged to follow their parents' affiliations when they see them as role models and positive figures in their life or when their positive practices enhance the children's wellbeing. On the contrary, religion played a negative role in our study and was negatively correlated to positive parenting practices. As mentioned earlier, this is due to our approach to religion and how it is being transmitted. Religiosity was not correlated to well-being because it was negatively correlated to positive parenting. Data suggests that positive parenting leads to better functioning and well-being. As a result any variable that correlates negatively with positive parenting will negatively affect well-being.

### **Difference in Religious Affiliations**

One goal of the present study was to compare results among different religious affiliations, which to our knowledge has not been done before. In our results, 2 points seemed noteworthy. Perceived Paternal Religiosity was only significantly correlated to emerging adults' religiosity in Females across all religious sects and Perceived Positive Maternal Practices was significantly correlated to well-being in Muslims and Druz only.

In different studies the relationship between the father and the child was affected by the gender of the child. For example, Mckee et al. (2007) indicated that fathers utilize more harsh verbal and physical discipline with boys than girls. As a result, maybe fathers tend to be more lenient and tender with females. Or maybe males dare to oppose their father's religious views more than females and thus end up having a different perspective.

On the other hand, the absence of a significant positive correlation between positive maternal practices and well-being in Christians may be due to the heterogeneity found in the Christian sample. A numerous number of participants were Armenian in addition to the Lebanese

participants. Thus, cultural factors across the Lebanese and Armenian sects may have affected the results.

In conclusion, the role of mothers was the most powerful in developing their children's well-being. Although, it was stronger in Muslims & Druze however maternal positive practices were the only direct contributors to well-being of emerging adults in all religions. As parents were more religious, their parenting practices were perceived as more negative and both communication and affection were absent. Our findings were opposite to our predictions which were based on research done in the west. Religiosity was multi-faceted and affected by parents' interpretations and openness to change. Although emerging adults adopted their parents' beliefs, they had minimal choice in choosing what to believe in.

### **Limitations**

First, the sample was restricted to two main cities in Lebanon, Beirut and Sidon. In addition to that, approximately only 7% of the participants were non-religious. Finally, the sample was a sample of convenience and participants were proficient in English, which affects the generalizability of the results.

### **Suggestion for Future Research**

The role of parents' cognitive style, how they interpret religion and their openness to change is vital in future research dealing with parenting and religiosity. In addition to focusing on intrinsic religiosity, parents' readiness or openness to change and to accept opposite beliefs should be measured. Although parents may consider themselves as open and flexible, well devised scales need to measure the latter in addition to exploring parents' interpretative style in Christians, Muslims, Druze and the Non-Religious.

It will be of great importance to investigate the relationship between Symbolic/Literal interpretation of religion and positive parenting practices; between conservation/openness to change and positive parenting practices and finally study the contribution of the latter constructs to well-being through positive parenting.

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## Appendix A Participant Information Letter

Dear Ms./Mr.

I am Grace Najjar, a student at Haigazian University from the Department of Social and Behavioral Sciences. I am currently carrying out a research study titled “The contributions of Perceived Parental religiosity, Perceived Positive Parenting Practices and Religiosity to the Psychological Well-being of Emerging Lebanese Adults” advised by Dr. David Tawil.

You are being asked to take part in this study since you are at a stage where your beliefs and values are re-examined away from your parents’ influence.

Kindly read the below information to decide whether you would like to participate in this research study.

### **Purpose of the Research Project**

This research study aims at studying the contribution of the perceived parental religiosity, perceived positive parenting practices and emerging adult’s religiosity on psychological well-being. The 3 factors will be studied together so as to investigate which factor is more dominant or has the biggest mediating effect.

Studying factors that correlate and enhance well-being such as religiosity and positive parenting practices is crucial due to the effect of well-being on individual’s lives. In addition to that theoretically, this study will contribute to the field of research by extending the previous data and exploring how religiosity, parenting practices and well-being interact in our Lebanese

culture. It will highlight the effect of religiosity in a country with a population that has mixed religious backgrounds unlike most of the other Arab countries.

This study will contribute towards the partial fulfilment of my academic study requirements at Haigazian University.

You will be asked to:

- If you choose to participate in this research study, you will be asked to fill in 3 questionnaires. Your participation will involve completing a survey that entails statements that you will have to rate based on agreement and a demographic form for approximately (30) minutes.

Participation in this project is voluntary.

You are free to withdraw anytime without having to give any reason for your withdrawal.

Your Rights:

- Participation in this study is completely voluntary, anonymous and confidential. Your name or any other identifying information will not be asked.
- Data you provide along with data from all participants in the present research will be stored in aggregate in the office of Dr Farah El Zein. The data will be analysed and reported in aggregate. Only the principle investigators of this study will have access to the compiled data which will be stored for a period of 10 years post data. During this time, you have the right to inspect the data.
- You have the right to withdraw your consent or discontinue participation at any time for any reason. Your decision to refuse participation or withdraw will not involve any

penalty or loss of benefits to which you are entitled. Discontinuing participation in no way affects your relationship with Haigazian University.

- This research study has been reviewed and has received clearance from the Haigazian University ethics committee. If you have any further concerns about your rights as a research participant, please, do not hesitate to contact Dr. Farah El Zein ([Farah.ElZein@haigazian.edu.lb](mailto:Farah.ElZein@haigazian.edu.lb))

Risks and benefits of participation:

- Participation in this study does not involve any physical risk or emotional risk to you beyond the risks of daily life.
- You will receive no direct benefits from participating in this research; however your participation does help researchers better understand the contributions of parenting and religiosity to well-being in a Lebanese emerging adults sample.

Contact information

If you have any questions or concerns about the research you may contact:

Grace Najjar

Haigazian University

+96170698983

[elnajjarGrace@gmail.com](mailto:elnajjarGrace@gmail.com)

Appendix B  
Participant consent

Please read the following statements and place a check mark in the boxes adjacent to them.

- I have volunteered to participate in this research project conducted for purposes of study. My participation is voluntary and does not involve payment of any kind.
- I agree to participate in this research project conducted for purposes of study. My decision is voluntary and does not involve payment of any kind .
- I know that I can choose to withdraw from participation any time without any penalties or consequences whatsoever. I also hold the right to decline to respond to any question(s) that I may feel uncomfortable with.
- My participation involves answering 3 questionnaires.
- I have been assured that the researcher will maintain my identity confidential.
- I have been assured that the information from this survey will be used for the purpose of academic study, publication and educational use.
- I have received the assurance that this research study has been duly reviewed and approved by the Haigazian University ethics committee.
- I agree that the data gathered be kept in a secure location under the care of the study investigators for a period of 10 years.
- I have been assured that I can access my data (if identified) at any time.
- I have read, listened and fully understand the explanation given to me. All my questions have been satisfactorily answered.

- I, therefore, choose to voluntarily participate in this research study.
- I have received a copy of this consent form co-signed by the researcher.

Participant consent

Investigator

Date:

Date:

Name: \_\_\_\_\_

Name: Grace Najjar

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Appendix C  
Demographic Information Questionnaire

**Please fill in the following information:**

1- Age: .....

2- Gender

Male     Female

3- Education

High school     BA     MA     Technical School

Major : \_\_\_\_\_

4- Status

Married     Single

5- Do you get financial support from your parents?  Yes     No

6- Employment

Employed     Not employed

7- Income

Less than 500,000 L.L.     Between 501,000 and 1,000,000 L.L.

Between 1,001,000 and 2,000,000 L.L.     More than 2,000,000 L.L.

8- Religious Affiliations

Christian     Druz

Muslim     Non-Religious    Others: \_\_\_\_\_

Appendix D  
HOGE IR Scales

**Please indicate your degree of agreement to the following sentences. Circle the number that best suits your answer.**

*Own Religiosity, Perception of Mother's Religiosity & Perception of Father's Religiosity*

Definitely true of me	True of me	Neutral	Not true of me	Definitely not true of me
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

1. My faith involves all of my life	1	2	3	4	5
2. In my life, I experience the presence of the Divine (i.e., God)	1	2	3	4	5
3. Although I am a religious person, I refuse to let religious considerations influence my everyday affairs	1	2	3	4	5
4. Nothing is as important to me as serving God as best as I know how	1	2	3	4	5
5. My faith sometimes restricts my actions	1	2	3	4	5
6. My religious beliefs are what really lie behind my whole approach to life	1	2	3	4	5
7. I try hard to carry my religion over into all my other dealings in life	1	2	3	4	5
8. One should seek God's guidance when making every important decision	1	2	3	4	5
9. Although I believe in religion, I feel there are many more important things in life	1	2	3	4	5
10. It does not matter so much what I believe as long as I lead a moral life	1	2	3	4	5

<b>Definitely true of my mother</b>	<b>True of my mother</b>	<b>Neutral</b>	<b>Not true of my mother</b>	<b>Definitely not true of my mother</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

11. My mother's faith involves all of her life	1	2	3	4	5
12. In her life, she experiences the presence of the Divine (i.e., God)	1	2	3	4	5
13. Although she is a religious person, she refuses to let religious considerations influence her everyday affairs	1	2	3	4	5
14. Nothing is as important to my mother as serving God as best as she knows how	1	2	3	4	5
15. Her faith sometimes restricts her actions	1	2	3	4	5
16. Her religious beliefs are what really lie behind her whole approach to life	1	2	3	4	5
17. She tries hard to carry her religion over into all her other dealings in life	1	2	3	4	5
18. She believes that one should seek God's guidance when making every important decision	1	2	3	4	5
19. Although she believes in religion, she feels there are many more important things in life	1	2	3	4	5
20. She believes that it does not matter so much what she believes in as long as she leads a moral life	1	2	3	4	5

<b>Definitely true of my father</b>	<b>True of my father</b>	<b>Neutral</b>	<b>Not true of my father</b>	<b>Definitely not true of my father</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

21. My father's faith involves all of his life	1	2	3	4	5
22. In his life, he experiences the presence of the Divine (i.e., God)	1	2	3	4	5
23. Although he is a religious person, he refuses to let religious considerations influence his everyday affairs	1	2	3	4	5
24. Nothing is as important to my father as serving God as best as he knows how	1	2	3	4	5
25. My father's faith sometimes restricts his actions	1	2	3	4	5
26. His religious beliefs are what really lie behind his whole approach to life	1	2	3	4	5
27. He tries hard to carry his religion over into all his other dealings in life	1	2	3	4	5
28. He believes that one should seek God's guidance when making every important decision	1	2	3	4	5
29. Although he believes in religion, he feels there are many more important things in life	1	2	3	4	5
30. My father believes that it does not matter so much what he believes in as long as he leads a moral life	1	2	3	4	5

Appendix E  
Adolescent Family Process scale

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

31. My mother often asks about what I am doing in school.	1	2	3	4	5
32. My mother gives me the right amount of affection.	1	2	3	4	5
33. One of the worst things that could happen to me would be to find out that I let my mother down.	1	2	3	4	5
34. My mother is usually proud of me when I finish something at which I've worked hard.	1	2	3	4	5
35. My mother trusts me.	1	2	3	4	5
36. I am closer to my mother than a lot of kids my age are.	1	2	3	4	5
37. My mother sometimes puts me down in front of other people.	1	2	3	4	5
38. Sometimes my mother won't listen to me or my opinions.	1	2	3	4	5
39. My mother sometimes gives me the feeling that I'm not living up to her expectations.	1	2	3	4	5
40. My mother seems to wish I were a different type of person.	1	2	3	4	5
41. My mother wants to know who I am with when I go out with friends or on a date.	1	2	3	4	5
42. In my free time away from home, my mother knows who I'm with and where I am.	1	2	3	4	5
43. My mother wants me to tell her where I am if I don't come home right after school.	1	2	3	4	5
44. When I am not at home, my mother knows my whereabouts.	1	2	3	4	5

<b>Never</b>	<b>Occasionally</b>	<b>Sometimes</b>	<b>Often</b>	<b>Very Often</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

45.How often do you talk to your mother about other things that are important to you?	1	2	3	4	5
46.How often do you talk to your mother about major personal decisions?	1	2	3	4	5
47.How often do you talk to your mother about problems you have at school?	1	2	3	4	5
48.How often do you talk to your mother about your job plans for the future?	1	2	3	4	5
49.How often do you talk to your mother about how well you get along with your teachers?	1	2	3	4	5
50.How often do you have disagreements or arguments with your mother?	1	2	3	4	5
51.How often do you purposefully not talk to your mother because you are angry with her?	1	2	3	4	5
52.How often do you get angry with your mother?	1	2	3	4	5
53.How often does your mother approve of your friends?	1	2	3	4	5
54.How often does your mother approve of your boyfriend/girlfriend?	1	2	3	4	5
55.How often does your mother like when you go out with your friends?	1	2	3	4	5

<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

56. My father often asks about what I am doing in school.	1	2	3	4	5
57. My father gives me the right amount of affection.	1	2	3	4	5
58. One of the worst things that could happen to me would be to find out that I let my father down.	1	2	3	4	5
59. My father is usually proud of me when I finish something at which I've worked hard.	1	2	3	4	5
60. My father trusts me.	1	2	3	4	5
61. I am closer to my father than a lot of kids my age are.	1	2	3	4	5
62. My father sometimes puts me down in front of other people.	1	2	3	4	5
63. Sometimes my father won't listen to me or my opinions.	1	2	3	4	5
64. My father sometimes gives me the feeling that I'm not living up to his expectations.	1	2	3	4	5
65. My father seems to wish I were a different type of person.	1	2	3	4	5
66. My father wants to know who I am with when I go out with friends or on a date.	1	2	3	4	5
67. In my free time away from home, my father knows who I'm with and where I am.	1	2	3	4	5
68. My father wants me to tell him where I am if I don't come home right after school.	1	2	3	4	5
69. When I am not at home, my father knows my whereabouts.	1	2	3	4	5

<b>Never</b>	<b>Occasionally</b>	<b>Sometimes</b>	<b>Often</b>	<b>Very Often</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

70.How often do you talk to your father about other things that are important to you?	1	2	3	4	5
71.How often do you talk to your father about major personal decisions?	1	2	3	4	5
72.How often do you talk to your father about problems you have at school?	1	2	3	4	5
73.How often do you talk to your father about your job plans for the future?	1	2	3	4	5
74.How often do you talk to your father about how well you get along with your teachers?	1	2	3	4	5
75.How often do you have disagreements or arguments with your father?	1	2	3	4	5
76.How often do you purposefully not talk to your father because you are angry with him?	1	2	3	4	5
77.How often do you get angry with your father?	1	2	3	4	5
78.How often does your father approve of your friends?	1	2	3	4	5
79.How often does your father approve of your boyfriend/girlfriend?	1	2	3	4	5
80.How often does your father like when you go out with your friends?	1	2	3	4	5

## Appendix F

## Ryff's Psychological Well-Being Scale

1- I am not afraid to voice my opinions even when they are in opposition to the opinions of most people	1	2	3	4	5	6
2- In general, I feel in charge of the situation in which I live	1	2	3	4	5	6
3- I am not interested in activities that will expand my horizons	1	2	3	4	5	6
4- Most people see me as loving and affectionate	1	2	3	4	5	6
5- I live life one day at a time and don't really think about the future	1	2	3	4	5	6
6- When I look at the story of my life, I am pleased with how things have turned out	1	2	3	4	5	6
7- My decisions are not usually influenced by what everyone else is doing	1	2	3	4	5	6
8- The demands of everyday life often get me down	1	2	3	4	5	6
9- I think it is important to have new experiences that challenge how you think about yourself and the world	1	2	3	4	5	6
10- Maintaining close relationships have been difficult and frustrated for me	1	2	3	4	5	6
11- I have a sense of direction and purpose in life	1	2	3	4	5	6
12- In general I feel confident and positive about myself	1	2	3	4	5	6
13- I tend to worry about what other people think of me	1	2	3	4	5	6
14- I do not fit very well with people and community around me	1	2	3	4	5	6
15- When I think about it, I have not really improved much as a person over the years	1	2	3	4	5	6
16- I often feel lonely because I have few close friends with whom to share my	1	2	3	4	5	6

concerns						
17- My daily activities often seem trivial and unimportant to me	1	2	3	4	5	6
18- I feel like many of the people I know have gotten more out of life than I have	1	2	3	4	5	6
19- I tend to be influenced by people with strong opinions	1	2	3	4	5	6
20- I am quite good at managing many of the responsibilities of my daily life	1	2	3	4	5	6
21- I have the sense that I have developed a lot as a person over time	1	2	3	4	5	6
22- I enjoy personal and mutual conversations with family members and friends	1	2	3	4	5	6
23- I don't have a good sense of what it is am trying to accomplish in life	1	2	3	4	5	6
24- I like most aspects of my personality	1	2	3	4	5	6
25- I have confidence in my opinions even if they are contrary to the general consensus	1	2	3	4	5	6
26- I often feel overwhelmed by my responsibilities	1	2	3	4	5	6
27- I don' t enjoy being in new situations that require me to change my old familiar ways of doing things	1	2	3	4	5	6
28- People would describe me as a giving person, willing to share my time with others.	1	2	3	4	5	6
29- I enjoy making plans for the future and working to make them reality	1	2	3	4	5	6
30- In my ways, I feel disappointed about my achievements in life	1	2	3	4	5	6
31- It is difficult for me to voice my own opinions on controversial matters	1	2	3	4	5	6
32- I have difficulty arranging my life in a way that is satisfying to me	1	2	3	4	5	6
33- For me, life has been a continuous process of learning, changing and growth	1	2	3	4	5	6
34- I have not experienced many warm and trusting relationships with others	1	2	3	4	5	6
35- Some people wander aimlessly through life but I am not one of them	1	2	3	4	5	6

36- My attitude about myself is probably not as positive as most people feel about themselves	1	2	3	4	5	6
37- I judge myself by what I think is important not by the values of what others think is important	1	2	3	4	5	6
38- I have been able to build a home and lifestyle for myself that is much to my liking	1	2	3	4	5	6
39- I gave up trying to make big improvements and changes in my life along time ago	1	2	3	4	5	6
40- I know that I can trust my friends and they know they can trust me	1	2	3	4	5	6
41- I sometimes feel as if I have done all there is to do in life	1	2	3	4	5	6
42- when I compare myself to friends and acquaintances, it makes me feel good about who I am	1	2	3	4	5	6