Parental Divorce and Depression in Young Adulthood: Christianity as a Mediating Factor

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Messiah College

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This project is dedicated to my father, Jay Jeffrey Miller.

He has always been there to encourage me and lift my spirits. He truly is my inspiration and my hero.

I hope that this research project honors the integrity that he has modeled for me on countless occasions.
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Abstract

Previous studies have found a correlation between parental divorce during childhood and depression during the young adult years. Further, studies have consistently demonstrated that religiosity helps people better deal with negative life events. The present study combined these previous findings and investigated whether college students from divorced families would experience depression in their young adult years and whether religiosity would impact the amount of experienced depression. Two hundred and twenty student volunteers from a Christian liberal arts college completed surveys on religious orientation, spiritual well-being, quest, and depression. A significant relationship was not observed between familial status and depression, nor was there a significant correlation between level of depression and religious orientation, spiritual well-being, quest, gender, and year in school. Results did show, however, that intact parents were more likely to talk positively to their children about Jesus and to take them to church than were divorced parents. It was recommended that future research use a larger divorced sample in order to confirm or disconfirm the present study’s findings.
Parental Divorce and Depression in Young Adulthood: Christianity as a Mediating Factor

Divorce remains a stressful outcome to a once close and trusting relationship. The ramifications of divorce have been shown to be a major vulnerability to the onset of psychological problems. This is evident in the fact that divorced and separated parents, in addition to their offspring, have been markedly over-represented among people with psychological problems (Burns & Dunlop, 2002; Carson, Butcher, & Mineka, 2000; Levin & Chatters, 1998; O’Connor, Thorpe, Dunn, & Golding, 1999; Zill, Morrison, & Coiro, 1993), especially depression (Burns & Dunlop, 2002; Kennedy, 1998; Koenig, McCullough, & Larson, 2001; Ross & Mirowsky, 1999). Whereas the effects of parental divorce on children and adolescents have been adequately researched, Austin and Lennings (1993) have noted that studies investigating its effects into young adulthood are more limited. Further, numerous studies have discovered that religion tends to have positive effects on mental health (Bergin, 1983; Gartner, Larson, & Allen, 1991; Johnson & Jones, 2000), yet few have investigated the role religion plays in mitigating depression. The goal of the present study is to integrate the aforementioned and investigate parental divorce, its depressive effects in young adults, and religion as a mediating factor.

Divorce

Over two million divorces occur annually in the U.S. (Yax, 2003), resulting in more than one million children being raised in single parent homes (Ponzetti, 2003). Looked at from a different angle, nearly half of all marriages end in divorce, and it is estimated that 50 to 60 percent of children born during the 1990s will live at some point in single parent families (Hetherington, Bridges, & Insabella, 1998). Such statistics have made divorce and its effects on
children a common theme in psychological investigations (Booth & Amato, 2001; Dong, Wang, & Ollendick 2002; O’Connor et al., 1999; Palosaari, Aro, & Laippala, 1996; Pons-Salvador, 1993; Shortz & Worthington, 1994), which have found that children from divorced families, in comparison to those from intact families, tend to be more insecure and delinquent and express a wider range of psychological problems (Chase-Lansdale, Cherlin, & Kieran, 1995; Ross & Mirowsky, 1999; Rutter, 1971, 1979), and had lower educational attainments, incomes, and life-satisfaction during their adult years (Amato & Keith 1991; Chase-Lansdale et al., 1995; Hetherington et al., 1998). These findings were further reinforced in Judith Wallerstein’s bestseller, Second chances: Men, women and children a decade after divorce (Wallerstein & Blakeslee, 1989). This clinical investigation, based on a 15-year follow-up of children from divorced families, found that nearly half of the participants on reaching young adulthood were “worried, underachieving, self-deprecating, and sometimes angry young men and women...[M]any...were involved in maladaptive pathways, including multiple relationships and impulsive marriages that ended in divorce” (Wallerstein, 1991, p. 354). Other studies, though much fewer in number, have challenged such pessimistic findings. For instance, a secondary analysis of national survey data found that adult children of divorced families were indistinguishable from those of intact families (Glenn, 1985).

Divorce and Its Stressful Effects

The majority of research supports the claim that divorce acts as a stressor and places children at a higher risk for both short and long-term psychological problems (Carson et al., 2000; Zill et al., 1993). The ramifications of divorce typically exceed children’s available coping resources (Levinson, 1995); this prompts them to form stress responses (Carpenter, 1992). A
stress response refers to the physiological, cognitive, affective, and behavioral reactions to physical and/or psychological demands. Furthermore, studies have suggested that a child’s well-being may easily be threatened by divorce and may produce automatic and persistent attempts to relieve consequential stress (Carpenter, 1992). It is important to note, however, that the severity of a person’s stress response is a function of the stressor’s importance to the targeted individual and the duration of the stressor. In other words, it might not be the divorce per se that impacts children but rather the cumulative effects of the divorce (Carson et al., 2000).

*Divorce and Its Depressive Effects in Young Adulthood*

The initial impact of divorce results in an immediate stress for the parents and children (Zill et al., 1993). The children’s stress dissipates for a short while but rebounds as they enter the college years (Pons-Salvador, 1993; Ross & Mirowsky, 1999; Rutter, 1988). Given the power of the human organism to recuperate from stress and strive for equilibrium, why would long-term effects of marital disruption reappear in young adulthood? Zill and colleagues (1993) offer one explanation. They suggest that parental conflicts have developmental effects on children that only manifest as they engage in critical transitions (i.e., courtship, sexual relationships, university education, establishment of independence, new employment). College-aged children are standing before the threshold of adulthood, contemplating major life decisions that will help establish their identities as grownups. As Zill and partners say, “A history of [parental] conflict or disruption may affect the youth’s passage into adulthood by creating confusion as to loyalties and values or motivating the youth to fail as a way of getting back at the parents for their nonfeasance” (p. 92). Thus, it is common for college students of divorced families to be depressed as they transition into adulthood (Wallerstein & Blakeslee, 1989).
A study by Amato and Keith (1991) supports this claim; they found a robust and steady correlation between parental separation in childhood and young adulthood well-being (i.e. depression). Further, a literature analysis by O’Connor and colleagues (1999) found an association between childhood parental divorce and adulthood depression not only in clinical samples and national cohorts, but also in countries with contrasting separation rates. It appears that the depressive effects of parental divorce on children span cultural barriers.

The stressful and depressive ramifications of parental divorce on children have prompted additional research. Studies have typically investigated three areas thought to impact the course of young adult development: age, gender, and home environment.

*Age at divorce.*

Developmental psychologists tend to believe that the limited cognitive abilities of preschool children leave them more vulnerable to the effects of marital disruption “inasmuch as they are less able than older children to understand the situation” (Zill et al., 1993, p. 93). They are more dependent on their parents and do not have the available means to use school, friends, and leisure activities to escape the family chaos. Additionally, preschoolers of divorced families have a greater likelihood of spending more time in financially deprived single-parent relationships than children of late-divorcing parents (Zill et al., 1993).

Studies, however, have been unable to support the claim that preschoolers are more vulnerable to the effects of parental divorce. Rogers (1994) and Schmidtgall, King, Zarski, and Cooper (2000) found that the age at which children experienced their parents’ divorce did not predict later depression, nor did it predict more severe depression; all of their participants were equally likely to become depressed. Palosaari and Aro (1994) reported similar findings for their
female population but found that males who had experienced parental divorce during their latency years (age 7-12) were 24% more likely to reach higher levels of depression at the age of 22 than did males who were the victims of divorce during their preschool or adolescence years. This is but one of the few studies that found that age later predicted depression, and it was only for the male population. The majority of studies have concluded that a child’s age at the time of divorce is not a predictor of later adulthood depression (Rogers, 1994; Schmidtgall et al., 2000).

*Gender of the divorced child.*

Palosaari and Aro’s (1994) study raises the question of gender. Does being male or female make children more susceptible to depression as a result of parental divorce? Palosaari and Aro would contend that it does; they found that males were more likely than females to become depressed during their college years. Other investigators contest Palosaari and Aro’s findings. Rogers (1994), Schmidtgall and colleagues (2000), and Zaslow (1988, 1989) found that women were more vulnerable to depression even when controlling for social support, recent life events, financial circumstances, and current marital status. It seems that these latter findings predominate current psychological theory.

Why, though, would females be more prone to depression as a result of parental divorce? There are two theories. Schmidtgall and associates (2000) and Zaslow (1988, 1989) have hypothesized that depression as a consequence of parental divorce may be more evident in females because they typically internalize stress responses, whereas as males act them out. A second hypothesis has suggested that females are more self-focused than males and are more likely to make negative attributions directed towards themselves. In turn, these negative attributions and the tendency to internalize may prompt them to appear more depressed (Joiner &
Blalock as cited in Schmidtgal et al., 2000). These two hypotheses suggest that females are no more prone to depression than their male counterparts but rather are more overt in their emotional expressions and therefore may appear more depressed; consequently, females tend to score higher on depression inventories.

*Home environment.*

The family environment in which divorced children are raised also appears to impact well-being in young adulthood (Booth & Amato, 2001; Schmidtgal et al., 2000). One study by Booth and Amato (2001) differentiated between low-conflict and high-conflict marriages. They found that the dissolution of low-conflict marriages had stronger negative influences on children, whereas the termination of high-conflict marriages had relatively benevolent effects because the divorce removed them from their muddled and stressful home environments. The authors concluded that the stress of a hostile environment exceeds the stress of a single-parent environment, whereas divorce not preceded by prolonged periods of apparent marital discord represents an unforeseen, uninvited, and unmanageable event. “Divorce under [unexpected] circumstances represents a major change in what may otherwise have been a secure and (from the child’s perspective) seemingly well-functioning family” (Booth & Amato, 2001, p. 210).

Schmidtgal and associates (2000) approached the importance of the home environment from a different angle. They found that positive outcomes of children from divorced families were a function of the number of positive stable home events experienced by those children. Children from loving, highly supportive, religious, and relatively hostile free environments were less likely to become depressed in their college years. As Roskies (1987) says, “Many elements add to an individual’s stress appraisal, including “perception of the external [and internal]
environments, perception of coping resources, and the pattern of commitments, values, and beliefs that increase or decrease vulnerability to challenges and/or threats” (p. 35). Moreover, it seems that those children brought up in supportive, loving, and religious homes fare better in dealing with parental divorce and consequent depression.

Religion and Health

Numerous studies have documented the influence of religiosity on health outcomes and have consistently reported a beneficial relationship between the two (Austin & Lennings, 1993; Hill & Pargament, 2003; Levin & Chatters, 1998), regardless of experimental design (i.e., diversity in sample populations, methodologies, religious measures) (Bergin, 1983; Gartner et al., 1991). Consider two empirical examples. (1) Srole and Langer (as cited in Levin & Chatters, 1998) compared the prevalence of mental illness among practicing and non-practicing Catholics, Protestants, and Jews. The researchers found a significantly higher ratio of impaired respondents amongst the inactive participants from all three religious sectors. They also found that the active participants fared much better in combating their mental disorders. (2) Koenig and partners (1992) conducted a study in which they examined a group of hospitalized medically ill men for three weeks. Six months later the majority of these men had been re-hospitalized and religiosity was the only predictor of fewer depressive symptoms.

Religious Commitment Measurements and Their Relation to Depression

Religiously active people have shown less symptoms of depression, have been less likely to be diagnosed with depression, and have been less likely to score in the clinical range on depression inventories (Austin & Lennings, 1993; Kennedy, 1998; Strawbridge, Shema, Cohen,
Roberts, & Kaplan, 1998). Further, a strong religious commitment has often correlated with fewer depressive symptoms (Austin & Lennings, 1993; Kennedy, 1998; Koenig et al., 2001). How, though, can religious commitment be conceptualized? Religiosity has typically been measured using organizational religious activity measures (ORA) and extrinsic/intrinsic orientation measures.

ORA measurements investigate explicit religious involvement (i.e., frequency of church attendance), private religious involvement (i.e., frequency of prayer and meditation), and religious salience (i.e., self-rated importance of religion); researchers combine these three elements into a single measure to indicate overall religious commitment and involvement. Many have claimed that such measurements are not very accurate because the majority of people claim to be religious, but Schmidt and Hunter (as cited in Koenig et al., 2001) have reported reliability in all areas of ORA measurements. Koenig and others (2001) have reported that ORA measurements have consistently found negative correlations and inverse relationships between depression and religiosity (i.e., greater religiosity associated with fewer depressive symptoms). Computational meta-analyses have even shown that that the zero-order correlations between ORA measurements and depression were in the range of $r = -.07$ to $r = -.40$, with a central tendency of $r = -.20$ (Koenig et al., 2001).

A second and more practical way of measuring religious commitment involves intrinsic/extrinsic Likert-format orientation scales (Allport, 1950, 1963; Allport & Ross, 1967; Gorsuch & McPherson, 1989; Gorsuch & Venable, 1983; Koenig et al., 2001). Intrinsic religiosity is a solid religious commitment based on personal and deep-seated meaning (Allport, 1950, 1963). Individuals of this orientation find religion valuable in and of itself. In contrast,
extrinsic religiosity is a utilitarian approach (Koenig et al., 2001) that involves mechanized, ritualized, or socialized practices pursued out of duty or guilt (Allport, 1950, 1963). Both extrinsic and intrinsic orientations have consistently predicted depression levels in adults (Allport 1963; Allport & Ross, 1967; Bergin, 1983; Gartner et al., 1991; Koenig et al., 2001). In a meta-analysis, Koenig and partners (2001) reported a positive trend that extrinsic orientations predicted greater depression levels. They concluded that people motivated to be religious for the benefits it might bring them (e.g. social prestige, friends, affirmation of one’s life-style) were at greater risk for depression. They further found that intrinsic orientations negatively correlated with depression. Moreover, it seems that intrinsically religious individuals experience lower depression levels than their extrinsic counterparts.

A study by Park, Cohen, Lawrence, and Herb (1990) and another by Koenig, George, and Peterson (1998) additionally illustrate the intrinsic and extrinsic claims. In an eight-week prospective study, Park and associates (1990) conducted a test to investigate the stress-moderating effects of intrinsic religiosity and overall religious coping on depression and trait anxiety in Catholic and Protestant college students. Park and colleagues administered an intrinsic/extrinsic scale to 83 introductory psychology students who had previously indicated that religion was either fairly or extremely important to them. The study found a significant cross-sectional interaction between uncontrollable life stressors (i.e., divorce) and depression. Depression was positive for low intrinsic Protestants, flat for medium intrinsic Protestants, and negative for high intrinsic Protestants. It seems that those people with higher intrinsic religious orientations suffer from fewer depressive symptoms; thus, it is reasonable to hypothesize that intrinsic orientations act to buffer against the negative effects of stress on depression.
Koenig and colleagues (1998) conducted a study that reported similar findings to that of Park and others (1990). They screened 111 hospitalized in-patient residents over age 60 for depressive symptoms. Ninety-four of the 111 patients had been diagnosed with depression. After hospital discharge, the researchers checked on the status of these 94 residents 4 times at 12-week intervals. With each follow-up, depression symptoms and levels were reassessed. Religious variables were examined as predictors of time to remission. Throughout the follow-up period, 47 participants had remissions. Statistical analysis found that intrinsic religiosity was significantly and independently related to time of remission. Participants with higher intrinsic orientations had more rapid remissions than participants with lower orientations. The data suggests that high intrinsic orientations have positive effects on mental health well-being.

*Why Religiosity Benefits Mental Health*

Given the surplus of existing findings, a next logical step would be to explore the possible explanations for this beneficial association between religion and mental health. Idler (1987) offers four sociological explanations for why religion positively influences health. First, religion discourages high-risk behaviors (i.e. smoking, pre-marital sexual relations). Secondly, it provides and promotes social cohesiveness (i.e., structure, encouragement, support, and accountability). Thirdly, it provides coherence (i.e., symbols, texts, scripture, and prayers) to make sense of and begin to comprehend stress, and fourthly it provides a theodicy; it explains the existence of evil despite an omniscient, omnipotent, and omnipresent God.

In addition to Idler’s (1987) sociological explanation, three theoretical models for the relationship between religiosity and health have been proposed. The suppressor model says that religious practices increase directly in response to stress to alleviate or buffer adverse effects.
The moderator model suggests that religious practices work only to reduce extreme stressors (i.e., acute illness, onset of disability, divorce, or bereavement). In the distress-deterrent model, religiosity is independent of stress, meaning it is not a response to stress but nevertheless is beneficial (Koenig et al., 2001). In addition to these three models, Wolinsky & Stump (1996) have proposed that with a declining sense of external control, religiosity may contribute to preserving one's internal sense of control.

**Concluding Remarks On Relationship Between Religiosity and Depression**

An overall consensus has not been reached as to why religion positively affects people’s health. Nevertheless, research has repeatedly shown that some aspects of religious involvement are more commonly associated with depression. The following three inferences have been drawn: (1) People who are frequently involved in religious services and who highly value their faith for intrinsic reasons may be at a reduced risk for depression. (2) Even when religious people develop depression, they recover more quickly than those who are not religious, and (3) people who are involved in religion for extrinsic gains are at a higher risk of developing depression (Koenig et al., 2001). Moreover, it seems accurate to say that religiosity plays an important role in helping people cope with the effects of stressful life circumstances.

**Religiosity, Depression, and Parental Divorce**

The stressor of parental divorce is a reality faced by more than one million children nationwide (Ponzetti, 2003). Given that religion positively interacts to reduce and buffer against many stressors, it only makes sense that children with strong religious orientations from divorced families would exhibit lower depression levels than their religiously weak counterparts from
divorced families. Lazarus and Folkman (as cited in Shortz & Worthington, 1994) have suggested that events stimulate primary and secondary appraisals, which lead to coping activities and then turn to outcomes. Thus, religion might possibly act to buffer against the effects of parental divorce.

A study by Shortz and Worthington (1994) aimed to extend the understanding of divorce and its effects on children by investigating religion’s role in coping with parental divorce. Participants were 131 volunteers (51 males, 80 females) recruited from undergraduate psychology classes. The mean age was 21 years and all had experienced their parents’ divorce between the ages of 11 and 25. Participants completed surveys related to their religious salience, frequency of religious service attendance, causal attributions directed at parental divorce, and extent of religious and non-religious coping activities in dealing with the divorce. Participants responded to all test items to the degree at which they remembered each to be involved during their parents’ divorces. A hierarchical multiple regression was performed on the data and found that religiosity significantly predicted religious coping activities. Those that attributed the divorce to God’s anger turned away from the church, but those who viewed the divorce as part of God’s plan actively coped and consequently suffered less depression than did their counterparts who had turned away from the church. Shortz and Worthington concluded that the strength of religiosity predicted religious coping activities and well-being in that those participants who had measured high in their faith coped more effectively with their parents’ divorce. This finding supports the claim that religion helps mitigate the effects of parental divorce.
Present Study’s Objective and Hypotheses

It is the objective of the present study to similarly investigate college students’ religiosity and their depression levels as a consequence of parental divorce. Will strength of religiosity buffer against depression? Past research has shown that children whose parents have divorced display higher levels of depression as compared to their counterparts from intact families (Amato & Keith, 1991; O’Connor et al., 1999). It has further been shown that male college students from divorced families suffer lower depression levels than their female counterparts (Rogers, 1994; Schmidtgal et al., 2000; Zaslow, 1989). It is predicted that the present study will find similar results.

Additionally, the present study hypothesizes that intact parents will talk more positively and frequently about Jesus to their children than will divorced parents and that intact parents will take their children to church more often than divorced parents. Also, it is predicted that participants of divorced families with intrinsic orientations will suffer lower depression levels than their extrinsic counterparts. This is predicted due to past research that has suggested a correlation between religion and mental health (Austin & Lennings, 1993; Levin & Chatters, 1998; Hill & Pargament, 2003). It is further predicted that participants from divorced families with high Spiritual Well-Being scores will experience lower depression levels. This is predicted because higher scores on the Spiritual Well-Being Scale indicate a greater satisfaction with life and religion. Similarly, it is predicted that participants of divorced families who display high levels of quest will also have lower depression levels because such would indicate that the participants’ religion involved open-ended and responsive dialogue with existential questions raised by the contradictions and tragedies of life (i.e., parental divorce) (Batson & Schoenrade,
1991a, b; Hill & Hood, 1999). It is also hypothesized that first year participants from divorced families will have higher depression levels than their fourth year counterparts. This is predicted because studies have shown that times of transition often induce stress, which, in turn, impacts depression levels. First year participants will have the additional stress of being away from home for the first time and adjusting to college life, in addition to reflecting on their parents’ divorce and possibly wondering if they will similarly have that outcome as they enter dating relationships (Zill et al., 1993).

Method

Participants

Participants were 220 undergraduate students (165 females, 55 males) from a liberal arts college in Central Pennsylvania. Included in the sample were 104 first year students, 67 second year students, 25 third year students, and 24 fourth year students. Ages ranged from 17 to 45 years, with a mean of 19 years. The majority were European American (93%), while other ethnicities included African American (2%), Hispanic American (.9%), Native American (.5%), Asian American (1%), and other (3 %). The largest represented majors included psychology (15%), nursing (8%), and biology (5%) and the major religious denominations included non-denominational (25%), Presbyterian (9%), and Baptist (7%). The average cumulative GPA was a 3.40. The majority of participants were from intact families (81%), while 3 % were from separated families, 12 % from divorced families, and 3% from families with one deceased parent. All participants completed the questionnaire packets on a volunteer basis and with incentive (i.e., entered in a gift certificate drawing and/or given extra credit by their professors).
Measures

Participants completed four measures (Religious Orientation Scale – Revised (Gorsuch & McPherson, 1989), Spiritual Well-being Scale (Paloutzian & Ellison, 1982; Ellison, 1983), Quest Scale (Batson & Schoenrade, 1991a, b), Beck Depression Inventory-II (published 1996)) to assess the relationship between parental divorce, depression, and religiosity (see Appendix A – D). A demographic question served to separate those students from divorced versus intact families (see Appendix E, questions 8).

Three religious scales were used to determine the strength of participants’ religiosity. The Religious Orientation Scale-Revised (ROS-Revised) (see Appendix A) is an offshoot of Gorsuch and Venable’s Age-Universal scale (Gorsuch & McPherson, 1989). Although the ROS-Revised and the Age-Universal scale use an identical five-point Likert format (1 = strongly disagree; 5 = strongly agree) to measure Allport’s (1950) original intrinsic and extrinsic religious orientations, the ROS-Revised satisfies a broader range of educational levels. The present study only used the first 12 of the ROS-Revised’s 14 items. The ROS-Revised has demonstrated an internal validity of .83 for its intrinsic measures and .57 to .65 for its extrinsic measures. Validity studies have shown a relationship between the ROS-Revised and measures of traditional orthodoxy beliefs (Hill & Hood, 1999).

The Quest Scale (see Appendix B) (Batson & Schoenrade, 1991a, b) uses quest, defined as “the degree to which an individual’s religion involves an open-ended, responsive dialogue with existential questions raised by the contradictions and tragedies of life” (Batson, Schoenrade, & Ventis as cited in Hill & Hood, 1999, p. 138), as a separate but equally important motivational construct from that of intrinsic and extrinsic religious orientation scales. It contains 12 items that
are measured on a nine-point Likert scale (1 = strongly disagree to 9 = strongly agree), which is intended to assess three discrete but interconnected aspects of quest orientation: (1) readiness to face existential questions without reducing their complexity, (2) self-criticism and perceptions of religious doubts as positive, (3) and openness to change (Batson & Schoenrade, 1991a, b). The Quest Scale has consistently shown reliability scores between .75 and .81, and validity measures have been distinct from extrinsic and intrinsic measurements (Hill & Hood, 1999).

The Spiritual Well-Being Scale (SWB Scale) (see Appendix C) (Ellison, 1983; Paloutzian & Ellison, 1982) consists of 20 items (10 existential and 10 religious) intended to measure the quality of life. Each of the items is rated on a six-point Likert scale, ranging from “strongly agree” to “strongly disagree”. The SWB Scale yields three scores: a subscore for existential well-being, a subscore for religious well-being, and an overall score. Test-retest reliability coefficients ranged from .88 to .99 for religious well-being, .73 to .98 for existential well-being, and .82 to .99 for spiritual well-being. The internal consistency alpha coefficients ranged from .82 to .94 for religious well-being, .78 to .86 for existential well-being, and .89 to .94 for spiritual well-being. In terms of validity, people who scored high on the SWB Scale scored lower on loneliness, higher on self-confidence, and higher on intrinsic religious orientation scales. Scores on all three portions of the scale (religious, existential, and spiritual well-being) positively correlated with a sense of purpose in life. Further, research has shown that the three sections of the scale are associated with various psychological, religious, health, and relational variables (Hill & Hood, 1999).

Participants’ levels of depression were calculated using the Beck Depression Inventory - II (BDI-II) (see Appendix D) (published 1996). It is a 21-item self-report scale constructed to
gauge various depression levels. Each item is answered on the basis of four multiple-choice options, ranging from 0 (no indication of depression) to 3 (clinical depression) (Beck, Ward, Mendelson, Mock, & Erbaugh, 1961).

Operational Definitions.

Participants from divorced families were defined as those whose parents had already divorced and those whose parents had been separated for six months or longer. The latter is due to research findings that suggest that children whose parents have been separated six months or longer display the same negative symptoms as their counterparts from divorced families (O’Connor et al., 1999; Rogers, 1994). Being raised in a religious (Christian) environment included those participants whose parents openly and positively talked about Jesus and encouraged them to attend Sunday school and other church activities during their childhoods (see the demographic section of Appendix E, questions 16-18). Finally, an existential orientation was measured using the Quest Scale, an intrinsic/extrinsic orientation using the ROS-Revised, and an overall religious well-being and satisfaction with life using the SWB Scale. High scores indicated a greater quest, intrinsic orientation, and satisfaction with religion and life, respectively (Hill & Hood, 1999). Also, level of depression was measured with the BDI-II. Higher scores indicated a greater level of depression (Beck et al., 1961).

Procedure

Thirty to forty participants entered a reserved college classroom at a selected date and time; there were a total of six days and twelve times from which participants could choose. An informed consent agreement (see Appendix F) and a response packet (see Appendix A - E) were located at each participant’s seat. Participants were told not to open the response packets until
notified by the researcher. The researcher read an introduction that (see Appendix G) stipulated the purpose, the procedure in which participants were to follow, and the approximate time of completion. Participants next signed their consent agreements and then began to complete the questionnaire packets. Participants were free to leave once the response packets and consent agreements were handed in to the researcher. All were debriefed via mail (see Appendix H).

Results

Hypothesis 1

The present study’s initial hypothesis was derived from previous studies. Amato and Keith (1991) and O’Conner and partners (1999) found that children of intact families had lower depression levels as adults than did children from divorced families. The present study did not confirm these findings, however. A t-test performed on the data indicated a non-significant relationship between familial status (intact vs. divorced) and depression \( t(207) = .58, \text{n.s.} \). A difference in means was observed, however. Those from divorced families displayed a mean depression level of 12, whereas those from intact families had a mean depression level of 11. Nevertheless, this difference in means was not large enough to suggest a significant relationship.

Hypothesis 2

The second hypothesis was likewise formulated on account of past studies. Rogers (1994), Schmidtgall and colleagues (2000), and Zaslow (1989) found that females tended to express greater depression levels than did males. The present study’s results did not support these findings, however. A t-test performed on the data yielded a non-significant relationship between depression and gender \( t(32) = .70, \text{n.s.} \) within the divorced sample. Nevertheless, females from divorced families experienced a mean depression level of 12, while their male
counterparts experienced a mean depression level of 11. Still, this difference in means was not large enough to indicate a significant relationship.

*Hypothesis 3*

The present study additionally hypothesized that intact parents would talk more positively and frequently about Jesus to their children than would divorced parents. Fifty-three percent of participants from intact families claimed that their parents positively spoke to them about Jesus on a daily basis, whereas only 29% of the divorced sample declared this. Five percent of participants from intact families said that their parents positively spoke to them about Jesus ten or less times a year, and 2% stated that their parents never spoke positively to them about Jesus. These percentages increased for the divorced sample, where 12% claimed the former and 6% the latter (see Table 1 on the next page for a complete listing of these percentages). Also, 79% of the intact parents took their children to church at least once a week, while 62% of the divorced parents did this, and 1% of the intact parents never took their children to church, whereas 9% of the divorced parents did this (see Table 2 on the next page for a complete listing of these percentages).

*Hypothesis 4*

The fourth hypothesis predicted that participants from divorced families with intrinsic orientations would experience lower depression levels than would their extrinsic counterparts. A zero-order correlation was performed on the divorced sample’s total BDI-II, intrinsic religious orientation (IRO), and extrinsic religious orientation (ERO) scores. Results showed a non-significant relationship between these variables. The same analysis was performed on the entire sample, and again the results were non-significant.
**Table 1**

*Frequency of Intact and Divorced Parents Speaking Positively to Their Children About Jesus During Their Children’s Childhoods*

<table>
<thead>
<tr>
<th></th>
<th>Intact Parent</th>
<th>Divorced Parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Everyday</td>
<td>53%</td>
<td>29%</td>
</tr>
<tr>
<td>Once or more a week</td>
<td>30%</td>
<td>35%</td>
</tr>
<tr>
<td>Two to three times a month</td>
<td>10%</td>
<td>12%</td>
</tr>
<tr>
<td>Ten or less times a year</td>
<td>5%</td>
<td>12%</td>
</tr>
<tr>
<td>Never</td>
<td>2%</td>
<td>6%</td>
</tr>
</tbody>
</table>

**Table 2**

*Frequency of Intact and Divorced Parents Taking Their Children to Church During Their Children’s Childhoods*

<table>
<thead>
<tr>
<th></th>
<th>Intact Parents</th>
<th>Divorced Parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Everyday</td>
<td>3%</td>
<td>0%</td>
</tr>
<tr>
<td>Once or more a week</td>
<td>79%</td>
<td>62%</td>
</tr>
<tr>
<td>Two to three times a month</td>
<td>12%</td>
<td>15%</td>
</tr>
<tr>
<td>Ten or less times a year</td>
<td>3%</td>
<td>15%</td>
</tr>
<tr>
<td>Never</td>
<td>1%</td>
<td>9%</td>
</tr>
</tbody>
</table>
Hypothesis 5

The present study further predicted a negative correlation between participants from divorced families’ total Spiritual Well-Being scores and their levels of depression. This hypothesis was not supported, however. A zero-order correlation found a non-significant relationship between depression and spiritual well-being for the divorced sample. When this same analysis was performed on the entire sample, results found a significant and negative correlation ($r = -.387, p < .000$).

Hypothesis 6

The researcher also hypothesized a negative correlation between the divorced sample’s total BDI-II and Quest scores. Statistical analysis did not find a significant correlation between depression and quest. Analysis of the entire sample likewise produced a non-significant relationship.

Hypothesis 7

The final hypothesis was that first year participants from divorced families would experience higher depression levels than their fourth year counterparts. A $t$-test performed on the data yielded non-significant results [$t (22) = .52$, n.s.]. Nevertheless, first year participants experienced an average depression level of 15, whereas fourth year participants experienced an average level of 12. Still, this difference was not enough to indicate a significant relationship between depression and year in school.
Discussion

Previous studies have demonstrated that individuals from divorced families experience negative and depressive ramifications in their young adult years (Amato & Keith, 1991; O’Connor et al., 1999). Further, additional studies have found that religion helps people better deal with negative life events (Levin & Chatters, 1998; Hill & Pargament, 2003). The objective of the present study was to combine these two findings and observe whether or not religiosity would help mitigate the depressive effects encountered by young adults from divorced families. It was for this reason that the majority of the present study’s hypotheses dealt with variables related to individuals from divorced families. Unfortunately, the present study’s divorced sample only included 34 participants. As a result of this limited size, data analysis rarely demonstrated significant results. Future studies that investigate divorce, especially at a religious institution, ought to first conduct a pilot study that approximates the divorce rates of the chosen population. This would allow researchers to decide if there existed a large enough sample with which to conduct research.

The present study’s first hypothesis was not supported. A significant relationship was not observed between familial status and depression; thus, the participants in the divorced sample were no more likely to express high depression levels than were those in the intact sample. It is recommended that this same analysis be performed on a larger divorced sample to verify whether or not depression manifests during the young adult years as a result of parental divorce.

Likewise, the present study’s second hypothesis was not substantiated. A significant relationship was not observed between gender and depression. In other words, females from divorced families were no more likely to experience high depression levels than were their male
counterparts. It is possible that the present study did not find a significant relationship between gender and depression due to a small divorced sample size, in addition to uneven gender ratios. Only 8 of the 34 participants from divorced families were males. Had there been a larger divorced sample size and a more equivalent gender ratio, the present study’s results might have reflected previous findings that females are more likely to be depressed than males (Rogers, 1994; Schmidtgal et al., 2000; Zaslow, 1988, 1989).

Unlike the researcher’s first and second hypotheses, her third hypothesis was supported. Divorced parents tended to talk less positively and more negatively about Jesus to their children than did intact parents. Results also indicated that divorced parents were less likely to take their children to church. These results suggest that more frequent discussions about Jesus and more frequent church visits correlate with stronger relationships between parents and lower divorce rates. Perhaps parents that foster Christian environments feel stronger against divorce and thus do not see it as an option.

Akin to the first and second hypothesis, the researcher’s forth hypothesis was not supported. A correlation was not observed between depression and religious orientation within the divorced sample, nor was it observed within the entire sample. Future research is recommended since the present study’s findings contradict previous indications that people with intrinsic orientations experience better mental health than do people with extrinsic orientations (Koenig et al., 1998; Park et al., 1990).

Like intrinsic orientations, spiritual well-being has been shown to negatively correlate with depression (Hill & Hood, 1999). The present study confirmed these results when it tested the entire sample, but it disconfirmed these results when it tested only the divorced sample. The
zero-correlation performed on the divorced data showed non-significant results, meaning that there was not a relationship between the divorced sample's depression and spiritual well-being scores. A small divorced sample most likely accounts for these non-significant findings, for it seems logical that a relationship would exist between spiritual well-being and depression since previous research has shown that low spiritual well-being scores indicate a greater sense of loneliness and a lower sense of self-confidence, two aspects commonly associated with children of divorced families (Amato & Keith, 1991; Booth & Amato, 2001; Chase-Lansdale et al., 1995; Dong et al., 2002; Hetherington et al., 1998; Levinson, 1995; Palosaari et al., 1996; Ponzetti, 2003; Ross & Mirowsky, 1999; Rutter, 1971, 1979). Future research ought to perform a study that investigates divorce, depression, and spiritual well-being to clarify whether or not a correlation exists between these variables.

The researcher's sixth hypothesis was not supported as well. A significant relationship was not observed between depression and quest for the divorced sample, nor was it observed in the entire sample. This was in spite of the fact that Batson and Schoenrade (1991 a, b) stated that high quest levels involved open-ended and responsive dialogue raised by the contradictions and tragedies of life. Why, then, did participants with low levels of depression not express high levels of quest? Future research should investigate whether quest truly correlates with depression as suggested by Batson & Schoenrade since the present study shows otherwise.

Likewise, the final hypothesis was not substantiated. There was not a significant relationship between depression and year in school. In other words, first year participants from divorced families were no more likely to experience high depression levels than were their fourth year counterparts. In addition to a small divorced sample, the disproportionate ratios between
first and fourth year participants might have contributed to the present study’s non-significant findings. Only 6 of the 34 participants from divorced families were fourth year students, whereas 18 of the 34 were first year students. Thus, a correlation between year in school and depression might have been observed had there been a larger divorced sample and a more equivalent ratio of first to fourth year students.

Moreover, many flaws encompass the present study. It is recommended that future research be conducted using similar scales but with a larger divorced sample. This would allow researchers to more accurately verify whether or not Christianity helps to mitigate the depressive effects of parental divorce on children, if indeed depression is a ramification of divorce. This study is a springboard for additional research, and it sets the foreground for a more thorough investigation.
Appendix A

Religious Orientation Scale - Revised (ROS - Revised)

Directions: Below are 12 statements with which you may agree or disagree. Indicate your position with each item by placing the appropriate number on the line preceding that item.

1 = I strongly disagree
2 = I tend to disagree
3 = I'm not sure
4 = I tend to agree
5 = I strongly agree

_____ 1. I enjoy reading about my religion.

_____ 2. I go to church because it helps me to make friends.

_____ 3. It doesn't much matter what I believe so long as I am good.

_____ 4. It is important to me to spend time in private thought and prayer.

_____ 5. I have often had a strong sense of God's presence.

_____ 6. I pray mainly to gain relief and protection.

_____ 7. I try hard to live all my life according to my religious beliefs.

_____ 8. What religion offers me most is comfort in times of trouble and sorrow.

_____ 9. Prayer is for peace and happiness.

_____ 10. Although I am religious, I don't let it affect my daily life.

_____ 11. I go to church mostly to spend time with my friends.

_____ 12. My whole approach to life is based on my religion.
Appendix B

The Quest Scale

**Directions:** Below are 12 statements, please indicate the extent to which you agree or disagree with each by using the following scale:

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Strongly disagree</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Strongly agree</td>
</tr>
</tbody>
</table>

1. As I grow and change, I expect my religion also to grow and change.
2. I am constantly questioning my religious beliefs.
3. It might be said that I value my religious doubts and uncertainties.
4. I was not very interested in religion until I began to ask questions about the meaning and purpose of my life.
5. For me, doubting is an important part of what it means to be religious.
6. I do not expect my religious convictions to change in the next few years.
7. I find religious doubts upsetting.
8. I have been driven to ask religious questions out of a growing awareness of the tensions in my world and in my relation to my world.
9. My life experiences have led me to rethink my religious convictions.
10. There are many religious issues on which my views are still changing.
11. God wasn’t very important to me until I began to ask questions about the meaning of my own life.
12. Questions are far more central to my religious experience than are answers.
Appendix C

Spiritual Well-Being Scale (SWB Scale)

**Directions:** Below are 20 statements with which you may agree or disagree. Indicate your position with each item by placing the appropriate abbreviation on the line preceding that item.

SA = Strongly agree  D = Disagree
MA = Moderately agree  MD = Moderately disagree
A = Agree  SD = Strongly disagree

1. I don’t find much satisfaction in private prayer.

2. I don’t know who I am, where I came from, or where I’m going.

3. I believe that God loves me and cares about me.

4. I feel that lying is a positive experience.

5. I believe that God is impersonal and not interested in my daily situations.

6. I feel unsettled about my future.

7. I have a personally meaningful relationship with God.

8. I feel very fulfilled and satisfied with life.

9. I don’t get much personal strength and support from my God.

10. I feel a sense of well-being about the direction my life is headed in.

11. I believe that God is concerned about my problems.

12. I don’t enjoy much about life.

13. I don’t have a personally satisfying relationship with God.


15. My relationship with God helps me not to feel lonely.

16. I feel that life is full of conflict and unhappiness.

17. I feel most fulfilled with I’m in close communion with God.
Appendix C (continued)

Spiritual Well-Being Scale (SWB Scale)

_____ 18. Life doesn’t have much meaning.

_____ 19. My relation with God contributes to my sense of well-being.

_____ 20. I believe there is some real purpose for my life.
Appendix D

The Beck Depression Inventory - II (BDI - II)

Directions: This questionnaire consists of 21 groups of statements. Please read each group of statements carefully, and then pick out the one statement in each group that best describes the way you have been feeling during the past two weeks, including today. Circle the number beside the statement you have picked. If several statements in the group seem to apply equally well, circle the highest number for that group. Be sure that you do not choose more than one statement from any group, including Item 16 (Changes in Sleeping Pattern) or Item 18 (Changes in Appetite).

1. Sadness
   0  I do not feel sad.
   1  I feel sad much of the time.
   2  I am sad all the time.
   3  I am so sad or unhappy that I can’t stand it.

2. Pessimism
   0  I am not discouraged about my future.
   1  I feel more discouraged about my future than I used to be.
   2  I do not expect things to work out for me.
   3  I feel my future is hopeless and will only get worse.

3. Past Failure
   0  I do not feel like a failure.
   1  I have failed more than I should have.
   2  As I look back, I see a lot of failures.
   3  I feel I am not a total failure as a person.

4. Loss of Pleasure
   0  I get as much pleasure as I ever did from the things I enjoy.
   1  I don’t enjoy things as much as I used to.
   2  I get very little pleasure from the things I used to enjoy.
   3  I can’t get any pleasure from the things I used to enjoy.

5. Guilty Feelings
   0  I don’t feel particularly guilty.
   1  I feel guilty over many things I have done or should have done.
   2  I feel quite guilty most of the time.
   3  I feel guilty all of the time.
Appendix D (continued)

The Beck Depression Inventory - II (BDI - II)

6. Punishment Feelings
   0   I don’t feel I am being punished.
   1   I feel I may be punished.
   2   I expect to be punished.
   3   I feel I am being punished.

7. Self-Dislike
   0   I feel the same about myself as ever.
   1   I have lost confidence in myself.
   2   I am disappointed in myself.
   3   I dislike myself.

8. Self-Criticalness
   0   I don’t criticize or blame myself more than usual.
   1   I am more critical of myself than I used to be.
   2   I criticize myself for all my faults.
   3   I blame myself for everything bad that happens.

9. Suicidal Thoughts or Wishes
   0   I don’t have any thoughts of killing myself.
   1   I have thoughts of killing myself, but I would not carry them out.
   2   I would like to kill myself.
   3   I would kill myself if I had the chance.

10. Crying
    0   I don’t cry anymore than I used to.
    1   I cry more than I used to.
    2   I cry over every little thing.
    3   I feel like crying, but I can’t.

11. Agitation
    0   I am no more restless or wound up than usual.
    1   I feel more restless or wound up than usual.
    2   I am so restless or agitated that it’s hard to stay still.
    3   I am so restless or agitated that I have to keep moving or doing something.
Appendix D (continued)

The Beck Depression Inventory - II (BDI - II)

12. Loss of Interest
   0  I have not lost interest in other people or activates.
   1  I am less interested in other people or things than before.
   2  I have lost most of my interest in other people or things.
   3  It’s hard to get interested in anything.

13. Indecisiveness
   0  I make decisions about as well as ever.
   1  I find it more difficult to make decisions than usual.
   2  I have much greater difficulty in making decisions than I used to.
   3  I have trouble making any decisions.

14. Worthlessness
   0  I do not feel I am worthless.
   1  I don’t consider myself as worthwhile and useful as I used to.
   2  I feel more worthless as compared to other people.
   3  I feel utterly worthless.

15. Loss of Energy
   0  I have as much energy as ever.
   1  I have less energy than I used to have.
   2  I don’t have enough energy to do very much.
   3  I don’t have enough energy to do anything.

16. Changes in Sleeping Pattern
   0  I have not experienced any change in my sleeping pattern.
   1a I sleep somewhat more than usual.
   1b I sleep somewhat less than usual.
   2a I sleep a lot more than usual.
   2b I sleep a lot less than usual.
   3a I sleep most of the day.
   3b I wake up 1-2 hours early and can’t get back to sleep.

17. Irritability
   0  I am no more irritable than usual.
   1  I am more irritable than usual.
   2  I am much more irritable than usual.
   3  I am irritable all the time.
Appendix D (continued)

The Beck Depression Inventory - II (BDI - II)

18. Changes in Appetite
  0    I have not experienced any change in my appetite.
  1a   My appetite is somewhat less than usual.
  1b   My appetite is somewhat greater than usual.
  2a   My appetite is much less than before.
  2b   My appetite is much greater than usual.
  3a   I have no appetite at all.
  3b   I crave food all the time.

19. Concentration Difficulty
  0    I can concentrate as well as ever.
  1    I can’t concentrate as well as usual.
  2    It’s hard to keep my mind on anything for very long.
  3    I find I can’t concentrate on anything.

20. Tiredness or Fatigue
  0    I am no more tired or fatigued than usual.
  1    I get more tired or fatigued more easily than usual.
  2    I am too tired or fatigued to do a lot of the things I used to do.
  3    I am too tired or fatigued to do most of the things I used to do.

21. Loss of Interest in Sex
  0    I have not noticed any recent change in my interest in sex.
  1    I am less interested in sex than I used to be.
  2    I am much less interested in sex now.
  3    I have lost interest in sex completely.
Appendix E

Demographics

The following questions will be used in order to give the researcher demographic information about her participants. All are subject to be used in analysis. Please answer to the best of your ability.

1. Age: ____

2. Gender: Female ____  Male ____

3. College status: Freshman ____  Sophomore ____  Junior ____  Senior ____

4. Ethnic background: European American (White) ____  African American (Black) ____

   Hispanic American ____  Native American ____  Asian American ____

   International (please specify) ______________________________________

5. Major: _______________________

6. Cumulative GPA (4.0 scale): _______________________

7. Home residence (state): _______________________

8. Status of parental relationship:

   Married ____  Separated ____  Divorced ____

   One or both deceased (which parent?) ____  Other (please specify) ______________________

9. Number of years (if less than one full year, indicate the number of months, but be sure to write months next to your response) your parents have been:

   Married ____  Separated ____  Divorced ____

   Deceased ____  Other (please specify) ______________________

10. Father’s denomination: _______________________

11. Mother’s denomination: ______________________
Demographics

12. Your denomination: ______________________

13. What was your relationship to the first person who gave you a Bible? ____________

14. How old were you when you received your first Bible? _____

**For the remainder of the questions, please refer to the following scale:**

<table>
<thead>
<tr>
<th>1 = Everyday</th>
<th>4 = Ten or less times a year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 = Once or more a week</td>
<td>5 = Never</td>
</tr>
<tr>
<td>3 = Two to three times a month</td>
<td>6 = Other (please specify)</td>
</tr>
</tbody>
</table>

15. Frequency of Bible reading: ____

16. Frequency of church attendance: ____

17. Frequency of prayer: ____

18. While growing up, my parent(s) spoke positively to me about Jesus: ____

19. While growing up, my parent(s) spoke negatively to me about Jesus: ____

20. While growing up, my parent(s) took me to children’s church (i.e., Sunday School, Bible School): ____
Appendix F

Consent Form

The present research study is part of a major honors project under the direction of Dr. Lynda Cable, Dr. Winston Seegobin, and Dr. Philip Lawlis. The purpose is to investigate college student well-being. You will be asked to complete four surveys, as well as a demographic section. Projected time for completion of all materials should not exceed 25 minutes. No known risks or discomforts have been associated with this study. Your willingness to be a part of this study will help the researcher and others learn more about stressors and their affects on college students. The results of this study will be reported in a grouped format for the purpose of any presentations and/or publications. Individual responses will not be linked with any specific data, nor will they be released or published. In other words, all information will remain anonymous. To further control for anonymity, the researcher asks that you not record your name on any of the questionnaire sheets.

Please note that your participation is voluntary and is not required. You may leave without penalty anytime during this test should you choose not to complete it.

By signing this form, you are indicating that you understand all of the above information and agree to participate in this study.

________________________________________  _________________________
Signature                                                                 Date

________________________________________
Print name

**Should you have any questions regarding this experiment, you can contact the experimenter (Ashley R. Miller) at extension 5020 or e-mail me at am1235@messiah.edu**

Consent Form Approved By Messiah IRB for Use With Protocol # 20031106. Expiration Date: 11/10/04
Appendix G

Introduction

Hello, my name is Ashley Miller, and I am conducting this study for my psychology major honors project. The purpose of this study is to investigate college students' well-being. During the study, you will be asked to fill out four short surveys, in addition to a section on demographics. There should be a packet of surveys at each of your seats. It is important that you fully complete all surveys and answer all demographic questions. If the entire response packet is not complete, I will not be able to analyze the data. Further, I have put an informed consent agreement at each of your seats. Please read and sign it prior to the start of the investigation.

This study should take no longer than 20 minutes. If at any time you do not wish to complete the surveys, you may leave without penalty. Upon completion, please bring forward your completed response packet and signed informed consent agreement; place them in their designated boxes on this front table. Please understand that although I am gathering individual scores, your names and identifications will not be revealed. In other words, I will not know which specific person completed which specific response packet. All conclusive information will be reported in a group format.

Additionally, I will send each of you a debriefing notice within the next couple of weeks. It is for this reason that you must write your name, box number, and e-mail address on the sheet on this front table.

Are there any questions before we begin? The gathering of information will continue through J-term; for this reason, it is essential that you do not share the nature of this test with anyone, as their knowledge might bias the results. Thank you again for your willingness to participate. You are free to leave once you have completed all surveys and the demographic section. You may begin.
Appendix H

Debriefing Notice

This debriefing notice is going out to all students who participated in my study this past November and December.

You were involved in a test investigating the relationship between parental divorce, depression, and Christianity. It is hypothesized that those from divorced families will have higher depression levels than their non-divorced counterparts. It is further predicted that those with stronger (intrinsic) religious orientations from divorced families will have lower depression levels than their counterparts with extrinsic orientations. All findings will be reported at a psychology conference in May 2004. Should you want further information about this project or its results, feel free to contact me at ext. 5020 or Dr. Lynda Cable at ext. 7045.

Your participation was greatly appreciated!

Sincerely,

Ashley R. Miller
References


Divorce, Depression, & Christianity 46


