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Happiness and Anxiety as a Function of Gender and Religiosity

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Abstract

The current research intended to extend upon previous research on the relationship between happiness and religiosity by looking at the role gender plays in this relationship. It was hypothesized that while there would be a positive correlation between religiosity and happiness in both genders, the correlation would be stronger for women. The study also aimed to test if different aspects of religion mediate this relationship for men and women. It was hypothesized that for women, the aspects of religion that would be most closely related to increased happiness and decreased anxiety would be aspects that allow for a sense of community, helping others, and a release from death anxiety, as these are factors that have been shown to increase happiness for women outside of religion. Participants were given a series of surveys to determine various aspects of religiousness, as well as levels of happiness and anxiety. The results indicated no correlation between religiousness and happiness for either gender, but for women, increased religiousness was actually associated with increased anxiety. The results also indicated that positive attitudes toward charitable giving were associated with increased anxiety in women. Implications and suggestions for future research are discussed.

Happiness and Anxiety as a Function of Religiosity and Gender

Religious belief and worship are some of the few behaviors that have existed in humans across culture and time, without any direct benefit to survival. The stability of religion has led psychologists to wonder what causes us to turn to religion and what benefits it offers the human race. Some of the research on the psychology of religion has focused on the relationship between religion and health. If religious belief and practice is associated with health benefits, this could explain its prevalence and indispensability in our society.

Research by Abdel-Khalek (2006) on Kuwaiti Muslim undergraduates tested the relationship between religiosity, mental health, physical health, and happiness. Four separate self-rating scales were given to participants to determine perceived level of religiosity, mental health, physical health, and happiness. The study compared the genders on each of these dimensions. The results showed that religiosity was very highly correlated with happiness, and also correlated but to a lesser degree with mental and physical health.

Similar research by Levin (2013) on Israeli Jews determined participants' frequency of synagogue attendance, frequency of prayer, mental and physical health, and overall well-being, which includes happiness and life satisfaction. The results indicated that religious attendance and private prayer were both highly correlated with happiness, life satisfaction, and well-being. The study tested private prayer specifically in order to eliminate the possibility that prayer was only associated with happiness and well-being because of its communal nature, and not because of the prayer itself. The results indicated that the act of praying even without the communal aspect was associated with improved happiness and well-being.

The correlation between religiousness and improved physical and mental health could mean that religion actually improves our health, or that people who are happier and healthier to begin with are more likely to turn to religion. Because most research on religion is correlational, it is difficult to draw conclusions about causality. A study by McGreger, Nash, and Prentice (2010), however, suggests that we do not turn to religion when we are already happy. Rather, it seems, we turn to religion in order to make us happier. Their study showed that when people with an anxious disposition are exposed to an anxiety-provoking situation, they demonstrated increased religious zeal. Participants in their study were undergraduate psychology students. They were given a test of anxious uncertainty aversion, which determined the extent to which they became anxious or upset, as well as how much they feared uncertain situations. They were then randomly assigned to an anxious uncertainty threat condition or a no threat condition. Those in the anxious uncertainty threat condition were asked to read a very difficult passage on statistics for comprehension, while those in the no threat condition were asked to read a simple passage on statistics for comprehension. After a delay, all participants then rated their degree of belief in religious and superstitious ideas. The questionnaire about religious beliefs pertained to the existence of an afterlife, a devil, god, and supernatural reward for good and evil. The questionnaire about superstition pertained to astrology, omens and luck. The results indicated that for everyone, but especially for people with an anxious uncertainty aversion, religious belief increased in the anxious uncertainty condition, while belief in superstition did not increase. The results suggest that for people with an anxious disposition, stressful situations may lead to increased religious belief. These results give us some insight into why people so often turn to religion.

Another question that must be addressed in order to understand the prevalence of religion is why certain demographic populations are more religious than others. Does religion offer greater benefits to certain groups of people than it does to others or are certain populations more in need of these health benefits? A study by Patel, Ramgoon, & Paruk (2009) investigated difference in religiosity between men and women. In their study, South African university students were given a spiritual well-being scale, a religious orientation scale, and a satisfaction with life scale. The study found that females reported significantly higher religiosity and religious well-being than males. One explanation for women's increased sense of religiosity compared with men is that they are more in need of its psychological benefit—that they benefit more than men from religious coping as a means of reducing anxiety and depression.

Studying mental health differences among the genders may help us understand why women tend to be more religious than men. If religion provides benefits to mental health and well-being, those who have poorer mental health to begin with may be driven to it as a coping strategy. In fact, a variety of research has found that women are more likely to demonstrate signs of depression and anxiety than men. Leach, Christensen, Mackinnon, Windsor, & Butterworth (2008) conducted research aimed to determine the role of psychosocial factors in these differences in anxiety and depression. In their study, surveys aimed to test health and well-being were given to residents of Canberra and Queanbeyan, Australia. Participants were split into three age groups: 20-24 year old, 40-44 year olds, and 60-64 year olds. The survey inquired about socio-demographic information, including gender, age, relationship status, health and lifestyle choices, personality, and social behavior. The results indicated that women across all three age groups reported greater anxiety and depression than men. This difference was greatest for the 20-24 year olds. For women in this age group, the greatest predictors of anxiety and depression were

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less stable relationships and higher frequency of negative interpersonal events. All age groups of women, in comparison to men, reported poorer physical health, less physical activity, less feeling of being in control, and higher levels of behavioral inhibition and neuroticism. Women were also found to reflect more on negative experiences and thought processes. These factors were all found to be correlated with depression in both genders, and help to explain why women report more anxiety and depression than men.

A study by Wu, Miao, and Zhu (2013), which investigated gender differences in military officers in intensive training programs, demonstrated differences in levels of anxiety between the genders, as well as differences in coping styles. Anxiety was measured using a Chinese version of the State-Trait Anxiety Inventory, which assesses state anxiety, meaning anxiety at the present time, and trait anxiety, or the general level of anxiety. Self-efficacy, or self-confidence for dealing with difficult or stressful situations was also measured, and so were coping styles and perceived social support. The results indicated that females had significantly higher levels of both trait and state anxiety, lower senses of sense-efficacy, and less perceived social support. Females were also more likely to have negative coping skills, such as self-reproach. Overall, women reported being more negatively affected by stressful situations.

Women's higher levels of anxiety may be responsible for their increased religiousness compared with men. It may also be that the specific types of anxiety that women experience can be resolved through religious belief, while men's anxiety is better resolved through other coping mechanisms. Research by Eshbaugh and Henniger (2013) aimed to test for gender differences in levels of death anxiety. Previous studies have shown that women are more likely to experience death anxiety than men. One explanation that has been proposed for this difference is that women are not actually more anxious about death, they are just more likely to openly report their

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feelings than men because it is more socially desirable for them to do so. Another explanation is that women are not more anxious about death in particular, they are just more likely to be depressed, and thus to focus on all negative thoughts. The last explanation that has been proposed for the difference in death anxiety is that women have less of a sense of mastery, or feeling of being in control. This study controlled for feelings of mastery, depressive symptoms, and social desirability, and still found that women had greater levels of death anxiety.

Almost all religions tell us that life does not end with death— that we either go on to an afterlife or are reincarnated. It may be that women turn to religion more than men because they are generally more anxious and unhappy. It may also be, however, that religion offers certain benefits that are specific to the psychological needs of women. A strong component of most religions is the belief in an afterlife. Because women have greater death anxiety than men, they may be more drawn to religion because of its ability to reduce their death-related anxieties. Religion may offer women certain psychological benefits that other coping strategies cannot offer them. It is possible that men's anxieties more often surround issues that are not addressed by religion, thus they are more likely to use non-religious ways of coping.

Release from death anxiety may be one reason that women turn to religion more often than men, but it is likely not the only reason. Other aspects of religion, such as social support, may be more important to women's happiness than to men's. Research by Eschenbeck, Kohlmann, and Lohaus (2007) on children and adolescents demonstrated how males and females cope differently with social and academic stressors. In their study, participants completed a coping survey, which determined the extent to which they cope with stressful social and academic situations by using five coping mechanisms: seeking social support, problem solving, avoidant coping (telling yourself it doesn't matter), palliative emotion regulation (trying to relax),

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and anger related emotion-regulation (showing aggression). The results indicated that females were more likely to cope by seeking social support and using problem solving, while boys were more likely to use avoidant coping. Boys and girls were equally likely to use palliative emotion regulation and anger-related emotion regulation. As women seek social support more, they may be more drawn to religion than men because of the social support it offers them.

Similarly, a study by Crossley and Landridge (2005) on what men and women perceived as contributing the most to their happiness, showed that women value close relationships and helping others, while men consider other factors more important. In the study, college age students were given a list of 32 factors that had been identified in previous research as reasons for happiness. They were asked to select the factors that they believed contributed to their happiness, and to rank them in order of importance. They were also asked to state any additional factors that contributed to their happiness that were not on the list. The results showed that men ranked a good social life, being able to play sports, being liked, and sexual activity higher than women, while women ranked being loved by family, helping others, and being loved by loved ones higher than men. The gender differences in perceptions of happiness could explain why women are more religious than men, as well as what specific aspects of religion they are drawn to. Women value having loving relationships with family and helping others, both of which religion promotes. Men's perceptions of happiness are more related to being active and having a good social life, factors that are not necessarily related to religion.

The main purpose of the current study was to determine if the relationship between religion and happiness would differ between men and women. It was hypothesized that there would be a greater difference in happiness between non-religious and religious women than between non-religious and religious men, because women depend on religion to cope with their

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greater feelings of anxiety and unhappiness, and because many aspects of religion pertain to women's perceptions of happiness. It was expected that there would be a main effect of religion on happiness in both sexes, but that there would be an interaction effect between gender and religion, so that religion would be more strongly correlated with happiness in women than in men.

Moreover, it was expected, based on men and women's different concepts of happiness, as well as their different ways of coping, that women's happiness would be more highly correlated with the aspects of religion that relate to social relationships and participating in charity work. It would also be expected, based on women's greater levels of death anxiety, that women's happiness would be more tied to belief in an afterlife and the idea that we can control our futures through prayer.

Methods

Participants

Forty-eight female and 19 male Union College students participated for either course credit towards an introduction to Psychology class or for monetary compensation. Participants ranged from freshmen to seniors.

Materials

The Oxford Happiness Questionnaire (Hills and Argyle 2002) contains 29 statements about happiness and it asks participants to rate how much they agree with each statement on a scale of 1-6. An example of a question is "I don't feel particularly pleased with the way I am."

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The Beck Anxiety Inventory (Furham, 1995), contains twenty-one common anxiety symptoms such as ‘sweating not due to heat’ and ‘fear of the worst happening.’ Participants are asked to identify how much they have been bothered by the given symptoms from ‘not at all’ to ‘severely.’ Tatz and Osarchuk’s Belief in Afterlife Scale (1973) contains twenty statements about the afterlife, such as “Earthly existence is the only existence we have.” Participants are asked on an 11-point scale to rate their level of agreement with the statements. The Attitudes Toward Charitable Giving Scale (Furham, 1995) contains twenty statements about charitable giving such as “Most people give to charity out of pure sympathy with the recipient.” Participants are asked to rate their level of agreement with the statements on a 1-5 scale. The religion questionnaire given to participants had various components. The first was a measure of intrinsic versus extrinsic religious orientation (Gorsuch, R. L., & McPherson, S. E., 1989). This scale contains twenty statements such as “I go to church because it helps me make friends” and asks participants to rate these questions on a scale of 1-5. The next component of the religion questionnaire is the Santa Clara strength of religious faith questionnaire (Plante, T. G., & Boccaccini, M. T., 1997), a 10-item measure that assesses how much participants agree on a scale of 1-6 with questions like “My religious faith is extremely important to me.” The following component of the religion questionnaire is the Duke University Religion Index (Koenig, S., Meador, K., & Parkerson, G. 1997), which contains five statements such as “In my life I experience the presence of the Divine.” Participants are asked to rate these statements on a scale of 1-6. The last component of the religion questionnaire, the Spiritual Well-Being Scale (Ellison, 1983), is a 10-item measure that includes statements like “I believe that God loves and cares about me.” Lastly, Snyder’s Self-Monitoring Scale includes twenty-five true or false items such as “I find it hard to imitate the behavior of other people.”

Procedure

Participants were given a packet of questionnaires to fill out. After filling out the informed consent, participants filled out The Oxford Happiness Questionnaire (Hills and Argyle 2002), which was used to assess participants' subjective well-being, or happiness. Participants then filled out The Beck Anxiety Inventory (Furham, 1995), used to assess their anxiety levels. Next, they completed Tatz and Osarchuk's Belief in Afterlife Scale (1973), which was used to assess the extent to which participants believe in an afterlife. The next page was the Attitudes Toward Charitable Giving Scale (Furham, 1995) which determined participants' feelings about charitable giving. Only the 'altruism' sub-scale was used as a measure of attitudes toward charitable giving. Participants then completed a religion questionnaire that assessed various components of participants' attitudes toward religion. It included a measure of intrinsic and extrinsic religious orientation (Gorsuch, R. L., & McPherson, S. E., 1989), which determined levels of intrinsic, social extrinsic, and personal extrinsic religiosity. It also included The Santa Clara Strength of Religious Faith Questionnaire (Plante, T. G., & Boccaccini, M. T., 1997), the Duke University Religion Index (Koenig, S., Meador, K., & Parkerson, G. 1997), and the Religious Well-Being Scale (Ellison, 1983). Lastly, Snyder's Self-Monitoring Scale (1974) was completed as a filler to distract from the true purpose of the study. At the end of the questionnaire, participants were asked to record demographic information, including age, grade, gender, and religious affiliation. Results were analyzed to determine any gender differences in the relationship between religiosity and happiness. Conclusions were also drawn about which aspects of religion were correlated with happiness in each sex.

Results

Happiness was not significantly correlated with any of the measures of religiosity. A Pearson's r conducted on the correlation between happiness and religious well-being revealed no significant difference, $r(65) = .161, p > .05$. There was no significant correlation between happiness and intrinsic religiosity, $r(65) = .01, p > .05$, happiness and social extrinsic religiosity, $r(65) = .03, p > .05$, or happiness and personal extrinsic religiosity, $r(65) = .03, p > .05$. There was also no significant correlation between happiness and the Santa Clara Strength of Religious Faith, $r(65) = .03, p > .05$, or between happiness and the Duke University Religion Index, $r(65) = .02, p > .05$.

A Pearson's r on anxiety and religious well-being determined no significant correlation, $r(65) = .03, p > .05$. Anxiety was not significantly correlated with intrinsic religiosity, $r(65) = .07, p > .05$, or social extrinsic religiosity, $r(65) = -.03, p > .05$. There was, however, a significant positive correlation between anxiety and personal extrinsic religiosity, $r(65) = .26, p < .05$. There was no significant correlation between anxiety and the Santa Clara strength of Religious Faith, $r(65) = .22, p > .05$, but there was a significant correlation between anxiety and the Duke University Religion Index, $r(65) = .26, p < .05$.

There was no significant correlation between happiness and any of the measures of religiousness in either of the genders. A Pearson's r on the relationship between happiness and religious well-being in males revealed no significant correlation, $r(17) = .22, p > .05$. There was also no significant correlation between happiness and religious well-being in females, $r(46) = .15, p > .05$. A z -test was conducted to see if the correlations differed significantly between the genders and found that they did not, $z = .29, p > .05$. There was no significant correlation between happiness and intrinsic religiosity in males, $r(46) = .32, p > .05$, or happiness and

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intrinsic religiosity in females, $r = -.16, p > .05$. A z-test concluded that the correlation in males was significantly different than the correlation in females, $z = 1.73, p > .05$. There was no significant correlation between happiness and social extrinsic religiosity in males, $r(17) = -.35, p > .05$, or in females, $r(46) = .11, p > .05$ and no significant difference between the correlations in the two genders, $z = -1.63, p > .05$. There was no significant correlation between happiness and personal extrinsic religiosity in males, $r(16) = -.09, p > .05$, or females, $r(46) = .24, p > .05$, nor was there a significant difference between the correlations $z = -1.15, p > .05$. Happiness was not significantly correlated with the Santa Clara strength of religious Faith survey in males, $r(17) = .30, p > .05$, or in females, $r(46) = -.07, p > .05$ and the difference between the correlations was not significant $z = 1.30, p > .05$. Happiness was also not significantly correlated with the Duke University Religion Index in males, $r(17) = .18, p > .05$, or in females, $r(46) = .24, p > .05$ and the difference between correlations was not significant, $z = -.22, p > .05$.

Anxiety was significantly correlated with certain measures of religion for females, but was not correlated with any measures of religion for males. Anxiety was not correlated with religious well-being in either males, $r(16) = .09, p > .05$, or in females, $r(46) = .18, p > .05$ and the difference between correlations was not significant, $z = -.32, p > .05$. Anxiety was also not correlated with intrinsic religiosity in males, $r(16) = -.10, p > .05$, or females, $r(46) = .16, p > .05$, and the difference between correlations was not significant, $z = -.90, p > .05$. Anxiety was not significantly correlated with social s religiosity in males, $r(16) = -.17, p > .05$, or in females $r(46) = -.03, p > .05$ and the difference between correlations was not significant, $z = -.48, p > .05$. Anxiety was also not correlated with personal s religiosity in males, $r(16) = .31, p > .05$, or females, $r(46) = .21, p > .05$, and the difference between correlations was not significant, $z = .37, p > .05$. Anxiety was not significantly correlated with the Santa Clara Strength or

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Religious Faith in males, $r(16) = .10, p > .05$, but was in females, $r(46) = .31, p < .05$, yet the correlations did not differ significantly, $z = -.72, p > .05$. Similarly, anxiety was not significantly correlated with the Duke University Religion Index for males, $r(16) = .09, p > .05$, but was significantly correlated for females, $r(46) = .33, p < .05$, and the correlations did not differ significantly, $z = -.87, p > .05$.

In terms of specific components of religion, a positive attitude toward charitable giving, measured by the score on the altruism subscale, was not significantly correlated with anxiety in men, $r(16) = -.11, p > .05$, but was significantly correlated with anxiety in women, $r(46) = .36, p > .05$. There was a significant difference between these correlations, $z = -1.67, p < .05$. Belief in an afterlife was not significantly correlated with happiness in males, $r(16) = .26, p > .05$ or females, $r(46) = .20, p > .05$, nor was there a significant difference between these correlations, $z = .22, p > .05$.

Discussion

It was hypothesized that there would be a positive correlation between happiness and religiousness. The results did not support this hypothesis. None of the measures of religiousness were significantly correlated with happiness. It was also expected that there would be a negative correlation between anxiety and religiousness. Anxiety was correlated with some of the measures of religiousness and not others. There was a significant positive correlation between anxiety and personal extrinsic religiousness. There was also a significant positive correlation between anxiety and the Duke University Religion Index.

The correlation between anxiety and the Duke University Religion Index is surprising and in opposition to the hypothesis that an increase in religiousness would be associated with a

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decrease in anxiety. The fact that anxiety was positively correlated with personal extrinsic religiosity, but not with intrinsic religiosity or social extrinsic religiosity suggests that certain approaches to religion may be associated with anxiety, while other approaches are not. An example of a statement on the measure of personal extrinsic religiosity is “I pray mainly to get relief and protection.” It is possible that people who agree with this statement feel pressure to pray for fear that if they do not, they will not be protected. This compulsion to pray and fear of being unsafe may lead to anxiety. It may also be that people who are already anxious and feel they need relief and protection are more likely to have a personal extrinsic religious orientation.

In terms of differences between the genders, it was hypothesized that both women’s happiness and men’s happiness would be positively correlated with religiousness, but that the correlation would be stronger for women. The results indicated that there were no significant correlations between any of the measures of religiousness and happiness in either males or females. It was also hypothesized that anxiety would be negatively correlated with religiousness in both men and women, but more so for women. The results showed that anxiety was not significantly correlated with any of the measures of religiousness in males. There were, however, significant positive correlations between anxiety and both the Duke University Religion Index and the Santa Clara Strength of Religious Faith in females, which suggests that, contrary to the hypothesis, religion was actually associated with increased anxiety in females.

The hypothesis that religion would be strongly correlated with an increase in happiness and a decrease in anxiety was based on a few assumptions: that women tend to be more anxious and unhappy than men, that religion is associated with increased happiness, and that women are more often religious than men. The proposed explanation for these relationships was that women turn to religion in order to cope with their anxieties, and religion offers them a release from these

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anxieties. Past studies have shown a correlation between happiness and religiousness, but they have not necessarily looked at the relationship between anxiety and religiousness. The idea that there would be a negative correlation between religion and anxiety was based on the belief that happiness and anxiety have an inverse relationship. In other words, because religion is associated with increased happiness, it should also be associated with a reduction in anxiety. The assumption may have been too simplistic. Though it seems counterintuitive, it is possible that religion is associated with both an increase in happiness and an increase in anxiety. A possible explanation for the correlation between anxiety and religiousness is that women who are more anxious to begin with turn to religion more frequently. Perhaps women turn to religion primarily as a means of coping with anxiety, while men turn to religion for other reasons.

It is also possible that the relationship between religiousness and anxiety depends upon factors such as the religious atmosphere in which people reside. In certain parts of the world, society promotes religiousness. For people living in especially religious areas, increased religiousness may be associated with increased happiness because it leads to improved social conditions. The research previously mentioned by Levin (2013) on Israeli Jews showed a correlation between increased religiousness and happiness. In Israel, where many people are religious, being more religious may lead to greater social acceptance. At Union college, however, increased religiousness may not necessarily lead to improved social conditions. In fact, the college atmosphere in America could present anxiety-producing situations for young religious adults, who want to act in line with their religious beliefs, but who have suddenly been allowed a new freedom from parental influence and restriction. They may experiment with behaviors like drinking and sexual promiscuity, which are inconsistent with the tenets of their religious institutions or beliefs, and which could cause them increased anxiety. These behaviors are often more stigmatized for women, which could explain why there was a correlation between increased religiousness and anxiety in women, but not in men.

There was no significant correlation between intrinsic religiosity and anxiety in either males or females, but there was a significant difference between the correlation for males and females. For males, intrinsic religiosity was associated with decreased anxiety, while for females it was associated with increased anxiety. The opposite was true for social extrinsic religiosity—for males, it was associated with increased anxiety and for females, it was associated with decreased anxiety. The difference between the correlation in males and the correlation in females was just below the level of significance. These results seem to support the hypothesis that aspects of religion that relate to close interpersonal relationships are more strongly correlated with the reduction of anxiety in women. These findings show that gender does in fact play a role in the relationship between religion, happiness, and anxiety.

It was also proposed that certain components of religion, such as charitable giving and belief in afterlife, would be more highly correlated to happiness and reduction of anxiety in women than in men. The results showed no significant correlation between belief in afterlife and happiness or anxiety in either gender. They did, however, show a significant negative correlation between positive attitudes toward charitable giving and anxiety in women, while in men, there was no such correlation. There was also a significant difference between the correlation in males and the correlation in females. These results refute the hypothesis that belief in afterlife and positive attitudes towards charitable giving are more highly correlated with reduction of anxiety in women than in men. As women view helping others as part of their conception of happiness, it is possible that those who are more anxious support charities in order to make themselves happier and less anxious.

Although the relationship between attitudes towards charity and anxiety was the opposite of what was expected, it remains true that men and women seem to differ in terms of which aspects of religion are associated with their happiness and anxiety. Future research should focus on identifying additional components of religion, such as prayer, or belief in god, in order to determine if they are correlated with happiness or the reduction of anxiety in one gender versus the other. This could help us understand the relationship each gender has with religion, why they are drawn to religion, and perhaps how religion benefits them differently. It could also give us clues as to why women are more religious than men.

There were some issues with the study that may have contributed to the results. One issue was that there were significantly more females than males. While there were 48 females, there were only 19 males. Another issue was with the measure of intrinsic and extrinsic religious orientations. Some of the questions were not applicable to non-religious people, for example, the statement on the measure of extrinsic social religiosity, "I go to church/services mostly to spend time with my friends." Non-religious people that do not go to church may not have known how to answer this question. Another statement, "Although I am religious, I don't let it affect my daily life" may have been confusing to non-religious people, who disagreed with the "although I am religious" part of the statement, but agreed with the "I don't let it affect my daily life." Future research should look at the relationships between different religious orientations, anxiety, and happiness just among people who are at least somewhat religious in order to better understand the relationships between religious orientations, gender, happiness, and anxiety.

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