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## RELIGIOUS TRAUMA AND IDENTITY

by

KYLIE N. ANGIEL

A thesis submitted in partial fulfillment of the requirements for the Honors Undergraduate Thesis program in Psychology in the College of Sciences and in the Burnett Honors College at the University of Central Florida

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#### **ABSTRACT**

Religious trauma is most often the result of prolonged emotional and mental trauma, rather than a one-time occurring physical experience, which can thereby lead to complex posttraumatic stress disorder (C-PTSD). This prolonged form of trauma can have negative impacts on one's psychological well-being and possibly one's sense of identity. The purpose of this study was to gain a deeper understanding of how religious trauma may be related to identity development. College students (N = 223) completed an anonymous online survey battery for course credit. Scores on a measure of religious and spiritual struggles was positively correlated with identity distress and identity exploration, but not with identity commitment. Religious and spiritual struggles predicted C-PTSD scores, but also posttraumatic growth (PTG) scores. Deliberate rumination predicted PTG while intrusive rumination predicted C-PTSD. The complex role of rumination as a byproduct of identity exploration in the development of C-PTSD and PTG is further explored and discussed.

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#### INTRODUCTION

Previous research has explored the connection between identity and trauma and the impact they have on each other, suggesting the idea that peoples' identity can impact how they process trauma (Berman et al., 2020). It has also been understood that trauma can influence identity in both positive and negative ways (Berman et al., 2020; Raemen et al., 2021; Sandole & Auerbach, 2013). Trauma can be defined as an event or series of events that negatively affect physical, economic, spiritual, or psychological states, resulting in a heightened emotional response (Waterman, 2020). Identity refers to the roles, goals, values, and beliefs people hold in order to give their life a sense of direction, meaning, and purpose (Berman, 2004). While research exists concerning various types of trauma, there is a gap in research concerning religious trauma. Religious trauma can be defined as prevalent psychological damage that can manifest in cognitive, emotional, social, and physical ways, developing as a result of restrictive religious messages, beliefs, and experiences (Stone, 2013). Religious trauma is most often the result of prolonged, emotional, and mental trauma, rather than a one-time occurring physical experience. This prolonged form of trauma can have negative impacts on one's psychological well-being. The purpose of this thesis is to examine religious trauma to determine its effect on identity.

### **Religious Trauma**

Religion has been a topic of various studies, such as examining different facets of religion and how the presence or absence of religion may affect an individual in diverse ways, however, religious trauma is understudied within the current literature. It is important to explore the effects of religious trauma in order to aid people in finding and developing ways to cope with

their experiences. (Stone, 2013). Previous studies have found that religion and perceived spiritual support have potential benefits for those experiencing post-traumatic stress disorder and depression. Ai and colleagues (2022) found that it can lead to a decrease in post-traumatic stress disorder symptoms after traumatic exposure and an increase in levels of post-traumatic growth, while Captari and colleagues (2022) found that religion can be useful for coping with depression and maladjustments or stress, as well as providing overall peace and security to people who may be struggling. Stone (2013) acknowledges that while religion has the ability to be an effective tool in helping with the effects of trauma and has been shown to be a place of solace for many, that does not negate the ability of religion to be a harmful experience for some people. There is limited empirical work done concerning religious trauma. Furthermore, much of the current literature that examines religious trauma focuses on Christianity.

Purcell (2008) pointed out that people are often unaware of personal experiences of religious trauma until help is sought for a different problem and a history of religious struggles is uncovered. One of the ways religious abuse can occur is through ideologies taught within the religion, specifically, through legalism that accompanies religious ideologies. For instance, according to Hanko (1976), man is utterly depraved, meaning that humans are considered completely broken and sinful and the only way to heal and be free from the brokenness and sinfulness that is inherent to humanity is through Christ. This may result in members of the congregation feeling that people are unreliable, possibly leading to the belief that trust cannot be placed in themselves or others because humans are tainted by sin (Purcell, 2008; Winell, 1993). According to Winell (1993), this can be interpreted in such a way that only decisions made by God can be deemed morally just, making the Bible the one reliable source for guidance in every

situation, and to question the guidance received from the Bible, is to question God. This messaging can be used as a means of control over the congregation and may be used to ensure compliance within the church. The uniformity and necessary trust in the messages derived from the Bible have the potential to make it difficult to think freely and critically without the chance of being ostracized or exiled from the church. The idea that humans are untrustworthy and unreliable may also lead to self-hatred or issues with self-esteem (Wright, 2001).

The church may instill fear into the congregation by encouraging adherence to legalistic guidelines to guide the behaviors and thoughts of the constituents rather than allowing religion to be a solace for the congregation, as is stated in the Bible (Johnson & Vonderen, 1991). However, fear is not a guaranteed result of the teaching of the church, and many individuals may not experience the adverse emotions that others do when exposed to these teachings. A juxtaposition can be seen in the teaching of the belief that God is loving and merciful, while also teaching that there is the possibility of eternal punishment administered by the same God (Purcell, 2008). Winell (1993) acknowledges that some churches may utilize fear as a way to limit the external interactions which members of the congregation have with those who are outside of the church. Fear may be encouraged by teaching that those outside of the church are immoral and do not know the absolute truth that is taught within Christianity. The seeming acceptance of a sinful nature by those outside of the church is portrayed as harmful to the Christians who interact with the non-believers. The discouragement of relationships with those outside of the church may serve to limit the amount of exposure Christians have to ideas that are not in agreement with those of the church. Additionally, this instillation of fear can also result in the repression of aspects of the self out of the fear that those aspects may be condemned (Griffith, 2010). For

example, if a religion teaches that it is wrong to be LGBTQ+, then someone who is both a member or the religion and LGBTQ+ may suppress their identity as a queer person.

Winell (1993) also points out that within religion, there is a trend of fostering guilt and shame through the imperfection of humans. Many Christian churches emphasize the torture Jesus had to endure in order to save mankind from sin. Therefore, if people do not follow or work to honor God through behavior and beliefs, Jesus should not have had to endure such pain. This can result in feelings of guilt if beliefs are questioned or if people leave the church, due to the instillation of the thought that Jesus was tortured for mankind, and thus, the lack of acceptance of the resultant gift of salvation designates one as ungrateful. Another way some churches try to stop people from leaving is by reinforcing the legalistic ideas that humans have to live a certain way and follow certain rules to be worthy of heaven. Therefore, if people do leave the church, it is because of a failure to abide by these rules resulting in the inability to earn entrance into heaven. Additionally, guilt may accompany breaking the rules set in place, which can result in both feelings of shame and possible maltreatment by other church members (Wright, 2001). Furthermore, it is made clear by many churches that the members of the congregation have a responsibility to spread the gospel to those who do not know it, making people responsible for the eternal state of others, which can also foster guilt (Winell, 1993).

The beliefs enforced in the church may also interrupt and inhibit personal growth and development in favor of fostering religious identity (Winell 1993). Through the denial of individuality, churches may encourage the neglect of the individual self, whether intentionally or unintentionally, resulting in the development of an alternate self in some people (Griffith, 2010). This alternate self can be developed as a result of the black-and-white thinking present in some

religious institutions, categorizing feelings, actions, and beliefs as either good or bad, negating neutrality and the possibility of anything besides absolute thinking (Griffith, 2010). Furthermore, perfection may be an expectation of the church congregation, so any traits, beliefs, or actions seen as less than perfect can be covered by the alternate self (Griffith, 2010; Purcell, 2008).

The creation of an alternate self could lead to struggles with identity, as it may become unclear to the individual which aspects of themselves are genuine, and which aspects have been created in order to fit a mold. Furthermore, when the beliefs of a religion, or the beliefs of people within a religion contradict a piece of one's identity, their own connection to the religion may be impacted. Kumpasoğlu and colleagues (2022) interviewed a dozen Turkish LGBT and Muslim individuals to gain an understanding of how these participants could reconcile two parts of their identity that they viewed as conflicting. It was found that in order to reconcile two seemingly clashing pieces of identity, individuals would reject LGBT or Muslim identity, would try to integrate the two identities together by altering accepted religious beliefs, or by living with the internal conflict felt by the two identities. This also shows how the ideologies held by a certain religion may result in internal feelings and situations that may lead to experiences of religious trauma.

#### **Complex Post-Traumatic Stress Disorder and Religious Trauma**

Post-traumatic stress disorder (PTSD) has long been recognized as a possible pathological reaction to exposure to severe trauma. However, complex post-traumatic stress disorder (C-PTSD) is a relatively new disorder, being recognized by the World Health Organization in 2019 via the 11<sup>th</sup> edition of the International Classification of Diseases (World Health Organization, 2019). C-PTSD is more likely than post-traumatic stress disorder when the

trauma is a result of multiple forms of abuse, prolonged or repeated abuse, and the abuse is impossible or practically impossible to escape, like in instances of child abuse. Though these factors only enhance the risk of C-PTSD, they are not a requirement (Brewin, 2020; Franco, 2022). Religious trauma may fall into this category of prolonged and repeated abuse.

C-PTSD has six distinguishable symptom clusters, which are: re-experiencing traumatic events presently, deliberate avoidance of something that will serve as a reminder of the trauma, a current sense of threat including significant levels of impairment in function, affect dysregulation, negative self-concept, and disturbances in relationships (Brewin, 2020; Heim et al., 2022). The first three clusters are a part of the diagnostic criteria of both C-PTSD and PTSD (Brewin, 2020; Heim et al., 2022). Affect dysregulation, negative self-concept, and disturbances in relationships are symptom clusters unique to C-PTSD and are collectively termed disturbances in self-organization. With affect dysregulation, there may be a tendency for people to feel emotions intensely without the ability to moderate them, called hyperactivation, or the lack of "normal feeling states," called hypoactivation. With C-PTSD, both hypoactivation and hyperactivation can be present at the same time (Brewin, 2020, p. 148). A negative self-concept is marked by people feeling worthless or like they are a failure (Brewin, 2020). Lastly, disturbances in relationships may be marked by withdrawal from relationships or detachment from other people (Brewin 2020). At least one of two symptoms in each category must be present, along with impairment in areas of functioning (Brewin, 2020).

Due to the lasting nature of the abuse that tends to accompany C-PTSD, this trauma can result in overarching personality changes and struggles with identity and relatedness (Herman, 1995). There is existing literature that considers religion as a facet of identity but does not

consider the interconnectedness of the relationship between religion and identity, or factor in the possible impact of trauma from religion (MacLean & Riebschleger, 2021). MacLean and Riebschleger (2021) conducted a study concerning religious identity as a facet of identity development, which explored how people utilize religion when answering the questions "who am I?" and how religious identity fits into various existing identity theories. However, this does not take into consideration how religious trauma may impact identity development, separate from the personal affiliation of religion and religious identity.

## **Identity**

Identity is a term that refers to the personal roles, goals, values and beliefs about the world that people may subscribe to with the intent of finding purpose and direction in their lives (Berman, 2020). Religion is one aspect of identity that can also influence other areas (e.g., goals, values, beliefs). Erikson (1950) identified eight stages of development which include: trust versus basic mistrust, autonomy versus shame and doubt, initiative versus guilt, industry versus inferiority, identity versus role confusion, intimacy versus isolation, generativity versus stagnation, and ego integrity verse despair. Although Erikson considered the psychosocial crisis involved in the stage of identity formation to primarily be an adolescent (or young adult) issue, he acknowledged that identity development is actually a process that takes place throughout peoples' lives but may be disrupted or changed as a result of conflicts encountered throughout their lifetime (Erikson, 1950; Kroger & Marcia, 2011).

Based on the work of Erikson (1950), James Marcia (1966) postulated four statuses of identity development, defined by the degree to which a person has explored identity possibilities (e.g., what do I want to do with my life?) and the degree to which a person has firmly made their

linear, and most people will not go through them all, nor necessarily in a specific order. Identity diffusion is a status of low identity exploration and identity commitment, where people have not settled their identity and have not given it much thought. Identity moratorium tends to follow identity diffusion, and this is marked by a period of high exploration but low commitment when people are actively working towards determining their sense of identity. Through the exploration that occurs during identity moratorium, identity achievement can be reached, in which people have committed after a period of exploration and settled their identity. Identity foreclosure, however, occurs when people commit to various aspects of their identity, without exploring first, and their sense of identity usually stems from uncritically accepting expectations put forth by outside sources and authority figures, which is often the parents. It stands to reason that those who have experienced religious trauma are more likely to have had authoritarian parents who would have encouraged foreclosure (deep commitment without first exploring other possibilities) over achievement, especially in the domain of religion, but possibly in all domains of identity.

### **Trauma and Identity**

One's sense of identity is not static and can change for various reasons, including experiencing a traumatic event (Berman, 2016; Berman et al., 2020). The negative effects that result because of trauma may subsequently impact identity development, causing people to find new identity commitments, or enter a new phase of identity exploration (Berman, 2016). This could leave people in a period of identity distress, which includes extensive periods of anxiety, or abnormally high levels of concern related to areas of self-definition that impact normal identity development (Berman, 2020; Marin & Shkreli, 2019). Identity distress is not solely a

result of a trauma, as any person can experience distress when struggling with identity issues, but a traumatic event may result in distress due to the interruption that trauma can have on identity development (Marin & Shkreli, 2019).

The effects of trauma on identity can vary by the degree to which a traumatic situation is connected to the identity or sense of self of an individual, known as event centrality (Berman, 2016; Bernsten & Rubin, 2006). The centrality of an event can be impacted by various components, including what aspect of peoples' identity is targeted, or by their identity status. For example, if someone were to experience a hate crime, and if they view their minority status as a key aspect of their identity, there may be high levels of event centrality. When people experience a traumatic event, there are various ways in which the event can be processed, some leading to post-traumatic growth, others leading to post-traumatic stress. Post-traumatic growth is achieved when people experience trauma and find a new appreciation of life accompanied by personal growth and strengthened relationships that they view as a result of their attempts to cope with the trauma they experienced (Tedeschi & Calhoun, 1996).

When focusing on how the centrality of the traumatic event can impact people, it was found that higher rates of event centrality had a positive correlation with both psychological distress and psychological growth (Boals & Schuettler, 2011). High event centrality also often resulted in participants having an increased number of post-traumatic stress disorder symptoms (Berntsen & Rubin, 2007; Boals & Murrell, 2016). Additionally, when event centrality was high and was coupled with low psychological flexibility, this has been found to lead to higher levels of post-traumatic stress (Boykin et al., 2020). Conversely, higher rates of psychological flexibility have been seen to decrease the likelihood of post-traumatic stress disorder symptoms

(Boykin et al., 2020). Event centrality in the time following the traumatic event can impact the individual in the long term, affecting the post-traumatic growth or post-traumatic distress in the years after the event as well (Dabovich et al., 2019). Boals and Schuettler (2011) suggested that the reason behind high levels of event centrality being linked to higher rates of post-traumatic stress disorder symptoms may be due to the fact that the situation remains salient. This results in the memory being easily accessible, which extends the time in which the situation has an emotional impact (Boals & Schuettler, 2011). This could be because event centrality appears to be the distinguishing factor in whether people are processing trauma through deliberate rumination or intrusive rumination (Brooks et al., 2017). Intrusive rumination refers to the unintentional thoughts of the traumatic event, such as flashbacks and thoughts you cannot get out of your head, while deliberate rumination is the intentional processing of the traumatic event in order to find meaning and understanding of the event (Boykin et al., 2020; Brooks et al., 2017). According to Boykin and colleagues (2020), the type of rumination people experience in the aftermath of a traumatic event can dictate if people experience post-traumatic growth or posttraumatic stress. Deliberate rumination being more likely to result in growth may be due to the fact that deliberate rumination allows people to revisit trauma intentionally and in a way that feels like they are in control which may help to recontextualize the event. However, intrusive rumination does not offer control when the trauma is remembered, meaning people may be more likely to continue to feel the negative impact of the trauma without any way to reframe the event. If people are experiencing both post-traumatic growth and post-traumatic stress, this may be because people can experience both intrusive and deliberate rumination after experiencing

trauma, and the period that follows either deliberate or intrusive rumination could result in growth or stress (Boykin et al., 2020).

There are many ways identity can be influenced by a traumatic event. It has been found that certain forms of trauma, specifically that as a result of childhood maltreatment, can lead to an increase in identity diffusion (Penner et al., 2019). Additionally, a traumatic event may lead people to rethink their identity commitments and reenter a phase of identity diffusion or moratorium (Berman et al., 2020; Raemen et al., 2021; Sandole & Auerbach, 2013). Sandole and Auerbach (2013) found that when encountered with a situation that is unable to fit into the identity structures already put in place, reorganization or new identity commitments may be required in order to adapt to the aftermath of trauma. This is especially relevant when trauma is closely associated with identity. For example, when experiencing discrimination, an aspect of people's identity is central to the traumatic situation, which can result in the trauma having a larger impact on identity (Bombay et al., 2014). These ideas complement the findings that when people go through a traumatic event, the event, and the way in which the event is processed can have an effect on identity development and may lead to questioning of previous identity commitments (Berman et al., 2020; Boals & Schuettler, 2011). Conversely, it has also been suggested that sense of identity can have an impact on how a traumatic event is processed (Berman et al., 2020). For example, seeing oneself as a "survivor" might help one endure a traumatic situation.

While trauma may have an impact on identity commitments, such as values and beliefs about the world, identity can also have an impact on the ways in which people approach a traumatic situation (Berman, 2016). Marin and Shkreli (2019), found that the phase of identity

development and level of identity distress had an influence on the perspective people used to approach their trauma, finding that identity achievement or identity foreclosure coupled with low identity distress resulted in positive identity formation as a result of trauma. This was not the case in situations where identity moratorium and diffusion were paired with high identity distress, which left participants with a "fragmented sense of self." (Marin & Shkreli, 2019, p. 148). This may relate to the finding that the way people reflect on a traumatic event impacts the aftermath of the event, so in cases of rumination, especially ruminative identity exploration, people are unable to find meaning after the traumatic event (Luyckx et al, 2006; Marin & Shkreli, 2019). Another factor that contributed to the perspective held when approaching trauma and how that perspective impacted their post-traumatic growth or distress, was a connection to self. It was found that positive connections to self were associated with psychological growth and higher rates of identity exploration and commitment (Kira et al., 2019; Merrill et al., 2016). However, when people had a negative connection to their sense of self, it did not directly affect identity exploration or commitment, but it did lead to increased identity distress, which then led to increased rates of identity exploration and decreased rates of identity commitment (Merrill et al., 2016). The ability to allow a positive connection to the self, which could lead to psychological growth, may then be connected to peoples' relationship with themself prior to the traumatic event. Therefore, a negative connection to the event, psychological distress, and identity distress would be a result of a negative connection to the self (Merrill et al., 2016).

#### Rationale

The relationship between trauma and identity has been explored in the previous literature, and there has been exploration of religious identity development in recent literature (Berman, et al., 2020; MacLean and Riebschleger, 2021). However, research is lacking in the understanding of how complex trauma such as religious trauma can impact identity development and vice versa. Given the long-term nature of complex trauma, as well as the tendency of complex trauma to be more emotional and psychological in nature, there is a possibility that complex trauma is more interwoven with people's sense of identity. This could mean that trauma and sense of identity have more of an impact on each other in cases of complex trauma.

When one has experienced trauma or is experiencing trauma, research suggests that how one ruminates on their trauma can moderate the impact the trauma has on their lives. Therefore, how people ruminate on their traumatic experiences, whether deliberately or intrusively, can suggest how the trauma affects them and their sense of identity.

Furthermore, one's identity can be comprised of a number of different domains, such as long-term goals, career choice, friendships, sexual orientation, religion, values and beliefs, and group commitments (Berman et al., 2004). Religion is just one domain of a person's identity, however, it is important to investigate whether the impact of religious trauma would be limited to the religious domain of identity or would have broader effects across other domains of identity.

The purpose of this study then, is to gain a deeper understanding of how religious trauma may be related to identity development. It is hoped that a deeper understanding of the relationship between identity development and religious trauma might lead to treatment plans for

complex religious trauma being developed with a focus on identity development. Such plans might aim to encourage deliberate rumination in order to foster post-traumatic growth.

## **Hypotheses**

- 1. People who score higher on religious and spiritual struggles will have higher levels of religious identity distress and overall identity distress (averaged across domains).
- People who score higher on religious and spiritual struggles will have higher levels of identity exploration, including religious exploration, and lower levels of identity commitment, including religious commitment.
- 3. People who score higher on religious and spiritual struggles will be more likely to be in the identity status of diffusion or foreclosure and less likely to be in moratorium or achievement as compared to those who score lower on religious trauma. This will be true for both religious trauma and overall identity status.
- 4. Scores on religious and spiritual struggles will positively predict traumatic experience scores however, it will be moderated by rumination, such that deliberate rumination will negatively predict C-PTSD symptom scores while intrusive rumination will positively predict C-PTSD symptom scores.
- 5. Scores on religious and spiritual struggles will negatively predict posttraumatic growth (PTG) scores; however, it will be moderated by rumination, such that deliberate rumination will positively predict PTG scores, while intrusive rumination will negatively predict PTG scores.

6. Scores on religious and spiritual struggles will negatively predict religiosity; however, it will be moderated by rumination, such that deliberate rumination will positively predict religiosity scores, while intrusive rumination will negatively predict religiosity scores.

#### **METHODOLOGY**

## **Participants**

The participants (N = 223) of this study were college students who took an anonymous online survey for course credit. Gender breakdown consisted of 58.3% females, 35.9 % males, 5.4% nonbinary individuals, and .4% transgender individuals. In regard to religion, 69.5% were raised Christian, 4.9% Jewish, 4.0% Muslim, 3.1% Hindu, .9% Buddhist, .4% Animism, and 17.0% were not raised with a religion. Additionally, participants were asked to identify if they are currently affiliated with a religion, and 61.9% reported currently being affiliated with a religion, while 37.7% reported that they were not. Of the 37.7% who are not currently affiliated with a religion, 47.6% identified as agnostic, 27.4% reported belief in a higher power outside of an established religion, 23.8% identified as atheist, and 1.2% selected other.

#### Measures

Participants answered a *Demographic Questionnaire* where they were asked questions regarding age, gender, ethnicity, educational background, religious affiliation, and religious upbringing.

The *Duke Religious Index* (Koenig et al., 1997) is a 5-item measure that uses multiple choice questions to focus on organizational, non-organizational, and intrinsic religiosity. The first item on the scale addresses the organizational dimension of religion and has six possible responses (1 = never, 2 = once a year or less, 3 = a few times a year, 4 = a few times a month, 5 = once a week, 6 = more than once a week). The second item on the scale addresses the nonorganizational dimension of religion, acknowledging time spent in private, also measured on a 6-point scale, similar to the first question (1 = rarely or never, 2 = a few times a month, 3 = organization

once a week, 4 = two or more time/week, 5 = daily, 6 = more than once a day). The last three questions all utilize the same 5 response choices (1 = definitely not true, 2 = tends not to be true, 3 = unsure, 4 = tends to be true, 5 = definitely true of me) and address intrinsic religiosity. The last three items are taken from Hoge's 10-item intrinsic religiosity scale and these three items had a Cronbach's alpha of .75 (Koenig et al., 1997). In this study the Cronbach's alpha was .93.

The *Religious and Spiritual Struggles Scale* (Exline et al., 2014) was used to measure religious trauma. It is a 26-item scale that examines six different domains of religious and spiritual struggles using a 5-point scale (1 = Not at All/Does Not Apply, 2 = A Little Bit, 3 = Somewhat, 4 = Quite a Bit, 5 = A Great Deal). The six domains covered by this scale are: Divine, Demonic, Interpersonal, Moral, Ultimate Meaning, and Doubt. An example from the RSS would be "Felt guilty for not living up to my moral standards" (Exline et al., 2014). This scale was found to have an average Cronbach's alpha of .91 when averaging all 26 questions. Based on this study, the *Religious and Spiritual Struggles Scale* was found to have a Cronbach's alpha of .93.

The *Religious Traumatic Experiences Measure*. Designed for this study, participants were asked to clarify what traumatic experiences, if any, they have experienced in relation to religion. They will be asked to select which options best fit their experiences, including trauma relating to the religious messages they were taught, and the emotional impact of messages taught by their religion, like feelings of shame or guilt as a result of teachings. Additional options include a lack of trust in oneself, as a result of teachings that only a Higher Power can be a righteous source, experiences of isolation due to not being close with those outside of the religion, and submission to standards out of fear of punishment, regardless of personal belief in

the guidelines of the religion. If participants have not experienced any of these things, but still feel they have experienced religious trauma, they may choose the "Other" option, and if they have not experienced any trauma relating to religion, they may choose the "None" option. Unless participants chose "None," they were asked to state the experiences they have had in their own words.

The *Event-Related Rumination Inventory* (Cann et al., 2011) is a 20-item self-report scale that measures deliberate, and intrusive rumination based on frequency of rumination using a 4-point scale ranging from 0 to 4 (0 = Not at All, 4 = Often). Ten items focus on deliberate rumination, assessing how often people are intentional about their thoughts concerning an event, while the other ten focus on intrusive rumination, and how often they think about the event unintentionally (Cann et al., 2011). An example of an item concerning intrusive rumination would be "I thought about the event when I did not mean to," and an example from the deliberate rumination subscale would be "I thought about whether I could find meaning from my experience" (Cann et al., 2011). For this measure, Cronbach's alpha was found to be .94 for intrusive rumination and .88 for deliberate rumination (Cann et al., 2011). In the instructions for this measure, participants were instructed to report their responses to this measure with focus on traumatic experiences that relate to religious or spiritual experiences. In this study the Cronbach's alpha was found to be .96 for intrusive rumination, and .91 for deliberate rumination.

The *International Trauma Questionnaire* (*ITQ*; Cloitre et al., 2018) is a measure developed using the criteria of PTSD and C-PTSD found in the ICD-11 to measure the presence of either PTSD or C-PTSD. This measure utilizes a 5-point scale (0 = Not at all, 1 = A little bit, 2 = Moderately, 3 = Quite a bit, 4 = Extremely) to gauge the possibility that people have PTSD or

C-PTSD based on their self-report results. The *ITQ* measures based the criteria of PTSD and the criteria for disturbances of self-organization (DSO), which is the term that designates the symptom clusters that are unique to C-PTSD. Based on the self-report results, a distinction between PTSD and C-PTSD can be made due to the differentiation between PTSD symptom clusters and C-PTSD symptom clusters (Cloitre et al., 2018). This measure had a Cronbach's alpha of .87 for the PTSD scale, and a Cronbach's alpha of .90 for the DSO scale (Camden et al., 2023). In order to gauge the items on this measure in regard to religious traumatic experiences, participants were instructed to apply these items to situations that concern issues with religion or spirituality. In this study the Cronbach's alpha was found to be .92 for the PTSD symptom clusters, and the Cronbach's alpha for C-PTSD was found to be .87.

The *Ego Identity Process Questionnaire* (Balistreri et al., 1995) is a 32-item measure that addresses matters of ego identity through eight domains (occupation, politics, religion, values, friendships, family, sex roles, dating). This measure utilizes a 6-point scale (1 = strongly disagree, 2 = disagree, 3 = slightly disagree, 4 = slightly agree, 5 = agree, 6 = strongly agree). The responses to the 32 items are calculated and used to measure identity commitment and identity exploration in the eight domains. This measure had a reported Cronbach's alpha of .80 for the identity commitment scale, and a Cronbach's alpha of .86 for the identity exploration scale (Balistreri et al., 1995). In this study the identity commitment scale was found to have a Cronbach's alpha of .72, and the identity explorations scale to have a Cronbach's alpha of .77.

The *Posttraumatic Growth Inventory* (*PTGI*; Tedeschi & Calhoun; 1996) is a 21-item measure that addresses five factors, which include: new possibilities, relating to others, personal strength, spiritual change, and appreciation of life. The PTGI uses a 6-point scale ranging from

0-6 (0 = I did not experience this change as a result of my crisis, 1 = A very small degree, 2 = A small degree, 3 = A moderate degree, 4 = A great degree, 5 = I experienced this change to a very great degree as a result of my crisis). The 21-item measure collectively had a Cronbach's alpha of .90 (Tedeschi & Calhoun, 2008). In this study, the Cronbach's alpha for posttraumatic growth was .95.

The *Identity Distress Survey* (Berman et al., 2004) is a self-report survey that consists of seven items, all using a five-point Likert scale (1 = Not at all, 2 = Mildly, 3 = Moderately, 4 = Severely, 5 = Very Severely). The participants use this scale to rate their current distress levels, focusing on seven domains of identity, which include: long-term goals, career choice, friendships, sexual orientation, religion, values and beliefs, and group commitments. It has been reported to have a Cronbach's alpha of .84, and test-retest reliability of .82, as well as showing convergent validity with various measures of identity development (Berman et al. 2004). This study found a Cronbach's alpha of .85 for the Identity Distress Survey.

#### Procedure

After approval by the University of Central Florida's Institutional Review Board, students in large enrollment Psychology courses completed the survey for course credit through SONA, a participant recruitment software. Students have the freedom to choose in which study they would like to participate. Before completion of this survey, participants read an Explanation of Research. If the students chose to participate in this study after reading the explanation, they were directed to the online survey, and those who did not wish to complete the survey were redirected to the end of the survey, resulting in no credit granted to them, and no data collected for the survey. The surveys were administered to students through Qualtrics and their responses

to the survey were anonymous. Students who did not wish to participate in research but still wanted the credit were offered an assignment as a replacement that took a similar amount of time and effort to complete.

#### **RESULTS**

## **Preliminary and Descriptive Analyses**

When asked about religious traumatic experiences, 61.9% reported that they had not experienced a religious traumatic experience, while 38.1% reported that they had experienced one or more religious traumatic experiences. Of the 38.1% that had gone through a religious traumatic experience, 23.3% reported trauma surrounding "right" and "wrong" teachings from the religion, 26.9% reported trauma due to the emotional impact of messages within the religion, 13.9% reported trauma as a result of fear of punishment from a higher power if expectations set in the religion were not met ,7.2% reported trauma due to lack of trust of self in favor of trusting a higher power, 7.6% reported trauma due to isolation from people outside of the religion, and 5.8% reported trauma due to other reasons, such as feeling like they could not be themselves and fear of judgment from authority figures or other members within the church.

The possible range, actual range, means, and standard deviations of all study variables are reported in Table 1. All study variables were tested with Pearson correlational analyses to determine any associations with age, which are reported in Table 2. A oneway analysis of variance (ANOVA) was used to calculate any ethnic/racial differences. The only significant difference were found for identity exploration ( $F_{(4,217)} = 2.83$ , p = .025) and posttraumatic growth ( $F_{(4,79)} = 2.72$ , p = .036). A least square difference (LSD) post hoc analysis indicated that those of mixed or other ethnicity scored significantly higher in identity exploration than Whites and Hispanics, and Blacks scored significantly higher than Hispanics and Asians. As for posttraumatic growth, Asians scored significantly higher than Whites and Hispanics, and Blacks scored significantly higher than Whites and Hispanics, and Blacks

which was also significant ( $F_{(4, 217)} = 3.40$ , p = .010) with LSD post hoc test indicating that seniors and juniors scored significantly higher in identity exploration than freshman and sophomores.

### **Main Analyses**

## Hypothesis 1

Hypothesis 1 (People who score higher on religious and spiritual struggles will have higher levels of religious identity distress and overall identity distress) was tested with Pearson correlational analyses. The correlation between religious and spiritual struggles and overall identity distress was .55 (p < .001) and .56 (p < .001) with religious identity distress, suggesting both to be significant. Thus, this hypothesis was supported.

## Hypothesis 2

Hypothesis 2 (People who score higher on religious and spiritual struggles will have higher levels of identity exploration, including religious exploration, and lower levels of identity commitment, including religious commitment) was also tested with Pearson correlational analyses. The correlation between religious and spiritual struggles and religious exploration as well as overall exploration were found to be significant at .28 (p < .001) and .37 (p < .001), while religious commitment and overall commitment were not found to be significant. Thus, this hypothesis was only partially supported.

### Hypothesis 3

Hypothesis 3 (People who score higher on religious and spiritual struggles will be more likely to be in the identity status of diffusion or foreclosure and less likely to be in moratorium or achievement as compared to those who score lower on religious trauma) was tested using a chi-

square analysis. Scores on the Religious & Spiritual Struggles Scale were divided into thirds (High, Middle, and Low), and then a frequency distribution was constructed comparing the high and low-scoring groups on the four identity statuses. The frequency distribution was significant ( $\chi^2_{(6)} = 15.52$ , p = .017). Based on a tertiary split, the cutoffs for the Religious & Spiritual Struggles scale were 0 to 1.46 for the Low category, 1.46 to 2.19 for the Middle category, and 2.19 to 5 for the High category. As can be seen in Table 3, when compared to people who scored in the medium or low range on Religious and Spiritual Struggles, people who scored in the high range were more likely to be in the identity status of Moratorium or Achieved, which is contrary to the hypothesis prediction. Thus, this hypothesis was not supported.

## Hypothesis 4

Hypothesis 4 (Scores on religious and spiritual struggles will positively predict traumatic experience scores however, it will be moderated by rumination, such that deliberate rumination will negatively predict C-PTSD symptom scores while intrusive rumination will positively predict C-PTSD symptom scores) was tested with stepwise linear regression. Age and gender were entered on step one, scores on the Religious and Spiritual Struggles Scale were entered on step two, deliberate rumination and intrusive rumination were entered on step three, and the moderator scores (Struggles Scale centered times rumination scores centered) were entered on step four, with C-PTSD symptom scores as the dependent measure. This equation was significant  $(R^2 = .61, \text{Adjusted } R^2 = .57, F_{(71)} = 14.42, p < .001)$ . C-PTSD scores were significantly predicted by religious and spiritual struggles ( $\beta = .19, t = 2.01, p = .049$ ), intrusive rumination ( $\beta = .61, t = 3.77, p = .041$ ), and the interaction of religious and spiritual struggles with deliberate rumination. However, the interaction of religious and spiritual struggles with intrusive

rumination was not a significant predictor ( $\beta$  = -.03, t = -.22, p = .827). Scores of religious and spiritual struggles and the positive prediction of traumatic experience scores were only moderated by one type of rumination, thus this hypothesis was partially supported. *Hypothesis* 5

Hypothesis 5 (Scores on religious and spiritual struggles will negatively predict posttraumatic growth (PTG) scores; however, it will be moderated by rumination, such that deliberate rumination will positively predict PTG scores, while intrusive rumination will negatively predict PTG scores) was tested using another stepwise linear regression. Again, age and gender were entered on step one, scores on the Religious and Spiritual Struggles Scale were entered on step two, deliberate rumination and intrusive rumination were entered on step three, and the moderator scores (Struggles Scale centered times rumination scores centered) were entered on step four, with PTG scores as the dependent measure. The regression equation was significant ( $R^2 = .46$ , Adjusted  $R^2 = .40$ ,  $F_{(70)} = 7.77$ , p < .001). There was some support for this hypothesis such that in step 2, religious and spiritual struggles was a significant predictor of PTG ( $\beta = .43$ , t = 3.92, p = < .001), but lost significance in step 3 and 4. Deliberate rumination was also a significant predictor of PTG in step 3 and step 4 ( $\beta = .54$ , t = 3.01, p = .004). However, neither interaction term was significant in relation to PTG prediction, nor was intrusive rumination.

## Hypothesis 6

Hypothesis 6 (Scores on religious and spiritual struggles will negatively predict religiosity; however, it will be moderated by rumination, such that deliberate rumination will positively predict religiosity scores, while intrusive rumination will negatively predict religiosity

scores) was tested with another stepwise linear regression. As before, age and gender were entered on step one, scores on the Religious and Spiritual Struggles Scale were entered on step two, deliberate rumination and intrusive rumination were entered on step three, and the moderator scores (Struggles Scale centered times rumination scores centered) were entered on step four, with religiosity scores as the dependent measure. The regression was not significant  $(R^2 = .04, \text{Adjusted } R^2 = -.07, F_{(71)} = .38, p = .913)$ . Thus, the hypothesis was not supported.

#### DISCUSSION

The purpose of this study was to examine the relationship between religious trauma and identity to gain an understanding of how the presence of religious trauma can impact identity and vice versa. While religious trauma is a topic that is not widely researched in general, its relation to identity has not been investigated in previous research.

It was found that there was a strong positive correlation between religious spiritual struggles and overall identity distress as well as religious identity distress. This was not surprising considering Marin & Shkreli (2019) have discussed previously that the interruption of identity development due to trauma can result in identity distress, therefore, distress concerning religious identity resulting from religious and spiritual struggles was to be expected. When looking into event centrality and how trauma centered around religion can impact the religious identity and overall identity of an individual, it was determined that the presence of religious and spiritual struggles correlated with high levels of religious identity exploration and overall identity exploration. However, lower religious identity commitment and overall identity commitment were not found to have a strong correlation with religious and spiritual struggles.

Event centrality was also expected to be critical concerning rumination on trauma as it was hypothesized that the relationship between religious and spiritual struggles and post-traumatic growth would be moderated by rumination, with deliberate rumination increasing rates of post-traumatic growth and intrusive rumination decreasing rates of post-traumatic growth.

Neither moderator was found to have a significant impact on post-traumatic growth, but religious and spiritual struggles and deliberate rumination were both found to be predictors of post-traumatic growth. Religious and Spiritual Struggles were found to be a positive predictor of

posttraumatic stress disorder scores, with the entry of indeliberate rumination resulting in greater significance. Deliberate rumination was not seen to lead to C-PTSD symptoms unless coupled with religious and spiritual struggles.

The lack of significance in moderation of rumination was surprising, as Boykin and colleagues (2020) previously found a connection between rumination type and likelihood of post-traumatic growth, namely that deliberate rumination in cases where religious and spiritual struggles were present would result in less evidence of C-PTSD symptoms due to the connection between deliberate rumination and post-traumatic growth. This difference could be a result of the focus on religious trauma, specifically that religious trauma is a form of complex trauma rather than a singular traumatic event. Boykin and colleagues utilized a definition of trauma taken from the DSM-5 and did not focus on trauma from an event or complex trauma from a series of events. It was also found that the type of rumination did not have a significant impact on religiosity when religious and spiritual struggles had been experienced. Given that it was found that the presence of religious trauma did not negatively predict religious commitment as addressed with hypothesis 2, it makes sense that religious and spiritual struggles would not have a significant impact on religiosity, and therefore there would be no need for rumination to serve as a moderator.

Both the moratorium and achieved identity status are marked by high exploration whereas the statuses of foreclosure and diffusion are marked by low identity exploration. People who critically examine their religious and spiritual beliefs and attempt to resolve contradictions in order to find a belief system that works for them are engaged in identity exploration. People in the diffused identity status tend to avoid thinking about identity issues, and people in the

foreclosed identity status tend to uncritically adopt what an authority figure tells them to believe (typically the parents) and try to avoid engaging in contemplation of anything that might challenge those beliefs. Thus, although it was predicted that those high in religious and spiritual struggles would tend to be in the diffused or foreclosed status, it actually does make sense that we found them more likely to be in the moratorium and achieved status.

#### **Limitations and Future Research**

Limitations of this study should be noted. This study focused on those in college, with the participants being college students, as well as the participants being mostly female. Widening the scope of research to include a larger range of ages and a more equitable gender distribution among participants could impact the results of the study. Additionally, the majority of participants in this study indicated Christian affiliation. A broader scope of participants and the inclusion of other religions in larger numbers could impact the study as well.

The study also utilized a self-selecting sample and was named "Religion and Identity," so those who might be strongly biased in favor of or against a specific religion or the concept of religion in general. This study was conducted by use of self-report measures, which allows for bias in the responses of the participants in terms of how they perceive themselves and how they may wish to be perceived. Furthermore, this study looked into correlational relationships between religion and identity without looking into causation within the relationship.

Future research on the topic of religious trauma and identity would benefit from a wider range of participants in age, gender, and religious affiliation. Further research might also utilize a longitudinal approach in order to gain a better understanding of the relationship between identity and religion and how it may change throughout one's life based on their experiences. Finally

future studies might look into the ways in which intrusive and deliberate rumination may moderate religiosity, as the hypothesis that intrusive rumination will negatively predict religiosity scores and deliberate rumination will positively predict religiosity scores was not supported. This could include more focus on the event centrality of religious traumatic experiences for those participating in the study, as event centrality of a situation can be indicative of what type of rumination is used when processing a trauma. Therefore, further research could address the degree of event centrality in cases of religious trauma more closely, then make inferences on how rumination can impact how one processes religious trauma.

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#### APPENDIX A: DESCRIPTIVE STATISTICS TABLE

Table 1
Means, Standard Deviations, and Ranges of Study Variables

	Mean	SD	Actual Range	Possible Range
Religiosity	3.41	1.39	1.50 – 6.00	1.00 - 6.00
Intrusive Rumination	2.20	.97	1.00 – 4.90	1.00 - 6.00
Deliberate Rumination	2.76	.95	1.00 - 4.90	1.00 - 5.00
Religious & Spiritual Struggles	1.9	3.74	1.00 - 4.12	1.00 - 5.00
Religion Specific: Trauma	1.88	.78	1.00 - 4.00	1.00 - 5.00
General: Trauma	2.14	.96	1.00 - 5.00	1.00 - 5.00
Post-traumatic Growth	3.02	.1.23	1.00 - 5.65	1.00 - 6.00
Average Distress Rating	2.16	.83	1.00 - 4.57	1.00 - 5.00
Religious Distress Rating	1.66	1.01	1.00 - 5.00	1.00 - 5.00
Religious Commitment	6.59	1.88	2.00 - 12.00	2.00 - 12.00
Religious Exploration	7.34	2.27	2.00 - 12.00	2.00 - 12.00
Commitment	58.13	10.84	26.00 - 87.00	16.00 - 96.00
Exploration	57.56	10.10	31.00 - 88.00	16.00 - 96.00

#### APPENDIX B: CORRELATION TABLE

Table 2 Correlation Matrix for all Study Variables

	1	2	3	4	5	6	7	8	9	10	11	12	13
1. Age	-												
<ul><li>2. Intrusive</li><li>Rumination</li><li>3. Deliberate</li><li>Rumination</li></ul>	18 .11	- .64***	-										
4. Religiosity	.04	.06	.04	-									
5. Religious & Spiritual Struggles	183**	.48***	.45***	01	-								
6. Trauma: Religion Specific	.08	.69***	.55***	03	.42***	-							
7. Trauma: General	12	.45***	.29**	13	.61***	.52***	-						
8. Post-Traumatic Growth	02	.41***	.64***	.08	.34**	.33**	.15	-					
9. Identity Distress	20**	.31**	.33**	10	.56***	.19	.64***	.23*	-				
10. Religious Identity Distress	15**	.37***	.42***	09	.55***	.25*	.38***	.26*	.64***	-			
11. Religious Commitment	01	06	15	.38***	09	00	14*	09	18**	.13*	-		
12. Religious Exploration	10	.16	.27*	.02	.37***	.12	.27***	.12	.24***	.28***	.04	-	
13. Identity Commitment	.14*	.00	08	.38***	11	.03	22***	07	37***	17*	.54***	.07	-
14. Identity Exploration	.04	.20	.40***	.06	.28***	.10	.22***	.28**	.20**	.11	.05	.54***	.12

Note: \*p < .05; \*\*p < .01, \*\*\* p < .001

## APPENDIX C: CHI-SQUARE TABLE

Table 3

Religious/Spiritual Struggles Score (High, Medium, Low) by Identity Status Frequency Table

Religious/Spiritual	Diffused	Foreclosed	Moratorium	Achieved	Total
Struggles					
Low	19.2%	28.8%	13.7%	38.4%	100%
Medium	9.2%	26.3%	21.1%	43.4%	100%
High	10.8%	9.5%	24.3%	55.4%	100%
Total	13.0%	21.5%	19.7%	45.7%	100%

#### APPENDIX D: IRB APPROVAL LETTER



UNIVERSITY OF CENTRAL FLORIDA

**Institutional Review Board** 

FWA00000351 IRB00001138, IRB00012110 Office of Research 12201 Research Parkway Orlando, FL 32826-3246

#### **APPROVAL**

November 27, 2023

Dear Steven Berman:

On 11/21/2023, the IRB reviewed the following submission:

Type of Review:	Initial Study
Title:	Religion and Identity
Investigator:	Steven Berman
IRB ID:	STUDY00005979
Funding:	None
IND, IDE, or HDE:	None
Documents	IRB Berman 5979 HRP-502 - consent form
Reviewed:	
	IRB Berman 5979 HRP-503 - CA - Protocol
	11.20.23revised.docx, Category: IRB Protocol;
	<ul> <li>Survey Religion_and_Identity (17).docx, Category:</li> </ul>
	Survey / Questionnaire;

The IRB approved the protocol on 11/21/2023.

In conducting this protocol, you are required to follow the requirements listed in the Investigator Manual (HRP-103), which can be found by navigating to the IRB Library within the IRB system. Guidance on submitting Modifications and a Continuing Review or Administrative Check-in is detailed in the manual. If continuing review is required and approval is not granted before the expiration date, approval of this protocol expires on that date.

If this protocol includes a consent process, use of the time-stamped version of the consent form is required. You can find the time-stamped version of the consent form in the "**Documents**" tab under the "**Final**" column.

To document consent, use the consent documents that were approved and stamped by the IRB. Go to the Documents tab to download them.

When you have completed your research, please submit a Study Closure request so that IRB records will be accurate.

Page 1 of 2

If you have any questions, please contact the UCF IRB at 407-823-2901 or <a href="mailto:irb@ucf.edu">irb@ucf.edu</a>. Please include your project title and IRB number in all correspondence with this office.

Sincerely,

Kamille Birkbeck Designated Reviewer

Kanille C. Berkbeck

# APPENDIX E: DEMOGRAPHIC QUESTIONAIRE

# **Demographic Survey**

AGE: Please type your age
SEX: Please indicate your gender      Female     Male     Non-Binary     Transgender     Other
Please tell us how you identify your gender:
EDUCATION: Please indicate year in school      Freshman     Sophomore     Junior     Senior     Non-degree Seeking     Graduate Student     Other  Please explain your education level:  ETHNICITY: Please select the ethnic/racial identifier that best describes you     White, non-Hispanic     Black, non-Hispanic
<ul> <li>Hispanic or Latino/a</li> <li>Asian or Pacific Islander</li> <li>Native American or Alaskan Native</li> <li>Mixed ethnicity or Other</li> </ul>
Please explain your ethnic/racial identification:
RELIGION: Please select what best describes the religion you were raised in  O Buddhism  O Christianity  O Hinduism  O Islam
<ul> <li>Judaism</li> <li>None</li> <li>Other:</li> <li>Please tell us which religion you were raised in:</li> </ul>

Do yo	u currently affiliate with a religion?
0	Yes
0	No
If "no"	' - Would you classify yourself as
0	Agnostic (Unsure of whether a Higher Power exists)
0	Atheist (Does not believe in a Higher Power)
0	Unaffiliated (Believe in a Higher Power, but is not committed to a specific religion)
0	Other (Please explain)
Please	briefly explain to us your beliefs about a higher power:
If "yes	s" – With which religion do you currently affiliate?
0	Buddhism
0	Christianity
0	Hinduism
0	Judaism
0	Islam
0	Other Religion (Specify)
Please	tell us with which religion you currently affiliate:

#### APPENDIX F: DUKE RELIGIOUS INDEX

1.	Но	ow often do you attend church or other religious meetings?
	0	More than once a week
	0	Once a week
	0	A few times a month
	0	A few times a year

- Once a year or less
- o Never
- 2. How often do you spend time in private religious activities, such as prayer, meditation, or Bible study?
  - o More than once a day
  - o Daily
  - o Two or more times/week
  - Once a week
  - o A few times a month
  - o Rarely or never
- 3. In my life, I experience the presence of the Divine (i.e., God).
  - o Definitely true of me
  - Tends to be true
  - o Unsure
  - o Tends not to be true
  - o Definitely not true
- 4. My religious beliefs are what really lies behind my whole approach to life.
  - o Definitely true of me
  - Tends to be true
  - o Unsure
  - o Tends not to be true
  - o Definitely not true
- 5. I try hard to carry my religion over into all other dealing in life.
  - o Definitely true of me
  - o Tends to be true
  - o Unsure
  - o Tends not to be true
  - o Definitely not true

## APPENDIX G: RELIGIOUS AND SPIRITUAL STRUGGLES SCALE

RSS- At times in life, many people experience struggles, concerns or doubts regarding spiritual or religious issues. Over the last month, to what extent have you had each of the experiences listed below? There are no right or wrong answers; the best answer is the one that most accurately reflects your experience. If you feel the term "Higher Power" would more accurately represent the being or figure that fits your beliefs, please use that term in place of "God" in these questions.

1	2	3	4	5
Not at all/	A Little	Some-	Quite	A Great
<b>Does Not Apply</b>	Bit	what	a Bit	Deal

- 1. Felt as though God had let me down
- 2. Felt angry at God
- 3. Felt as though God had abandoned me
- 4. Felt as though God was punishing me
- 5. Questioned God's love for me
- 6. Felt tormented by the devil or by evil spirits
- 7. Worried that the problems I was facing were the work of the devil or evil spirits
- 8. Felt attacked by the devil or evil spirits
- 9. Felt as though the devil (or an evil spirit) was trying to turn me away from what was good
- 10. Felt hurt, mistreated, or offended by religious/spiritual people
- 11. Felt rejected or misunderstood by religious/spiritual people
- 12. Felt as though others were looking down on me because of my religious/spiritual beliefs
- 13. Had conflicts with other people about religious/spiritual matters
- 14. Felt angry at organized religion
- 15. Wrestled with attempts to follow my moral principles
- 16. Worried that my actions were morally or spiritually wrong
- 17. Felt torn between what I wanted and what I knew was morally right
- 18. Felt guilty for not living up to my moral standards
- 19. Questioned whether life really matters
- 20. Felt as though my life had no deeper meaning
- 21. Questioned whether my life will really make any difference in the world
- 22. Had concerns about whether there is any ultimate purpose to life or existence
- 23. Struggled to figure out what I believe about religion/spirituality
- 24. Felt confused about my religious/spiritual beliefs
- 25. Felt troubled by doubts or questions about religion or spirituality
- 26. Worried about whether my beliefs about religion/spirituality were correct

## APPENDIX H: RELIGIOUS TRAUMATIC EXPERIENCES

- 1. This survey will focus on traumatic religious experiences. If you have encountered one (or more) of the following experiences, please which experiences you have gone through. If you have not gone through any traumatic religion experiences, please select "None."
- O Traumatic religious experiences as a result of the messages taught within the religion on what is deemed "right" or "wrong" within that religion (ex. It is "wrong" to be LGBTQ+, and "right" to be straight).
- o Traumatic religious experiences from the emotional impact of certain messages given by churches (ex. feelings of shame and guilt for sinning).
- Feeling like you are untrustworthy because only God/ a Higher Power can be a righteous source
- o Experiencing isolation as a result of not getting close with people outside of the religion
- Submission to expectations within a religion as a result of the fear of being punished by God/a Higher Power, even if you do not want to abide by the set guidelines for other reasons.
- Other
- o None

2.	Please tell us in your words how your experience with religion has been traumatic for
	you.

## APPENDIX I: EVENT-RELATED RUMINATION INVENTORY

**ERRI-** After traumatic religious experiences, people sometimes, but not always, find themselves having thoughts about their experiences even though they don't try to think about it. Indicate for the following items how often, if at all, you have the experiences described during the weeks immediately after the trauma.

1	2	3	4	5	6
Strongly	Disagree	Slightly	Slightly	Agree	Strongly
Disagree		Disagree	Agree		Agree

- 1. I think about the trauma when I do not mean to
- 2. Thoughts about the trauma come to mind and I cannot stop thinking about them
- 3. Thoughts about the trauma distract me or keep me from being able to concentrate
- 4. I cannot keep images or thoughts about the trauma from entering my mind
- 5. Thoughts, memories, or images of the trauma come to mind even when I do not want them
- 6. Thoughts about the trauma cause me to relive my experience
- 7. Reminders of the trauma bring back thoughts about my experience
- 8. I find myself automatically thinking about what has happened
- 9. Other things keep leading me to think about my experience
- 10. I try not to think about the trauma, but cannot keep the thoughts from my mind

After a traumatic religious experience, people sometimes, but not always, deliberately and intentionally spend time thinking about their experience. Indicate for the following items how often, if at all, you deliberately spend time thinking about the issues indicated during the weeks immediately after the trauma.

1	2	3	4	5
Never	Rarely	Now and	Frequently	All the
		Then		Time

- 11. I think about whether I can find meaning from my experience
- 12. I think about whether changes in my life have come from dealing with my experience
- 13. I force myself to think about my feelings about my experience
- 14. I think about whether I can learn anything as a result of my experience
- 15. I think about whether the experience has changed my beliefs about the world
- 16. I think about what the experience might mean for my future
- 17. I think about whether my relationships with others have changed following my experience
- 18. I force myself to deal with my feelings
- 19. I deliberately think about how the trauma has affected me
- 20. I think about the trauma and try to understand what happened

# APPENDIX J: INTERNATIONAL TRAUMA QUESTIONNAIRE

ITQ – Below are a number of problems that people sometimes report in response to traumatic or stressful life events related to religious or spiritual experiences. Please read each item carefully, then select one of the numbers to indicate how much you have been bothered by that problem <u>in</u> the past month.

0 1 2 3 4
Not at A Little Moderately Quite Extremely
All Bit a Bit

- 1. Having upsetting dreams that replay part of the experience or are clearly related to the experience?
- 2. Having powerful images or memories that sometimes come into your mind in which you feel the experience is happening again in the here and now?
- 3. Avoiding internal reminders of the experience (for example, thoughts feelings, or physical sensations)?
- 4. Avoiding external reminders of the experience (for example, people, places, conversations, objects, activities, or situations)?
- 5. Being "super-alert", watchful, or on guard?
- 6. Feeling jumpy or easily startled?

#### In the past month have the above problems:

- 7. Affected your relationships or social life?
- 8. Affected your work or your ability to do work?
- 9. Affected any other important part of your life such as parenting, or school or college work, or other important activities?

Below are problems that people who have had stressful or traumatic events sometimes experience. The questions refer to ways you <u>typically</u> feel, ways you <u>typically</u> think about yourself, and ways you <u>typically</u> relate to others. Answer the following thinking about how true each statement is of you in regard to your experiences with religion or spirituality.

0 1 2 3 4
Not at A Little Moderately Quite Extremely
All Bit a Bit

- 1. When I am upset, it takes me a long time to calm down
- 2. I feel numb or emotionally shut down
- 3. I feel like a failure
- 4. I feel worthless
- 5. I feel distant or cut off from people
- 6. I find it hard to stay emotionally close to people

# In the past month, have the above problems in emotions, in beliefs about yourself, and in relationships:

- 7. Created concern or distress about your relationships or social life?
- 8. Affected your work or ability to do work?
- 9. Affected any other important parts of your life such as parenting, or school or college work, or other important activities?

# APPENDIX K: EGO IDENTITY PROCESS QUESTIONNAIRE

**EIPQ** - For the following 32 statements, please decide how much you agree or disagree with each, using the following scale.

1	2	3	4	5	6
Strongly	Disagree	Slightly	Slightly	Agree	Strongly
Disagree		Disagree	Agree		Agree

- 1. I have definitely decided on the occupation I want to pursue.
- 2. I don't expect to change my political principles and ideals.
- 3. I have considered adopting different kinds of religious beliefs.
- 4. There has never been a need to question my values.
- 5. I am very confident about which kinds of friends are best for me.
- 6. My ideas about men's and women's roles have never changed as I have become older.
- 7. I will always vote for the same political party.
- 8. I have firmly held views concerning my role in my family.
- 9. I have engaged in several discussions concerning behaviors involved in dating relationships.
- 10. I have considered different political views thoughtfully.
- 11. I have never questioned my views concerning what kind of friend is best for me
- 12. My values are likely to change in the future.
- 13. When I talk about religion, I make sure to voice my opinion.
- 14. I am not sure about what type of dating relationship is best for me.
- 15. I have not felt the need to reflect on the importance I place on my family.
- 16. Regarding religion, my views are likely to change in the near future.
- 17. I have definite views regarding the ways in which men and women should behave.
- 18. I have tried to learn about different occupational fields to find the one best for me.
- 19. I have undergone several experienced that made me change my views on men's and women's roles.
- 20. I have re-examined many different values in order to find the ones which are best for me.
- 21. I think that what I look for in a friend could change in the future.
- 22. I have guestioned what kind of date is right for me.
- 23. I am unlikely to alter my vocational goals.
- 24. I have evaluated many ways in which I fit into my family structure.
- 25. My ideas about men's and women's riles will never change.
- 26. I have never questioned my political beliefs.
- 27. I have had many experiences that led me to review my the qualities that I would like my friends to have.
- 28. I have discussed religious matters with a number of people who believe differently than I
- 29. I am not sure that the values I hold are right for me.
- 30. I have never questioned my occupational aspirations.
- 31. The extent to which I values my family is likely to change in the future.
- 32. My beliefs about dating are firmly held.

#### APPENDIX L: POSTTRAUMATIC GROWTH INVENTORY

- **PTGI-** Indicate for each of the statements below the degree to which this change occurred in your life as a result of the crisis/disaster, using the following scale
  - 0 = I did not experience this change as a result of a crisis
  - 1 = I experienced this change to a very small degree as a result of my crisis
  - 2 = I experienced this change to a small degree as a result of my crisis
  - 3 = I experienced this change to a moderate degree as a result of my crisis
  - 4 = I experienced this change to a great degree as a result of my crisis
  - 5 = I experienced this change to a very great degree as a result of my crisis
  - 1. My priorities about what is important in life
  - 2. An appreciation for the value of my own life
  - 3. I developed new interests
  - 4. A feeling of self-reliance
  - 5. A better understanding of spiritual matters
  - 6. Knowing that I can count on people in times of trouble
  - 7. I established a new path for my life
  - 8. A sense of closeness with others
  - 9. A willingness to express my emotions
  - 10. Knowing I can handle difficulties
  - 11. I'm able to do better things with my life
  - 12. Being able to accept the way things work out
  - 13. Appreciating each day
  - 14. New opportunities are available which wouldn't have been otherwise
  - 15. Having compassion for others
  - 16. Putting effort into my relationships
  - 17. I'm more likely to try to change things which need changing
  - 18. I have a stronger religious faith
  - 19. I discovered that I'm stronger than I thought I was
  - 20. I learned a great deal about how wonderful people are
  - 21. I accept needing others

#### APPENDIX M: IDENTITY DISTRESS SURVEY

**IDS-** The following questions address the degree to which you have felt distressed or upset about different areas in your life. Please read the following statements and rate your personal application to the statement according to the scale below.

1 2 3 4 5
Not at all Mildly Moderately Severely Very Severely

- 1. Long term goals? (e.g., finding a good job, being in a romantic relationship etc.)
- 2. Career choice? (e.g., deciding on a trade or profession etc.)
- 3. Friendships? (e.g., experiencing a loss of friends, change in friends, etc.)
- 4. Sexual orientation and behavior? (e.g., feeling confused about sexual preferences, intensity of sexual needs, etc.)
- 5. Religion? (e.g., stopped believing, changed your belief in God/religion, etc.)
- 6. Values or beliefs? (e.g., feeling confused about what is right or wrong, etc.)
- 7. Group loyalties? (e.g., belonging to a club, school group, gang, etc.)