RELATIONSHIP BETWEEN RELIGIOUS PRACTICES AND PSYCHOLOGICAL WELL-BEING: A CASE OF MILIMANI ESTATE, KITENGELA TOWN IN KAJIADO COUNTY, KENYA

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DECLARATION

This thesis is my original work and has not been presented for a degree or any other award at any other University.

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This thesis has been submitted with my approval as the duly appointed supervisor

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DEDICATION

I dedicate this work to my family, whose support has seen me this far.

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I am grateful to my able supervisor, Dr. Barnabé Anzuruni Msabah for guiding me through the process of putting together this thesis as one coherent document. I also appreciate both Faculty and Staff with whom I have shared knowledge in the domain of marriage and family therapy. I further recognize every organization from which I obtained relevant institutional permissions and clearances to conduct this study including the National Commission for Science, Technology and Innovation which granted me a research permit for this study. Last but not least, I owe this research to all the respondents without whose participation, this thesis would not have become a reality.

ABSTRACT

Psychological wellbeing is the pillar for all aspects of an individual's functioning, and if not ensured, psychological wellbeing problems will continue to be a burden to societal health. Religion can solve the growing psychological wellbeing issues in the world but, it remains little-explored. This study investigated the relationship between Christian religious practices and psychological wellbeing in Kenya, and was undertaken, as a descriptive survey, in Milimani Estate in Kitengela Town, Kajiado County in Kenya. The target population was 1,200 adult Christian residents. Stratified sampling was used to select 120 Christians attending various churches in Kitengela Town. Data was collected using questionnaires comprising both closed and open-ended questions. Quantitative data was analyzed using descriptive statistics-frequencies, mean scores and composite scores. Inferential statistics particularly correlation and regression techniques were then applied to test the significance of the influence of Christian religious practices on psychological wellbeing. Thematic analysis was used to analyze the qualitative data from open-ended sections. Verbatim excerpts were used to fortify the analysis and interpretation of qualitative data. Regression results indicated that religious practices explained a small but statistically significant variability in psychological wellbeing of the respondents (R^2=12.8, p<.01). Specifically, the individual predictive power of prayer, meditation and fellowship were not statistically significant but their joint effect had statistically significant explanatory power on psychological wellbeing. The implication of the study is that Christian religious practices only boost psychological wellbeing when combined. However, this must still be augmented with other interventions to have practical significance. Conclusion was that spirituality was just but a small part of psychological wellbeing. Religious practices restore one's negative emotional state back to equilibrium. The study recommended that spirituality should be integrated with other interventions in treating psychopathologies

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ABBREVIATIONS AND ACRONYMS

ACK	Anglican Church of Kenya
AIC	Africa Inland Church
CC	Catholic Church
GRFM	Global Revival Fire Ministries
HGC	House of Grace Church
ICC	International Christian Center
JW	Jehovah's Witnesses
KAG	Kenya Assemblies of God
KNBS	Kenya National Bureau of Statistics
MC	Mavuno Church
NACOSTI	National Commission for Science, Technology and Innovation
NEC	Neno Evangelism Center
PAG	Pentecostal Assemblies of God
PCEA	Presbyterian Church of East Africa
SDA	Seventh Day Adventists
SPSS	Statistical Package for the Social Sciences
USA	United States of America
WGC	Worldwide Gospel Church
W.H.O	World Health Organization

DEFINITION OF TERMS

Christian religious practices: This refers to the attitude and behavior in reverence to a triune God with whom one is able to relate, through a transformation made possible by grace through belief in and imitation of one Jesus Christ (Villegas, 2018). It manifests in one's life through their prayer, meditation, fasting and fellowship with God and with one another.

Fasting — This refers to the religious practice of temporarily abstaining from food or other objects of pleasure as an act of worship (Hall, 2016). In this study, fasting was used to mean skipping meals to focus on spiritual life, going without food as a dedication to God, participating in corporate fasting, and self-denial.

Fellowship — This is the knowing, feeling and experiencing God in the midst of a community of believers (Foster, 2012). In this study, fellowship is an umbrella term for church attendance, participation in religious meetings, estate fellowships, and sense of connection with others.

Meditation — This refers to the intentional and self-regulated concentration of attention to God for the purposes of calming the mind and body as a way of healing (Fecteu & Saeed, 2012). Meditation in this study means reflection on meaning of life, word of God, recitation of bible verses and reading spiritual books.

Prayer — This refers to communication with God, typically characterized by thanksgiving, praise, petition and request (Kendrick & Kendrick, 2015). The outward manifestation of prayer includes private prayer for self and others, having a prayer partner, praying in the morning and at bedtime, and praying with family.

Psychological wellbeing: This refers to an individual's emotional state of mind characterized by the degree to which the individual feels he or she: is in control rather than being overwhelmed with life issues, have a mastery of his or her environment, is realizing personal growth, has a sense of purpose in life, manifest self-acceptance and relates positively with others (World Health Organization, 2018; Vinayak & Judge, 2018). In this study, psychological wellbeing was indicated by cheerfulness, calmness, activeness, vigor, feeling fresh and rested.

Religion — This is an individual's sense of meaning, purpose and connectedness usually with a transcendent or sacred being; a quest of that which is sacred, a means through which a person brings the sacred into his or her life, often taking place within a religious context (Kennedy et al., 2015; Rusu & Turluc, 2011).

Spirituality — This term is defined broadly as the search for meaning or purpose and the sense of connection with oneself, with other people and with their God in the midst of life experiences (Timmins & Caldeira, 2019).In this study, spirituality is outwardly manifested through religious practices.

CHAPTER ONE: INTRODUCTION AND BACKGROUND TO THE STUDY

Introduction

This introductory section presents a contextual overview of religion and psychological wellbeing. It provides a global and regional perspective and trends on the association and practice of religion with implications on psychological wellbeing, which puts the research into context. The chapter also states the problem, outlines the purpose, objectives and research questions of the study. It further explains the significance and scope of the study as well as the limitations and delimitations.

Background to the Study

Psychological wellbeing is an emotional state of mind in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to contribute to the betterment of his or her community (World Health Organization, 2018). The state of mind of a psychologically healthy person feels in control and not overwhelmed with life issues, has a mastery of the environment, is experiencing personal growth, has a sense of purpose in life, manifests self-acceptance and relates positively with others (Vinayak & Judge, 2018). Emotionally healthy people exhibit emotional regulation – the act of taking positive action to change one's unfavorable circumstances or reframe the circumstance in a positive light (McClelland et al., 2018).The social dimension of psychological wellbeing manifests when there is a sense of belonging, which is the perceived connectedness one feels as an integral part of a community (Wilczynska, 2015).Together, these elements of psychological wellbeing are interdependent and mutually reinforcing (Dyakova et al., 2017).

The world today is experiencing unprecedented rise in cost of the effects of psychological wellbeing, due to a growing number of people being diagnosed with psychological illnesses. Harris (2018) documented that psychological wellbeing accounted

for 13 percent of the global disease burden and predicted that it will be leading by the year 2030 unless timely interventions are implemented. The global disease burden includes both direct cost of treatment and the opportunity costs to patients, employers, caregivers, the justice system as well as downstream costs such as homelessness, transfer payment due to dependence on welfare and loss of income due to unemployment (Australian Psychological Society, 2019).

Psychological wellbeing problems have reached global scales with costs expected to rise from 2.5 trillion dollars currently to 6 trillion dollars by the year 2030 (Marquez & Saxena, 2016). Evidence documented by Alun et al.(2017) reveals that the annual cost of psychological wellbeing exceeds 7.2 billion sterling pounds. In South Africa, a national survey undertaken by Docrat et al. (2019) found that public expenditure on psychological wellbeing was in excess of 615 million dollars and accounted for 5 percent of the country's total budget on public health. In Africa where psychological wellbeing problems are particularly high, over 80 percent of psychological wellbeing cost is borne by the individuals (World Health Organization, 2017). This has triggered a call to action of health professionals and other stakeholders towards finding solutions to the silent killer (Marquez & Saxena, 2016).

It is estimated that about 80 percent of Africans rely on religious healers for psychological wellbeing treatment (Adams et al., 2020).Religion may be defined as an individual's sense of meaning, purpose and connectedness usually with a transcendent or sacred being (Kennedy et al., 2015). This definition aligns with the viewpoint of Ogola (2014, p. 322) whose thorough examination of the term led to the conclusion that "there is an object connected with the goal and origin of life that people constantly turn to through religion". Underlying the perspectives of Kennedy et al. (2015) and Ogola (2014) is the notion that true meaning in life is derived from a sense of connectedness to a supreme being.

A vast array of religions exists in the world although a few of them such as Christianity and Islam dominate (Bergunder, 2014). The practice of Christian religion can best be understood within the backdrop of the Christian world view of spirituality. Spirituality is defined as an individual's alignment with the sacred or encounters with the existential features of life such as meaning, purpose, direction and connectedness (Harris et al., 2015). It may be conceptualized as that which is sacred, a means through which a person brings the sacred into his or her life, usually taking place within a religious context, where a framework for understanding and interpretation is derived (Rusu & Turluc, 2011; Singh & Madan, 2017). These conceptualizations of spirituality suggest that life has a spiritual component without which a human being cannot be complete.

The central beliefs characterizing Christian religion involve the notion that there exists a triune God, and it is possible to relate to this God, through a transformation made possible by grace through belief in and imitation of one Jesus Christ (Villegas, 2018). Some of the elements that distinguish Christianity as a religion encompass the idea of the image of God and the notion that it is mankind's most important characteristic; that God is the ultimate love and object of worship; and the wedge that sin brought between man and God, as well as the role of forgiveness and atonement of sin through the blood of Jesus Christ, and by whose stripes, man receives healing through faith in him (Clinton & Hawkins, 2011).

According to Singh and Madan (2017), a healthy spiritual identity involves feeling connected to God's love, feeling self-worth, having meaning and purpose in life, and being better able to fulfill one's greatest potential. The authors argue that "spirituality is a dynamic and intrinsic aspect of humanity through which persons seek ultimate meaning, purpose, and transcendence, and experience relationship to self, family, others, community, society, nature, and the significant or sacred. Spirituality is expressed through beliefs, values, traditions, and practices" (Singh & Madan, 2017, p.10).

Foster (2012) proposed a number of inward disciplines that characterize a spiritual life. These are: prayer, meditation, fellowship and fasting. Baesler (2012) conceptualize prayer as a means of communication with God, a process that generates a multiplicity of health, behavior and attitudinal outcomes. Lauricella (2012) concurs by postulating that prayer as a personal activity fosters adjustment to health challenges. It relieves internal tension and thus has a relaxing effect that creates a conducive environment for healing to take place irrespective of the infirmity one is dealing with (Kreps, 2012).

Prayer is closely related to meditation. However, while prayer is communication with God, meditation is a reflective exercise of the mind that trains attention and fosters calmness through a process of contemplation (Nandakumar, 2020). It is a relaxation management technique most notably with roots in eastern traditions but also forms the hallmark of Christian spiritual disciplines (Arya et al., 2018). It fuses emotions and attentional disciplines aimed at regulating one's emotion as a pathway to spiritual and health outcomes (Khusid & Vythilingam, 2016). This means that meditation facilitates emotional regulation, which is an important facet of psychological wellbeing.

Fellowship is an act of spiritual communion with one another (Foster, 2012). This means that it is an interpersonal interaction that takes place between two or more people who usually share a common religious heritage or identity. This means that the process of fellowship fosters connection between one another, resulting in trust building and mutual spiritual as well as instrumental support.

Fasting is the act of willingly abstaining from food for a time, usually as a spiritual discipline that trains oneself to avoid distraction and concentrate on one's relationship with God (Samudera et al., 2019). Just like other forms of spiritual discipline, fasting has an illustrious history that dates back to antiquity (Patterson et al., 2015). Religious fasting has

often been regarded as a cleansing act that purifies the mind and body and makes the spiritual forces more accommodative to the individual (Natarajan et al., 2014).

The association between religion and wellbeing is not a new phenomenon in the world. Although not unique to Christian religion, Christianity is one of the religions where these four disciplines are widely encouraged and practiced, not only to foster oneness with God but also for its healing properties (Foster, 2012). Generally, a vast array of literature claims that religion contributes to psychological wellbeing (Ellison et al., 2012). A meta-analysis of the underlying relationships between religion and wellbeing with Christianity in perspective showed that religion aids in responding to traumatic events and facilitating faster recovery from psychological wellbeing problems (Ryan, 2017). For instance, Ellison et al. (2012) examined the relationship between attachment to God and psychological distress among Presbyterian elders and lay persons. Results showed that a secure attachment to God was associated with decreased psychological distress and buffered against the deleterious effects of stressful life events. This is in keeping with the argument that seeking spiritual support from God is beneficial in terms of less anxiety and depression and more positive perspective (Hefti, 2011). In a nutshell, positive outcomes of religious interventions have been reported for a variety of psychological wellbeing problems (Kennedy et al., 2015).

There is a growing interest by researchers and practitioners in religion as a factor in the equation of psychological wellbeing of a society in many parts of the world including the United States and Europe (Hefti, 2011), Japan (Nagose, 2012) and Africa (WHO, 2010). In India, high religiosity has been found to be directly related to psychological wellbeing as indicated by positive relations, meaning in life and emotional wellbeing (Coelho-Junior et al., 2022). Faith healing in India is one of the most popular and accepted interventions for psychological wellbeing problems (Sharma et al., 2020). In Haiti, religion was practiced as a

coping mechanism during the Covid-19 pandemic due to the spiritual and social facets of religion (Saud et al., 2021).

In many Islamic nations including Malaysia, there is a general notion that spiritual actions such as praying and memorizing the Quran contribute to high psychological wellbeing (Karimipour et al., 2015). Similarly, according to Faull (2012), Christian religious practices such as Sabbath rests, morning devotionals, seeking spiritual support, asking forgiveness from God and others, participation in sacraments and purification rites, and partnership with God in life decisions are effective coping mechanisms. Religious coping is found to be highly prevalent among patients with psychological wellbeing problems, with surveys indicating that up to 80 percent of the world's population use spiritual beliefs and activities as coping mechanisms towards daily challenges and stresses which have implications on an individual's psychological wellbeing (Hefti, 2011). The foregoing suggests that spirituality and religion as a facilitator of psychological wellbeing is a universal phenomenon that transcends religious identities and geographical regions.

In Haiti, a thorough-going discourse by the World Health Organization (2010) reveals that the interlinking of religion and health is part of the cultural background of most Haitians. The Organization documents that Haitians first interpret illness from the perspective of the need to establish a harmonious relationship with the spirit world. They believe that religion can buffer one against stress, but spirits can also be a source of stress, if one is at variance with the spirits. Beyond that, religion and spirituality in Haiti is believed to provide a sense of purpose, alleviate despair and provide hope in very difficult and trying circumstances. As a result, religious leaders serve as co-therapists and are often trusted more readily than the typical professional counselor.

In Africa, traditional religious beliefs have greatly influenced the thought patterns of its inhabitants including what it portends for psychological wellbeing, with many Africans

having the tendency to prefer faith healers over psychological wellbeing professionals (Olawo, 2018). Many communities in Africa see psychological wellbeing challenges as having a spiritual connection and often resort to spirituality as an intervention in the belief that spiritual rituals such as prayer, use of anointing oil or holy water have curative properties (Shoib et al., 2022). For example, in Zimbabwe, it has been established that an estimated 75% of people consult traditional faith healers for the management of anxiety disorders and such other psychological wellbeing illnesses (World Health Organization, 2020).

The utilization of religious services as a solution for psychological wellbeing problems is also pervasive in many parts of Sub-Saharan Africa (James et al., 2018). In modern day Rwanda, it has been established that people still seek out the services of religious service providers for treatment of psychological wellbeing patients (Muhorakeye & Biracyaza, 2021).In Uganda, an analysis of Christian religious responses to the recent Covid-19 pandemic demonstrated the pivotal role religion played in mitigating the adverse spillover effects of the pandemic on the health of the populace through prayer and intimacy with God (Isiko, 2020). Similarly, contemporary Tanzania is also known for faith healing for all forms of maladies including psychological wellbeing (Marten, 2020).

In Kenya, an entire section of the Health Act No. 21 of 2017 talks about psychological wellbeing (Republic of Kenya, 2017). Although religious interventions are not explicitly mentioned, the Act allows for the advancement of other measures in the field of psychological wellbeing to alternative medicine which, in this case, is understood to include spiritual and religious interventions. In Kenya's religious landscape, the majority of the populace – estimated at over 85 percent, subscribe to various manifestations of Christian religious identities such as Catholicism, Anglicanism and a wide spectrum of Protestantism (Droz & Gez, 2021). Yet, despite the impressive religious participation of the population in Kenya's social scene, the impact this participation has had on the transformation of people's

lives has been notably minimal (Bairu, 2017).For instance, a correlational study that targeted consecrated religious women in Nairobi County reported a low effect size (r=.247, p<.01) of spirituality on psychological health though the coefficient was statistically significant (Kiplagat et al., 2019). It is against this backdrop that the present study attempted an analysis of the implications of religious practices on psychological wellbeing in Milimani estate, within fast growing Kitengela Town in Kajiado County.

Statement of the Problem

A survey undertaken by the National Council for Population and Development (NCPD) in Kajiado County revealed that psychological wellbeing problems were prevalent in the study area (NCBD, 2017). Psychological wellbeing is the anchor upon which all aspects of an individual's functioning flows, and if not ensured, psychological wellbeing problems will continue to be a burden to societal health. Religion can be the solution to growing psychological wellbeing issues. As such, there is a growing attention accorded to the development of religion-based interventions in the promotion of psychological wellbeing of society, with many churches mushrooming in Kajiado town (Mwangi, 2018).

Systematic reviews suggest that 80 percent of psychological wellbeing studies have focused on religion, and many of these studies report lower prevalence of psychological wellbeing problems among religious individuals (Damiano et al., 2016; Pirutinsky et al., 2019). However, the bulk of these studies have been undertaken outside Africa and even the few recent studies that involve Africans in their samples such as reported by Cater (2016) and Waite (2017) find insignificant correlation. This hinders the adoption of evidence-based religious practices relevant to the local context in the promotion of psychological wellbeing in the Kenya society. An investigation of the association of religious commitment and perceived stress levels in college students undertaken by Carter (2016) found no significant correlation between perceived stress and religious commitment, and recommended more

research to understand how religion affects psychological wellbeing. The present study was a response to this call for continued studies into the nexus between religion and psychological wellbeing, more so, the influence of Christian religion on psychological wellbeing of residents of Milimani estate, Kitengela Town in Kajiado County of Kenya.

Aim of the Study

The study sought to contribute to the body of knowledge by investigating the perspectives on the relationship between religious practices and psychological wellbeing of Christians in Kitengela Town of Kajiado County in Kenya.

Objectives of the Study

The study was guided by the following research objectives:

1. To establish the varying manifestations of psychological wellbeing of Christian residents of Milimani Estate, Kitengela Town of Kajiado County in Kenya.
2. To evaluate the relationship between religious practices and psychological wellbeing of Christian residents of Milimani estate, in Kitengela Town of Kajiado County in Kenya.
3. To determine the predictors of religious practices on psychological wellbeingof Christian residents of Milimani estate, Kitengela Town of Kajiado County in Kenya.

Research Questions

The research was guided by the following research questions:

1. In what ways does psychological wellbeing manifest in Kitengela Town of Kajiado County in Kenya?
2. How are Christian religious practices related to psychological wellbeing in Kitengela Town of Kajiado County in Kenya?

3. What are the predictors of Christian religious practices on psychological wellbeing in Kitengela Town of Kajiado County in Kenya?

Assumptions of the Study

The study made the following assumptions:

1. The study assumed that majority of the residents of Milimani Estate identify with the Christian religion.
2. The study also assumed that there is a relationship between religious practices and psychological wellbeing of research participants.
3. The study further assumed that there are factors that predict psychological wellbeing in Kitengela Town of Kajiado County in Kenya.

Justification of the Study

Individuals are made of mind, body, soul and spirit. Psychological wellbeing issues continue to be a matter of global health concern despite many interventions being put in place by various stakeholders. The dimension of religion and spirituality remains little exploited as an intervention among psychological wellbeing professionals despite the recognition of the spirit being part and parcel of the wholeness of a healthy person. This study contributes to making sense of the contribution of religion to psychological wellbeing within the Kenyan context.

Significance of the Study

This study is of significance to the residents of Milimani Estate in Kitengela town, in Kajiado County as it provides evidence based upon which psychological wellbeing professionals and Marriage/Family Therapists in the locality can develop interventions that integrate religion into counseling practice. They can have a clear understanding of the connectedness between psychological wellbeing and religion. This would enhance their

sensitivity to the worldview of psychological wellbeing clients on the interaction between religious beliefs, practices and their psychological wellbeing conditions.

The research can also inform the formulation of progressive policies for the provision of holistic psychological wellbeing-care. Thus, the ministry of health officials can find the study useful in instituting policy measures to leverage on religious healers as readily available community resources in the management and mitigation of psychological wellbeing problems in society.

The study also has significance for psychological wellbeing-care institutions as it can inform the development of alternative healthcare programs for psychological wellbeing patients. The recommendations of the study can be implemented within health facilities towards promoting better healthcare practices through the integration of faith with other medical interventions for psychological wellbeing illnesses.

To the academia, the study contributes to the discourse on religion and psychological wellbeing by investigating the association between the two among adherents of Christian religion within the Kenyan populace. It thus provides a non-western perspective of the role of religion on psychological wellbeing which is currently under-researched. It can thus inform further research by future academics who wish to extend studies in the area of spiritual and psychological wellbeing. Marriage and Family Therapists can integrate spirituality towards a holistic family therapy solution.

Overview of Research Methodology

Descriptive survey design was used to undertake the study. Data was collected from adult residents who attend churches within the town. Both quantitative and qualitative approaches were applied to the collection and analysis of data was drawn from self-reports of religious practices and psychological wellbeing. A comprehensive account of the methodology is provided in chapter three.

Scope and Delimitations of the Study

This study was undertaken in Kajiado County, an increasingly cosmopolitan County located south of Nairobi, the Capital City of Kenya. The County borders several counties including Nairobi County, Machakos County, Makueni County and Narok County, and is inhabited by a rapidly growing population due to urbanization and expansion of Nairobi City's precincts (Kajiado County Government, 2018).The study was specifically located in Milimani Estate. The target population was delimited to 1,200 adherents of Christian churches in the study locality. This means other religious faiths such as Islam and traditional religious practices were excluded from the sample. The sample comprised of 120 participants distributed equally by gender and entailed adults who identified themselves as Christian. The conceptual focus of the study was four dimensions of religious practices namely: prayer, meditation, fellowship, and fasting. The research design was descriptive, and entailed the utilization of quantitative and qualitative methods of data gathering and analysis.

Limitations

The study was limited by factors such as language barrier since some of the residents were not conversant with English language which was used to construct the research instrument. The researcher mitigated this limitation by being available to translate the questions in Kiswahili which is the national language of communication in Kenya. Accordingly, responses in Kiswahili were later re-translated back into English language at the time of data transcription. The outbreak of the Covid-19 pandemic also disrupted the data collection process as a surge of infections increased risk of exposure. The researcher adhered to the required Covid-19 prevention protocols such as social distancing, hand-washing and masking. Further, the interviews were kept brief to further reduce anxiety of exposure to the disease.

Chapter Summary

This chapter has provided the background to the study where the key variables of the study have been defined and the global, regional and local perspectives discussed. The background to the study has demonstrated how religion has been a part of the psychological wellbeing-care ecosystem across the world, with deep roots in Africa and other less developed economies. The background has also highlighted the dearth of empirical studies inquiring into the relationship between religion and psychological wellbeing within the Kenyan context. Subsequently, the chapter has stated the problem, purpose and objectives. The chapter has additionally expounded on the scope, significance, limitations and delimitations of the study. In the next chapter, the literature related to the topic at hand is critically reviewed.

CHAPTER TWO: LITERATURE REVIEW

Introduction

This chapter critically reviews the literature related to spirituality and psychological wellbeing outcomes. The chapter is organized into four main sections. The first section entails a critical review of the varying manifestations of psychological wellbeing. The second section discusses the relationship between religious practices and psychological wellbeing as documented by past scholars. The third section reviews literature on the predictors of religious practices on psychological wellbeing. The fourth section discusses the theoretical framework used. The last section presents the conceptual framework. A summation of the literature review is provided as a final wrap up of the chapter.

Manifestations of Psychological Wellbeing

The World Health Organization (2018) defines psychological wellbeing as "a state of wellbeing in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community" (WHO, 2018, p.1). This definition suggests that psychological wellbeing is characterized by a state of positive functioning and productivity, as well as resilience to life stressors. Chirico (2016) conceptualizes psychological wellbeing as the complete state of physical, psychological and social well-being, and not merely the absence of disease or infirmity. This latter definition is all-encompassing as it integrates various dimension of wellness, implying that it is a complex amalgam of dimensions of health which interact and affect each other in ways that make it difficult to attain one without the other. These definitions are the culmination of a general consensus that psychological wellbeing is not merely the absence of psychological illness and conjures up images of what Galderisi et al. (2015) refer to as a dynamic state of internal equilibrium that equips an individual with the

ability to live in harmony with society through the recognition, expression and modulation of one's own emotions and successful coping with stressful life circumstances and events.

Abdel-Khalek and Lester (2013) conceptualize good psychological wellbeing as having two main components: an absence of negative symptoms and positive signs of psychological and psychiatric functioning; positive indicators such as functioning at a high level of adaptation, having fulfilling social relationships with other people, psychological balance, self-esteem, self-control, maturity, and resilience. These authors therefore bring out the outward manifestation of psychological wellbeing, which constitute important indicators for psychological wellbeing diagnosis. They highlight that psychological wellbeing is typically characterized by elevated positive feelings and life fulfillment, and lowered experiences of adverse emotions. This means that whereas negative experiences are inevitable in life, a mentally healthy person has no deficit of positive emotions. According to Newman and Graham (2018), psychological wellbeing as a construct is associated with self-appreciation, positive interactions with others, ecological mastery, self-sufficiency, sense of purpose, personal advancement, a sense of meaning, vitality, and self-actualization. This construction of psychological wellbeing thus draw attention to the behavior of the individual, signaling the essence of individual capabilities and endowments that distinguish those who exhibit low psychological wellbeing from those who can be classified as psychologically unwell.

Self-acceptance as a manifestation of psychological well being simply means not being too hard on oneself, thinking and viewing oneself in a positive light including accomplishments, appreciating the good qualities one has and acknowledging their own personal limitations as well as past experiences (Shahidi, 2013).This dimension is regarded in the literature as a central criterion for depicting psychological wellbeing as it underpins optimal functioning of individuals. Those who score low on psychological wellbeing are

noted to harbor feelings of dissatisfaction and disappointment with one's past, with a strong desire to effect change (Sagone & De Caroli, 2014). From this revelation, it can be surmised that whereas discontent with the past can motivate one to take turnaround actions towards a more satisfactory pathway, it is reconciliation with one's past, rather than endless rumination over it, that characterize psychologically healthy people.

One is also said to have a high psychological wellbeing when they evaluate their interpersonal relationships as satisfactory or high quality (Garcia-Alandete, 2017). This means that interpersonal fellowship or the sense of community and belonging is an important facet of wellbeing. The outward manifestation of wellbeing accruing from sense of belong are: a warm and trusting relationship with others, a strong affection and empathy towards humanity and cultivation ofa deep friendship and mutual affection with significant others (Sagone & De Caroli, 2014). On the other hand, those who have low psychological wellbeing notably express frustration in interpersonal relationships and generally lack an understanding of the value of give-and-take for maintaining relationships unless stimulated or orchestrated by spiritual agents (Sagone & De Caroli, 2014). However, when one believes that their life matters and they have a sense of belonging, this is an indication of positive psychological wellbeing (Garcia-Alendete et al., 2017). Such feelings are cultivated and tested in a social setting, where collegiality and acts of kindness are reciprocated.

The dimension of autonomy is equally central to psychological wellbeing. This manifests when one has a sense of independence, does not yearn for the approval of others but rather, use personal standards to evaluate themselves (Sagone & De Caroli, 2014). In contrast, those who score low on this dimension of psychological wellbeing conform to social pressures and are concerned about how others think or evaluate them (Sagone & De Caroli, 2014). This sense of autonomy is characterized by environmental mastery as a by-product of emotional self-regulation that typically accrues from reflective exercises.

Within the psychological wellbeing discourse, the notion of emotional regulation and its intersection with religious practices such as meditation and prayer is well established in the scholarly literature (Chen, 2016; Peixoto & Gondim, 2020; Vallejo-Slocker et al., 2022). Emotional regulation is conceptualized as a process of monitoring, evaluating and modifying one's emotional reaction to external circumstances in order to achieve desired goals (Van der Merwe, 2015). The facets of emotional regulation, according to Morales-Rodriquez (2021) comprise of awareness and acknowledgement of one's emotions, acceptance of those emotions, control of impulsive conduct, and deployment of behaviors that help achieve preferred goals.

According to Gouveia et al. (2018), people who exhibit positive psychological wellbeing often engage in emotional regulation by, among others, re-interpreting one's circumstances and modifying the implications of ensuing emotions in favor of effective social functioning and generating positive energy that repress stress and increases a sense of optimism. Norman (2017) for instance, demonstrated how emotional regulation through forgiveness manifest in health, well-being and longevity and advanced the notion that the practice of forgiveness reduces one's ruminations that generate negative energy and highlighted this as a protective property against psychological wellbeing problems such as anxiety and depression. This implies that forgiveness as an emotional regulation strategy displaces negative ruminations and in place, fills the motional void with positive sentiments and in this way, the adverse impacts of stressful circumstances on psychological wellbeing are effectively contained. It is instructive to note that such emotional regulation behaviors are at the heart of religious practices with implications on psychological wellbeing.

Relationship between Religious Practices and Psychological wellbeing

The general literature on religion and psychological wellbeing across a diversity of populations is well documented (Issaco et al., 2015; Jacobs & Nierkerk, 2016; Jang, Johnson

et al., 2018; Pfeiffer et al., 2018; Vitorino, et al., 2018).Jang et al. (2018) examined the existence of an inverse relationship between religiosity and feelings of depression and anxiety among prison inmates and assessed whether it was attributable to their sense of meaning and purpose in life. Their study was based on a survey of male inmates from three prisons in Texas, USA. They found that purpose in God and gratitude mediated the effect of religiosity on depression. This study is important in explaining how religion affects depression as a manifestation of psychological state but falls short of explaining what triggers gratitude or purpose the inmates found in God. This leaves ambiguity in the pathway from religion to psychological wellbeing, thereby limiting understanding of the dynamics inherent in the cause and effect relationship. Further, the study was undertaken in a context which differs both socio-culturally and economically from the Kenyan scene, hence presenting a knowledge gap. The present study sought to address this gap by examining how religious practices interact with the social and psychological dimensions of health and what this portended for respondents' psychological wellbeing.

Another study in the US explored the role of religious behavior in health self-assessment. The study, which was undertaken by Pfeiffer et al. (2018) aimed to determine how religious behaviors affected health promotion behaviors among socio-economically challenged residents of Southwest San Bernadino County, California. They used a convenience sample of 261 respondents. Their results showed that the impact of religious behaviors on healthy behaviors was significant and positive. This study is of importance to the present research as it controls for economic endowment, thereby clarifying the net effect of religion on psychological wellbeing. However, the study did not focus on the implications of religious practices on psychological wellbeing. Thus, although there might be a correlation between physical health and psychological wellbeing, the interaction and direction of the relationship was not demonstrated. The present study sought to fill this gap by examining the

four salient facets of religious practices namely: prayer, fasting, fellowship and meditation and how they contributed to psychological wellbeing of Christians in Kitengela town.

Issaco et al. (2015) examined how priests' relationship with God influenced their psychological health. Their study was based on a qualitative sample of 15 catholic priests from the mid-Atlantic area of the US. They found that participants described their relationship with God as central to their health and contributed to their sense of connection and support. This study suggests that sense of connection and support that emanate from one's communion with God explains the positive impact of religion on psychological wellbeing. This empirical finding is important as it highlights the significance of a relationship with God at the heart of psychological wellbeing. Typically, this relationship is maintained through prayer, suggesting that the strong the prayer life, the psychologically healthier the individual. However, like the other previously reviewed studies, this study too was undertaken in the US, and thus, it remains unclear whether similar findings can be obtained in Kenya. The present study thus represents one of the few empirical investigations into the nexus between prayer and psychological wellbeing in Kajiado County and the mechanism through which this happens. This is significant for knowledge production as the results of the study can form the foundation upon which to theorize psychological wellbeing and its antecedents in an economically less privileged country such as Kenya.

Vitorino et al. (2018) investigated how different levels of spirituality and religiousness influenced psychological wellbeing problems such as depression, anxiety as well as promoted psychological wellbeing as indicated by optimism and happiness. They undertook a cross-sectional study that involved a sample of 1,046 Brazilian adults. They found that having higher levels of both spirituality and religiousness were more correlated to better outcomes than having just one of them or none of them. This finding is significant in the sense that it reveals that both spirituality and religiousness contributed to psychological

wellbeing. It suggests the existence of a distinction between religiousness and spirituality, meaning that religiousness is not synonymous with spirituality. It is also offers a different context given that it was not undertaken in the US or other developed world. This means that the research results are relatively more relatable from the socioeconomic and cultural viewpoints. Further, the research draws from a large sample size, which lends credibility to the statistical estimates. However, unlike the study by Jang et al. (2018) and Pfeiffer et al. (2018), it does not identify the mechanism through which the cause and effect relationship takes place. This leaves a lot of questions unanswered, among which are, whether and how religious disciplines affected psychological wellbeing, and whether there were effect size differentials. In the present study, various religious practices were analyzed to estimate their effect size and therefore locate each practice on a continuum from weak to strong so as to inform prioritization whenever an attempt is made to integrate religious practices into the psychological wellbeing intervention programs.

Among the few studies done in Africa, one was undertaken by Jacobs and Nierkerk (2016) who examined the role of spirituality as a coping mechanism for South African traffic officers given the many stressful situations they face that have implications on their psychological wellbeing. Theirs was an interpretive qualitative study based on a purposive sample of 10 traffic officers. In-depth interviews held with the respondents revealed that spirituality as a coping mechanism depended on their interpretation of the meaning of spirituality. Consistent with studies undertaken in other countries, the research suggested that the relationship between religiosity and psychological wellbeing is positive. The traffic officers therefore equated spirituality with religiosity, signifying the thin line between religion and spirituality. This is anticipated because quite often, both center around a unifying factor, namely, God, whom according to some religions like Christianity, is a spirit (Van Niekerk, 2018). However, the study did not delineate which predictors were salient in

explaining psychological wellbeing and hence, it is difficult to estimate the contribution of the different religious practices to psychological wellbeing. The present study sought to add to the body of knowledge by analyzing the explanatory power of each of the four dimensions of religious practice on psychological wellbeing.

Kiplagat et al. (2019) made a contribution to the literature production by examining the linkage between psycho-spiritual health and joy scores of sanctified religious women in Nairobi County. The study drew from a systematic random sample of 238 consecrated religious female participants undertaking studies in three theological colleges. The study reported a non-significant positive link between psychological wellbeing and happiness, though a statistically significant correlation was obtained between psychological wellbeing and spiritual wellbeing. However, even then, the effect size was considerably low, suggesting that the relationship was weak. The research is useful as it provides the most contextually relevant empirical account of the nexus between religion and psychological wellbeing. However, the study deployed spiritual wellbeing scale (Paloutzian et al., 2020), whose items underrepresented the fellowship dimension of religious practices which forms a critical factor in human life. It is noteworthy that the spiritual wellbeing scale used in the research contains only one item which is inadequate for assessing fellowship dimension. This gap in conceptualization and measurement was addressed in the present study by presenting fellowship as a multidimensional religious practice comprising of church and fellowship attendances, participation in religious meetings and sense of connectedness with other believers.

Predictors of Religious Practices on Psychological wellbeing

This section critically examines existing knowledge on the impact of religious practices such as prayer, meditation, fellowship and fasting on psychological wellbeing.

Prayer and Psychological Wellbeing

According to Joshi and Kumari (2011), prayer has been used as a self-help health enhancing intervention for centuries. A key feature of many religions is prayer or communion with a deity, even though the precise practice of prayer may differ from one religion to another (Newman & Graham, 2018).Both Foster (2012) and Newman and Graham (2018) agree that communion with God should foster a sense of connection or closeness with deity, and this may have implications on one's health condition and on the attitude one holds towards the deity.

Newman and Graham (2018) add that deliberate prayers potentially possess stronger effects on well-being or may be the outcome of an occurrence that strongly influence wellbeing such as an adversity, which triggers sadness and propels one into prayer. In their view, what is being said during prayer can shape well-being in various ways. For instance, it has been reported that those who pray with gratitude and esteem tend to experience more joy than their counterparts who do not, whereas those who pray out of obligation, make confessions during prayer and petition experience comparatively lower sense of happiness and well-being (Newman & Graham, 2018). It therefore means that attitude is a vital factor in the ultimate prayer outcome. It can be argued that the interaction between attitude and prayer is complex: whereas the attitude with which one goes into prayer influences the psychological wellbeing outcomes of prayer, notice is taken that quite often, prayer can help one to adopt the right attitude towards life and its vagaries. Scripture for instance urge Christians to always rejoice in prayer and express gratitude to God in all circumstances as an act of obedience to God's will (Cf. 1 Thessalonians 5:16-18).

Prayer is such a significant aspect of spirituality that Jesus himself taught how we should pray. An element of prayer found in what is referred to as 'The Lord's Prayer' is forgiveness. According to Harris et al. (2015), forgiveness has commonly been used in

secular counseling by non-religious counselors and clients alike, particularly in individual, marital, and family therapies. Forgiveness has been found to have a healing and restorative power as it involves reappraisals of circumstances surrounding the issues of life. Chan and Rhodes (2013) argue that such reappraisals can be salient in the context of a natural disaster, particularly if survivors interpret the disaster as divine punishment for transgressions or shortcomings. By contrast, positive religious coping strategies include seeking spiritual support such as by looking up to God for strength and guidance and asking God to help overcome the situation.

Christians draw their belief from biblical teachings and examples of healing and health restoration through prayer. Philippians 4:6 says, “Be anxious for nothing, but in everything by prayer and supplication, with thanksgiving, let your requests be known to God”. Furthermore, believers are urged not to worry (Cf. Matthew 6:34), but to go to Jesus if weary and heavily laden in order to find rest for their souls (Matthew 11:28-30);to cast all their anxiety to God, because he cares (Cf.1 Peter 5:7). These are words of encouragement which are characteristic of positive psychology known to have a therapeutic effect on the person (Wong, 2015).

Rusu and Turluc (2011) break down prayer into meditative, ritual, colloquial and petitionary. They explain that when people pray in the midst of meditation, they reflect on God;when they pray as a ritual or custom, they are essentially either expressing memorized prayers or reading the prayers; when they engage in colloquial communion with God, they engage in a conversation with him. Those who make petitions during prayer do so in expectation of personal needs being met. Whichever form of prayer, they argue that prayer is an active coping mechanism which operates by fostering a sense of controlin spite of adversities one if confronted with in life. In their view, prayer may even stimulate the reframing of negative happenstances as avenues for spiritual development, appealing for

strength to withstand illness or engendering mental view of a caring God that confer a sense of purpose and meaning in life. This perspective finds support from the book of Romans 5:3-5 which says that suffering produces perseverance, which in turn produces, character, which in turn also produces hope.

The starting point for understanding the link between prayer and psychological wellbeing is to appreciate that to be in good health, people must have good spirit and pay attention to cultivating their prayer life (Chirico, 2016).Coping through prayer is one way of making sense of and handling life stressors through divine expression of religious faith. People utilize prayer approaches to manage life stresses and facilitate meaning making, feelings of control, perceived sense of comfort and intimacy with God, gain connection with others and relationship with God; and realize positive change (Singh & Madan, 2017).Prayer is therefore a resource that individuals and therapists can tap into to influence not just psychological wellbeing but other aspects of life of a human being.

It is also noted that prayer is a form of talk therapy, since prayer is essentially an act of talking to God. Therapeutic effects of prayer have been reported in multiple empirical studies which associate prayer with reduced anxiety, recognizing its calming effects and the activation of a sense of wellbeing (South & McDowell, 2018; Voutilainen & Peräkylä, 2014). It may be surmised from these findings that these outcomes are potentially interrelated: calmness may be both a sign of reduced anxiety and the cause of anxiety reduction. Similarly, sense of wellbeing may result because anxiety is reduced. At the same time, an individual may experience reduced anxiety because of the sense of wellbeing perceived after saying a prayer: simply by proclaiming the healing power of Jesus through prayer (McCulloch & Parks-Stamm, 2018).

Harris et al. (2015) point out that researchers attempting to study the effectiveness of prayer in naturalistic settings have documented its importance in religious people as a method

of coping with stress or stressful situations. They aver that different forms of prayer may have differential associations with certain outcome variables, such as overall well-being and life satisfaction. However, they highlighted that usefulness of prayer as adjuncts to counseling or medical care remains almost completely uninvestigated. They drew from a control trial of the effect of prayer on health which revealed that patients in the prayer condition did substantially better than control patients on a number of health-related outcome. This signifies that prayer has curative properties over infirmities. However, how prayer contributed to improved health outcomes was not explained in the study. This provided grounds for advancing research on the mechanism through which prayer enhanced health, which provided motivation for carrying out the present research.

Similarly Kiyani et al. (2011) investigated the effects of prayer in increasing psychological wellbeing of college students of a Middle Eastern university. They used a causal-comparative method to evaluate the psychological wellbeing of 50 students committed to prayer and an equivalent sample of students not committed to prayer as a control group. Results showed a significant difference in the average scores of psychological wellbeing between the two samples, with those committed to prayer having a higher psychological wellbeing score. However, the study was undertaken among non-Christians, thus presenting a gap in research on the significance of prayer on psychological wellbeing of Christian populations. Furthermore, the research was conducted in the western context whose religious value systems potentially differ from religious practices and perspectives in an African country such as Kenya.

Boelens et al. (2012) studied the effect of prayer on depression and anxiety one year after prayer intervention. Results suggested that there was a statistically significant reduction in depression and anxiety. They recommended direct person to person prayer as a useful adjunct to conventional medical care for patients suffering from psychological wellbeing

problems. The novelty of the study is found in its identification of person to person prayer, thereby distinguishing the form of prayer that is likely to yield optimal psychological wellbeing outcomes. This can inform the deployment of prayer strategies that promise higher health return. The importance of the study is in drawing scholarly attention to prayer typologies and their differential effects on psychological wellbeing. The study however did not explain the mechanism through which prayer influences psychological wellbeing, a consistent theme gap in past research that the current study sought to close.

Religious Meditation and Psychological Wellbeing

Meditation is defined as the intentional and self-regulated concentration of attention for the purposes of calming the mind and body as a way of healing (Fecteu &Saeed, 2012). Foster (2012) discusses meditation as a distinct spiritual discipline apart from prayer, which defines a Christian life. Harris et al. (2015) conceptualize meditation as a highly cognitive and sometimes emotional activity that immerses the whole person in a psycho-physiological experience, usually undertaken by sitting quietly while being inwardly alert and focused and inwardly calm while being open to expanded awareness. Newman and Graham (2018) similarly observe that meditation and mindfulness methods entail some sort of silent reflection, mental cleansing, and a quiet time free of disturbance or distractions from the external environment. They cite studies which relate mindfulness to reduced stress and improved well-being. This means that just like prayer, meditation has calming properties, which lowers psychological wellbeing problems such as anxiety and stress.

In line with Rusu and Turluc (2011), an earlier study by Green and Elliott (2009) which compared the effects of meditation on psychological wellbeing after controlling for work and family were also supportive of the evidence available in extant literature. These scholars assessed the relationship between religiosity and well-being after holding constant assessment of fulfillment from one's job, marital bliss, and financial stability. The findings

revealed that individuals who engage in spiritual meditation reported better health and elevated joy, irrespective of one's religion, religious engagement, job and family relations, social backing, or financial endowment. However, the study did not integrate methodologies that expose the underlying mechanism through which meditation contributed to mental wellness.

Subsequent research suggest that there exist many forms of spiritual coping with life stressors including benevolent appraisal and establishing and maintaining feelings of connection with God through meditation (Chan & Rhodes, 2013).A review by Rusu and Turluc (2011) for instance identified four dimensions of meditation that contribute to psychological wellbeing. The cognitive dimension interprets life's happenings through spirituality, accepting the past, appreciating the present, and looking hopefully to the future; the behaviorist dimension refers to the religious rituals and practices through which the individual sees himself, the others and the community; the affective dimension argues that meditation and spirituality breed hope, love, care, security; and the developmental dimension is about living spirituality throughout life, as the individual integrates the lessons and experiences of life.

There is a clear demonstration in research that spiritual meditation can be vital in enabling one to positively cope with life stressors, promote emotional well-being, and foster resilience among those who score high on religiosity. Effective integration of meditation and piety into the therapy context can instill reflection, sense of hope, and positive change, which are important facets of the therapy process (Singh & Madan, 2017). Further, meditation may facilitate enhanced emotional adjustment in patients, enabling them to keep up hope, as well as derive meaning from their circumstances. It has been advanced in literature that perceptions of being an agent of a higher purpose can spur resilience against adversity which may initially feel overwhelming (Singh & Madan, 2017).

Chan and Rhodes (2013) examined positive and negative religious coping in the context of Hurricane Katrina. Results from structural regression modeling indicated that negative religious coping was associated with psychological distress. Further analysis indicated significant indirect effects of pre- and post-disaster religiousness on post-disaster wellness through positive spiritual coping. Their findings therefore underscore the positive and negative effect of spiritual variables in the context of a natural disaster. Their study is useful in informing the role of spiritual coping on psychological wellbeing. However, they drew from a meta-analysis which suggested that across various stressful life situations, religious coping methods are consistently associated with improved psychological outcomes, including acceptance, hope, optimism, life satisfaction, spiritual growth, and stress-related growth (Chan & Rhodes, 2013). The methodological choice adopted raises concerns over the currency of the conclusions drawn since meta-analysis typically depend on historical data.

Jafari et al. (2010) investigated the relationship between spiritual well-being and psychological wellbeing in university students. The research sample consisted of 223 university students (110 males and 113 females), who took Spiritual Well-Being Scale and General Health Questionnaire. The results of the study showed that there is a significant relationship between spiritual well-being and psychological wellbeing. Nevertheless, there was no significant relationship between spiritual well-being and anxiety, social dysfunction and depression. The results of the regression analysis showed that spirituality and existential well-being significantly predicted psychological wellbeing. As well, another finding was that spiritual and existential well-being in females was significantly higher than in males, suggesting underling gender differences although there was no sex-related difference in psychological wellbeing scores. The research however used a student sample, suggesting that generalization of the study to the broader community would be problematic.

In contrast to most research findings, Bartkowski et al. (2017) document empirical results suggesting that meditation is unrelated to reported anxiety among a sample of American adults. This suggests that there are potential differences in the practice of meditation and the related outcomes on psychological wellbeing from population to population. The factors for the inconsistency in the findings to the existing body of knowledge were not explained. The current study sought to delve into the therapeutic effects of meditation as a religious practice on the psychological wellbeing of practitioners among a Christian sample within the Kenyan context.

Smith (2014) investigated the relationship between spirituality and psychological wellbeing of adolescents in an acute care psychiatric facility Florida, USA. Results of the study indicated that no statistically significant relationship existed between spirituality and treatment outcome for adolescents in crisis residence. The author recommended that Counselors who utilize spiritual principles as the primary tool for stabilization of adolescents may want to rethink their treatment protocols. This finding goes against the grain of past studies undertaken in this area and suggests the need for continued empirical inquiry. This gap in knowledge motivated the extension research within a non-western context.

Within the Kenyan context, Selvan and Mwangi (2014) are among the few scholars who have delved into empirical examination of the association between meditation and wellbeing outcomes. Their study explored young adults' experiences of contemplative practices and the accrued outcomes on life outlook. The study used a sample of 504 students who engaged in contemplative prayer and carried out interviews before and after the prayer sessions. Findings at end-line showed that participants described their experiences as feeling light, calmer and serene. These results led to their conclusion that such religious based practices had practical significance for well-being interventions. However, the narrow conceptual scope of the study raises concerns as to whether meditation functioned in isolation

or in cahoots with other practices. The present study bridged this gap by analyzing both the individual effect sizes of the different religious practices as well as their joint effect on psychological wellbeing.

Religious Fellowship and Psychological Wellbeing

Another dimension of Christian religion is fellowship, which Foster (2012) likens with knowing, feeling and experiencing God in the midst of a community of believers. This is often anchored on the exhortation of believers as found in Hebrews 10:25 that they should not give up meeting together, but should meet to encourage one another. The theme of encouragement is common throughout instances of fellowship. This underpins the perspective of Rusu and Turluc (2011) who aver that fellowship is a form of spiritual coping where one gets a sense of spiritual connection with others. According to Newman and Graham (2018), community fellowships are essentialtraditions that have significant consequences for health. They recount that in Christian and Jewish customs, those who share a common faith congregate at various places of meetings and sanctuaries.

Ismail and Desmukh (2012) explored the link between fellowship and psychological wellbeing in a model of Pakistani populations. They conceptualized fellowships as spiritual gatherings, attendance, belief salience and frequency of prayer. Anxiety, loneliness and life fulfillment were the dependent variables because of their relationship with psychological wellbeing. Their results revealed that a strong, negative relationship did indeed exist between fellowship and loneliness and between spirituality and anxiety. A strong positive relationship was also found between fellowship and life satisfaction. The authors concluded that fellowship affects different facets of psychological well-being. What was not clear is whether similar results would be obtained within a Kenyan sample, hence the present study.

From the review of the literature, it is evident that the relationship between fellowship and psychological wellbeing appears to be one of the most under-researched aspects of Christianity, going by the documented publications in existence. The current study seeks to contribute to the body of knowledge on this relationship between fellowship and psychological wellbeing of Christian Kenyans.

Religious Fasting and Psychological Wellbeing

Fasting is another inward discipline that Foster (2012) associates with spirituality. Fasting is the religious practice of abstaining from food or other objects of pleasure as an act of worship (Hall, 2016). Newman and Graham (2018) explain that the intention of abstinence is to develop a disciplined focus away from distraction. They observe that in various Christian denominations, fasting entails not just denying oneself food, but devotion of oneself to God and Biblical precepts. They speculate that this emphasis on focus on God has the potential to increase an individual's psychological wellbeing.

Attempts have been made by various scholars to clarify the mechanisms through which such abstinence foster psychological well-being. While there are reports that indicate those with high religiosity scores report enhanced well-being, the precise mechanisms that make this happen not sufficiently explained. Specific religious disciplines such as fasting could potentially explain the linkage between religious commitment and well-being. Moreover, some religious views may temper the association between wellness and religiosity (Newman & Graham, 2018).

Mousavi et al. (2014) investigated the effect of fasting on the psychological wellbeing of a Middle Eastern population. They used one group pretest-posttest design using a sample of residents of Kermanshah City. The study found that while fasting was associated with general health scores, it had no effect on psychological wellbeing problems. Thus, although

the effect of fasting on psychological wellbeing was generally positive, the results imply that fasting is not an antidote to all psychological wellbeing issues.

Newman and Graham (2018) explored how fasting could influence one's well-being. They argued that it is necessary to put into perspective the specific religious views and practices to fully appreciate the relationship between religiosity and well-being. They noted that fasting can satisfy various human needs including the need to belong and to identify with a religious community, which foster well-being. Given the contextual cultural differences, it remains to be seen whether the effect of spirituality on psychological wellbeing transcend cultural boundaries.

In contrast to the foregoing studies, Watkins and Serpell (2016) reported mixed effect of fasting on psychological wellbeing. Their study aimed to investigate the psychological effects of short-term fasting on the psychological wellbeing of women. They found that fasting led to both irritability and increased sense of control. A key weakness of the study was the generalization of findings to the wider population of men and women yet their sample was strictly based on the experiences of women. The study thus ignores potential gender differences.

A study on the nexus between religious fasting and health undertaken among children of immigrants in 30 European countries by Berggren and Ljunge (2017) suggest that fasting predicted worse health, contrary to the dominant notion that this religious discipline promotes good health. This study is significant in the sense that it suggests that demographic factors such as age have an implication on the direction and impact of fasting on psychological wellbeing. It also signifies the importance of further empirical inquiry into religious practices and under what conditions they may be beneficial interventions to psychological wellbeing problems.

Theoretical Framework

The Extended Bio-psycho-social Framework was used. It was developed in the 1970s by Doctor George Libman Engel (1913-1999), an American psychiatrist in Rochester, New York. It was developed as a way of humanizing medical practice, for, according to him, bio-medicine had been focusing on patients as objects-without any regard for their subjective experiences. Engel's model aimed to integrate empathy and compassion into medical practice, by looking at the totality of a patient's well-being. The basic assumption of the theory is that factors related to one's biology, psychology and society are complexly interactive in the psychological wellbeing equation. In the extended bio-psycho-social model, spirituality is a key dimension in the provision of psychological wellbeing interventions. The key concept of the theory is that a human being's biology, psychology and spirituality are all integrated.

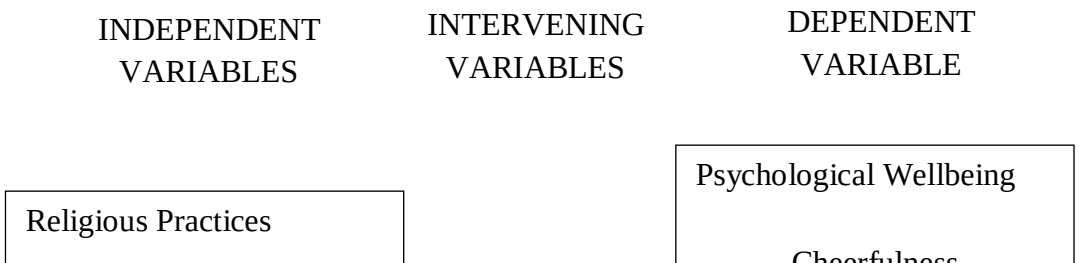
Sing and Madan (2017) posit that the bio-psycho-socio-spiritual model's integrative framework is a helpful tool for exploring the influence relationship between religion/spirituality and psychological/physical health. They argue that one's religious and spiritual views and beliefs may confer strength and support that therapists may tap into to help clients realize the goals of treatment. Practices such as forgiveness therapy, willingness, releasing, letting go, meditation/contemplation, volunteering, prayer, fellowship, spiritual or religious assessment, and utilization of religious community as a resource are all integrated into the framework (Harris et al., 2015).By enabling people to feel in control, feel comforted, feel in communion and connection with God, spirituality can play a key role in the transformation journey and foster the establishment of a new meaning in life(Rusu & Turluc, 2011).

In this study, the Extended Bio-psycho-social Framework was applied to explain the Christian religious practices such as prayer, fasting, meditation and fellowship that have an

effect on psychological wellbeing in Kenya. This is because of its appreciation of the contribution of religious practices such as prayer, fasting, fellowship and meditation as antecedents to psychological wellbeing. It was therefore helpful in exploring the mechanisms under which these so-called spiritual disciplines contribute to psychological wellbeing of practitioners. The model's social facets (social support, interpersonal relationships and family environment), psychological facets (positive emotions) and spiritual facets (beliefs and practices) constituted the constructs that formed key elements of the psychological wellbeing equation.

Conceptual Framework

A conceptual framework is the product of the convergence of various concepts that explain a given phenomenon that is the subject of scientific inquiry (Shikalepo, 2020). This is represented as a structure that visually depicts the supposed relationship between the various concepts underlying the phenomenon (Adom et al., 2018). The conceptual framework represents this study in a diagrammatic form as shown in Figure 2.1. It depicts the dimensions of religious practices as the independent variables while psychological wellbeing (as measured by effective coping with life stresses, productivity and contribution to community) is given as the dependent variable. The personal factors such as age, gender, education, marital status and occupation are presented as factors that may intervene in the relationship between the independent and dependent variables (Lou et al., 2013). The variables under the model guided the development of the conceptual framework that was used to explain how the study variables were related.



As a religious practice, prayer is about communion with God as outwardly manifested through prayer for self and others, having a prayer partner, praying in the morning and at bedtime, and praying with family (Kendrick & Kendrick, 2015). The relationship between prayer and psychological wellbeing is suggested in scripture which encourages the believer not to be anxious in anything, "but by prayer and petition, with thanks giving", to present requests to God (Cf. Philippians 4:6-7). Christian religious practice of prayer is therefore assumed to contribute to positive psychological wellbeing through reduced anxiety.

Meditation is similarly a religious practice characteristic of Christianity. Believers are encouraged to meditate on God's word, keeping them to heart, "because they are life to those who find them and health to one's whole body" (Cf. Proverbs 4:20-22). Christians are further reminded that worrying is a fruitless exercise because it does not add length to life (Cf. Matthew 6:26-30). Thus, it is hypothesized that those who meditate on these words of God

experience positive emotions that enable them to enjoy better psychological wellbeing than those who do not.

Another religious practice found among Christians is fellowship – which is an umbrella term for church attendance, participation in religious meetings, estate fellowships, and sense of connection with others. Christians are urged not to stop meeting together but to encourage one another (Cf. Hebrews 10:25). This suggests that it is through fellowship that believers find encouragement, even when facing life's challenges. Scripture admonishes brethren to encourage one another and build each other up (Cf. 1 Thessalonians 5:11).The encouragement they find from fellowship with other believers is assumed to lower stress, thereby having a positive influence on their psychological wellbeing.

The practice of fasting is also common among many Christians. Typical fasting is practiced through skipping meals to focus on spiritual life, going without food as a dedication to God, participating in corporate fasting, and self-denial. Research undertaken among Muslim communities has found that fasting has a positive effect on psychological wellbeing (Mousavi et al., 2014). It is therefore anticipated that fasting among Christian populations would yield similar effects on psychological wellbeing.

The influence of religion on psychological wellbeing may vary depending on personal factors such as age, gender, education, marital status and/or occupation. It is therefore speculated that personal factors may act as intervening variables in the relationship between religion and psychological wellbeing.

Psychologically healthy persons cope effectively with life stresses, are productive and contribute positively to community. This is indicated by cheerfulness, calmness and restfulness, interest in life, activity and vigor (World Health Organization, 1998).In the current study, it was hypothesized that due to religious practices, psychological wellbeing of the individual can reduce or increase.

Chapter Summary

This chapter has reviewed the pertinent literature related to the study. From the review, there is great support to the idea that spirituality, demonstrated through various religious rituals such as prayer, fellowship, meditation and fasting have a positive influence on psychological wellbeing. However, there are scholars that report contradictory results. Further, most of the studies were undertaken in the western world which is culturally different from Kenya. A theoretical framework and conceptual framework have been proposed to guide the pursuit of the current study. In the next chapter, the methodology to be used is described.

CHAPTER THREE: RESEARCH METHODOLOGY

Introduction

This study aimed at investigating the effects of religion on psychological wellbeing in Milimani Estate of Kitengela Town in Kajiado County, Kenya. In this chapter, the methods and procedures followed when undertaking the study is explained. The content of the chapter includes a description of the research design, discussion of the target population, explanation of the research procedure, instruments and tools used, methods of checking for their validity and reliability, and the procedure followed when collecting and analyzing data. Ethical considerations are also discussed.

Research Design

The study was designed as a descriptive survey. The features of descriptive research include a systematic description of facts about a given people or area of interest, to accurately portray characteristics of a particular group, observe and document aspects of a situation in its natural setting, discover association between or among a set of variables and respond to questions on current events or trends (Dulock, 2014). This research design has been found to be robust for the study of beliefs, attitudes and perceptions, which make it one of the most popular designs in the field of psychology and counseling (Almalki, 2016). In the current study, the research design guided the investigation of the relationship between prayer, religious meditation, religious fellowship and/or religious fasting and psychological wellbeing. It also facilitated the investigation of personal factors that were potentially at play such as age, gender, education and salvation status. Thematic methodology was deployed to guide the collection and analysis of qualitative data.

Location of the Study

This study was undertaken in Milimani Estate in Kitengela Town, Kajiado County in Kenya. Milimani estate is one of the residential areas that make up Kitengela Town, a fast-growing town in Kajiado County. It is located at the outskirts of the town, off the Nairobi-Namanga-Tanzania Highway, about 30 kilometers south of Nairobi. The human population in the town has rapidly grown, with projections suggesting that the town is currently populated by over 40,000 people. The town is part of the larger Nairobi Metropolitan area and is populated by middle and upper-income families, who own the plots on which they have built their homes. The town center is teeming with all sorts of economic activities including butcheries, hardware shops, clothing and textile, petrol stations, eateries and shopping malls. Most of the residents are Christians, going by the large number of big churches found in Kitengela town, and also the many mid-week fellowship meetings that take place in residents' homes in the area (Republic of Kenya, 2017).

Target Population

The study targeted Christians residing in Milimani Estate in Kitengela Town. There are many churches in the study area. The churches within close proximity to Milimani Estate include: Redeemed Gospel Church, Jesus the Potter Church, Seventh Day Adventist Kitengela, PCEA Kitengela Township Church, World Gospel Churches, Kitengela, Deliverance Church Kitengela and Hope Worship Center. These churches represent the worship centers where Christian residents of Milimani Estate participate in their respective religious communities. Christians who reside in Milimani Estate and attend these churches constituted the main target population. Based on population data by the Kenya National Bureau of Statistics (2019), it is estimated that the adult Christian population residing in the study area is 1200residents distributed by gender as shown in Table 3.1.

Table 3.1: *Population distribution*

Strata	Target Population
Male residents	588
Female residents	612
Total	1,200

Source: Kenya National Bureau of Statistics (2019)

Sampling Methods

Sampling method used was mainly stratified sampling. According to Denscombe (2014), stratified sampling is whereby the sample in each stratum is chosen in proportion to their population size. This ensured representation from all population sub-groups. This technique was used to select a representative sample from male and female residents of Milimani Estate. Simple random sampling was applied within each gender to select research participants.

Sample Size

A sample is a section of subjects drawn from a population (Denscombe, 2014). Mugenda and Mugenda (2014) propose the use of 10 to 30 percent as an adequate representation of the target population. Therefore, the sample size was 120 respondents which represented 10 percent of the targeted population. The respondents were residents of Milimani Estate who attend the churches within close proximity to the estate. This was distributed equally by gender in order to achieve fair general representation in the study. Table 3.2 presents the sample size.

Table 3.2: *Sample size distribution*

Strata	Population size	Sample size	Percent
Male	588	61	51%

Female	612	59	49%
Total	1,200	120	100%

Type of Data

Data types typically manifest in two forms: qualitative and quantitative. Qualitative data refers to data that assumes non-numeric form and generally is of a textual nature. In contrast, quantitative data lends itself to the use of numbers and counts as a way of data summarization (Cresswell, 2014). Both types of data were collected using a structured questionnaire. The data was collected in month of March of the year 2021.

Data Collection Methods

Data was collected using questionnaire survey method as shown in Appendix II. Questionnaire is defined as "a predetermined set of questions and the respondents are required to answer them as instructed to respond" (Mishra, 2016, p.60). Typically, questionnaires comprise a mix of both closed-ended and open-ended questions. Closed ended questions have a set of fixed categories of responses or multiple-choice options from which the respondent is required to choose. With open-ended questions, the respondent is free to write the answers as they deem appropriate as there are no fixed alternatives. This method was used because it is economical, easy to administer, and provides respondents with easy time to respond. Besides, standardization of scoring makes it easy to analyze and interpret the data (Mishra, 2016).

In this study, the questionnaire instrument was designed and organized in sections in line with the research questions. The first section comprised of demographic data of respondents such as age, gender, salvation status, and church attendance.

The second section comprised a battery of questions related to psychological wellbeing factors. Specifically, the World Health Organization (WHO) 5 Psychological wellbeing Index was used (WHO, 1998). Developed by WHO in the 1990s, the 5-item index assessed subjective psychological wellbeing of individuals irrespective of their social or cultural backgrounds (Topp et al., 2015). It has been tested and considered valid and reliable to assess psychological wellbeing among different population groups and considered effective as a screening tool for psychological wellbeing (Pracheth, 2015).

The third section comprised Likert scales seeking respondents' views and practices related to prayer, fasting, fellowship and meditation. The researcher adapted Spiritual Practices questionnaire developed by Bussing (2015). This is a generic instrument designed to measure respondents' engagement with a range of organized and private religious practices. It has 25 items that relate to the practice of prayer, meditation, meditation, fellowship and fasting. These were measured on a 4-point scale from 1=rarely to 4= always.

Qualitative data was collected using the fourth section of the questionnaire which complemented the first three sections with open-ended questions where respondents freely gave their opinion on the relationship between Christian religion and their psychological wellbeing. The same respondents answered the qualitative sections as this allowed for a more open, honest, flexible and free-flowing approach to data collection since respondents expressed their views in their own words (Morris, 2015). Through probing, the goal of the researcher was to extract as much information as possible from the research participants. Probing is a technique whereby the researcher delves more deeply into a response to discover possible reasons for a particular response (Hair, 2015).

Instrument Validity

Instrument validity refers to the concern with replicability of a study and this can be achieved through using the appropriate instrument and sampling (Cohen et al., 2013). It is an assurance that the instrument used measures what it purports to measure. Validity of the content of the instrument was ensured by using a battery of statements to measure each thematic area of religious practice. This was corroborated with rich verbatim texts at the end of each section in line with Noble and Smith (2015).The questionnaire tool waspilot-tested on 10 Christians in Athi River town in neighboring Machakos County. This was done to determine the consistency, accuracy and clarity of the questions. The responses were examined to inform modification and refinement of the final tool before collecting the actual data. Validity of the content of the interview schedule was ascertained by the reviews made by experts in marriage and family therapy research. Based on the feedback, unclear questions were revised and complex questions simplified while irrelevant questions discarded as recommended by Zohrabi (2013).

Reliability of the Research Instrument

Instrument reliability is concerned with the need for the research instrument used during data collection to measure what it claims to measure. The reliability of the questionnaire was determined by statistical analysis of data obtained through pilot tests (Melynk, 2012). This analysis was performed to determine the inter-correlation between items by computing Cronbach's alpha (Cooper & Schindler, 2013). The instrument was considered reliable when an alpha coefficient of 0.6 or above is obtained as this represents an acceptable level of reliability (Ursachi et al., 2015). The use of the Statistical Package for the Social Sciences (SPSS) was made for this purpose. Table 3.3 shows the reliability statistics. The table shows that Cronbach alpha coefficients for psychological wellbeing (α=.727, N=5), prayer (α=.659, N=4), meditation (α=.662, N=4), fellowship (α=.711, N=4) and fasting

(α=.726, N=4) met the threshold of acceptability. This is an indication that the instrument was reliable.

Table 3.3 Reliability statistics

Variable	Cronbach's Alpha	N of items
Psychological wellbeing	.727	5
Prayer	.659	4
Meditation	.662	4
Fellowship	.711	4
Fasting	726	4

Reliability of qualitative data was ensured by verifying the accuracy of the data and comparing the same to theory and past studies (Leung, 2015). Reliability of the qualitative sections was concerned with the dependability and consistency of the data collected. According to Zohrabi (2013), this can be achieved by collecting data from varied sources and giving a detailed explanation of the research procedure.

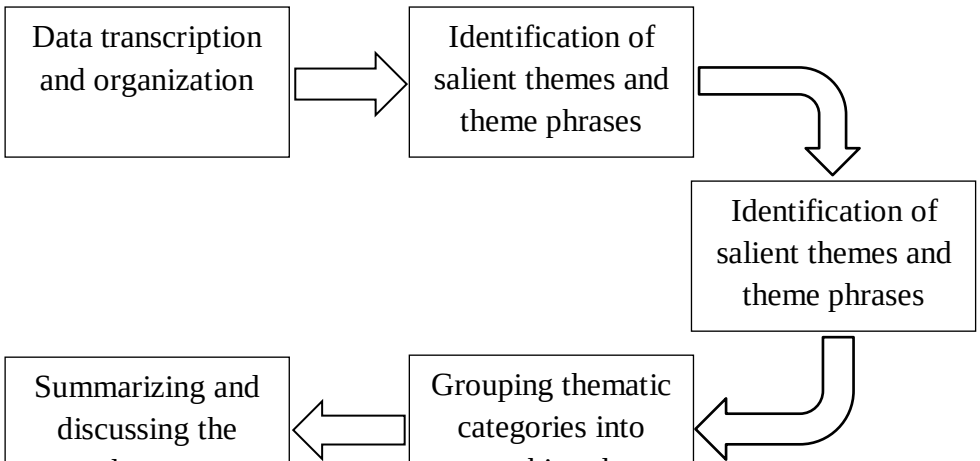
Data Analysis Plan

The analysis of questionnaire data entailed the generation of descriptive statistics such as mean, percentage frequencies and standard deviation. The relationship between the study variables were tested using correlation and regression technique. The procedure for analyzing questionnaire data entailed coding, entering and processing the data manually or using the Excel sheet. This process encompassed checking for data quality and transforming the data into required form before commencing data analysis. The data was explored using descriptive analysis that entailed the generation of frequencies, mean scores and composite scores. Correlation and regression techniques were then applied to test the significance of the influence of religion on psychological wellbeing. Statistical significance was accepted at $p<.05$. This means that the probability is one in twenty that the relationship obtained occurred by chance (Greenland et al., 2016).

In qualitative data analysis, researchers immerse themselves in the data by reading and digesting it so that they can make sense of the data in whole and thereby draw insights from the data (Azunga, 2018). Thematic analysis was used to analyze the qualitative data. Gibson (2017, p. 65) explains that the procedure typically encompasses "coding techniques for finding and marking the underlying ideas in the data, grouping similar kinds of information together in categories, and relating different ideas and themes to one another". Qualitative data was analyzed by generating themes and subthemes from the open-ended questions. Verbatim excerpts were used to reinforce the analysis and interpretation of qualitative data.

In this study, the researcher used the five-step technique proposed by Gibson (2017). This meant first organizing the data by overall theme, information sought and actual questions. The next step involved finding and organizing ideas and concepts by identifying salient themes and theme phrases. The third step entailed collapsing different thematic categories into one overarching theme. Once this was done, the data from open-ended sections were triangulated with closed-ended sections in order to confirm their veracity. The final step involved explaining the findings by summarizing the themes then comparing them to past literature. These steps were followed as demonstrated in Figure 3.1.

Figure 3.1 *Thematic Analysis Process Flow Diagram*



Ethical Considerations

Ethical considerations are deliberations the researcher considers in order to protect the dignity of the research subjects and ensure that the research adheres to all established rules and guidelines that guide the conduct of practitioners in the field of research (Akaranga & Makau, 2016). In this study, a number of ethical issues were considered. The researcher followed the required legal and procedural compliances set by the university and by the Government of Kenya. This includes obtaining ethical clearance from the Pan Africa Christian University's Research Ethics Review Committee and introduction letter to collect data, applying for and securing a research permit from the National Commission for Science, Technology and Innovation (NACOSTI) and a letter of authorization to collect data in Kajiado County from the County Director of Education.

Subsequently, the researcher obtained informed consent from the respondents before administering the research as per Appendix I. The researcher ensured anonymous participation of the respondents by advising them not to reveal their identity anywhere on the instrument. Respondents were accorded the right to withdraw their participation in the study at any point during the course of the data collection without suffering consequences. The researcher also adhered to ethical requirements such as upholding the dignity of the research participants, engaging with them respectfully and being transparent about the aims of the study. Once the data was collected, security of the data was ensured by keeping the raw data under lock and key and any data converted in electronic form assigned passwords. These were destroyed completely upon completion of the research.

Chapter Summary

This chapter has detailed the steps that were taken to implement the study. The research design has been described as well as the population and sampling design. Further, the chapter has discussed the types of data to be collected, the data collection methods, procedures followed and data analysis techniques applied. In addition, the ethical compliance has been described. In the subsequent chapters, the data collected is analyzed, interpreted and discussed. These formed the basis for the conclusions and recommendations made in the final chapter.

CHAPTER FOUR: RESULTS AND DISCUSSIONS

Introduction

This chapter analyzes the findings of the study and presents the results. The chapter is divided into three main sections. The first section analyzes the response rate and presents descriptive data on demographic characteristics of the respondents. The second section presents quantitative analysis which comprises analyses of the varying manifestations of psychological wellbeing in Kenyan population, results on the relationship between religious practices and psychological wellbeing and the predictors of religious practices on psychological wellbeing. The third section presents thematic analysis of qualitative data obtained from the open-ended sections.

Response Rate and Demographic Characteristics

Response rate

A total of 120 questionnaires were administered to the respondents out of which 76 questionnaires were successfully completed. The response rate is presented in Table 4.1. The table shows that a response rate of 63.3% was obtained. This response rate suggests that the obtained data was adequate for data analysis. This finding is consistent with the guideline provided by Finchman (2008) who offered that response rates exceeding 60% are very good for analysis. The non-successful cases mainly cited lack of time as the reason for declining to participate in the study. According to Fraenkel et al. (2012), a recommended minimum number of subjects is N=50 for a study involving correlational analysis. Also, Jenkins and Quintana-Ascencio (2020) recommend that research based on regressions use sample sizes of N$\geq$ 25. On this basis, sample size of N=76 obtained in this study was adequate.

Table 4.1*Response Rate*

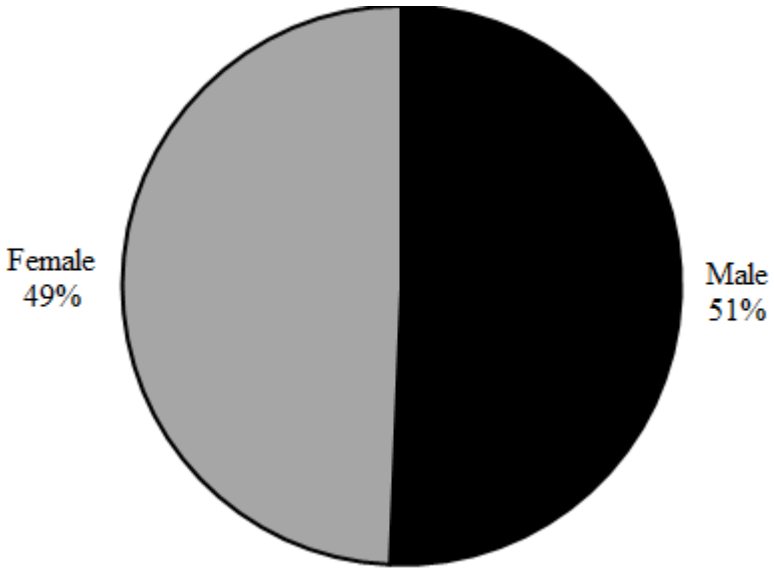
Category	Frequency	Percent

Successful cases	76	63.3%
Non-successful cases	44	32.7%
Total cases	120	100.0%

Gender of Respondents

The distribution of respondents by gender is presented in Figure 4.1. The figure shows that male respondents were 50.7% while female respondents accounted for 49.3% of the research participants. The results suggest that there was adequate gender representation in the study. This distribution mirrors the population distribution in Kenya whereby the ratio of male to female population is almost equal (KNBS, 2019).

Figure 4.1 *Distribution of respondents by gender*

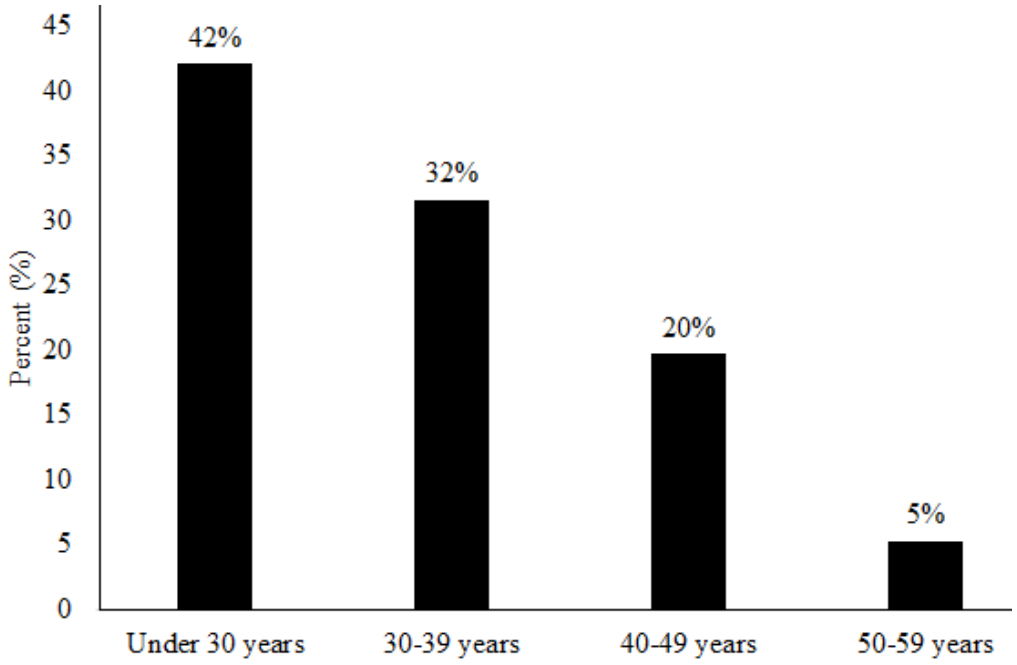


Age of Respondents

The distribution of respondents by age is presented in Figure 4.2. The figure shows that respondents under the age of 30 accounted for the majority of the participants at 42%, followed by 32% in the age bracket of 30-39 years, 20% in the age bracket of 40-49 years and 5% in the age bracket of 50-59 years. The distribution suggests that majority of the research participants were the youth, which means that the views of the respondents were

dominated by youthful perspective. This finding is in line with the population structure of Kenya which is dominated by the youth as per the year 2019 national census study (KNBS, 2019).

Figure 4.2 Distribution of Respondents by Age



Level of Education of Respondents

The distribution of respondents by their highest level of education is presented in Figure 4.3. The results in figure 4.1 indicate that respondents with university level of education were the majority at 36%, followed by college education at 29% and secondary level at 28%. Some 8% of the respondents attained primary level of education. The results suggest that most of the respondents had post-secondary level of education, meaning that their literacy level and by extension, level of understanding of religious concepts was potentially high. This implies that respondents were able to understand

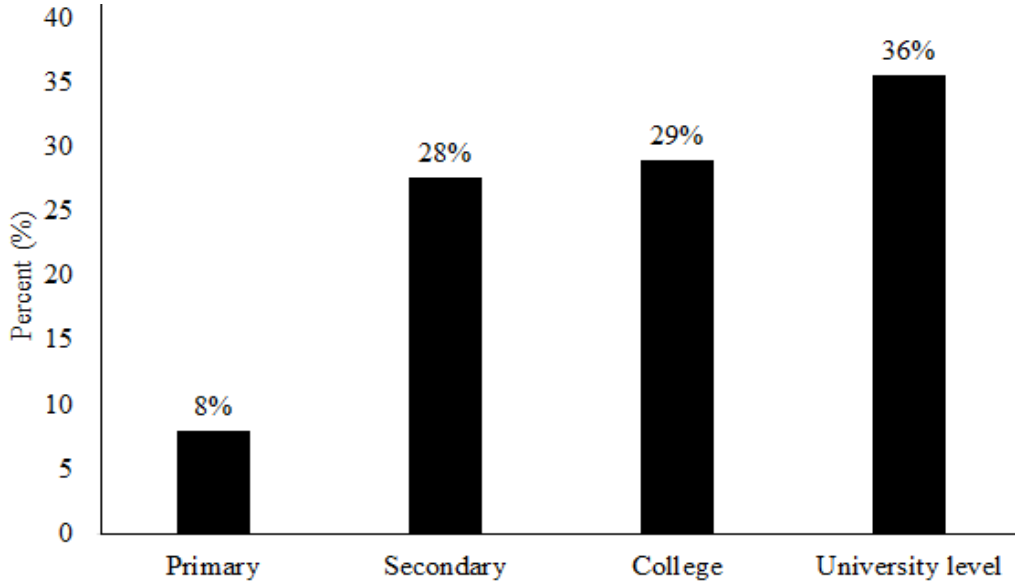
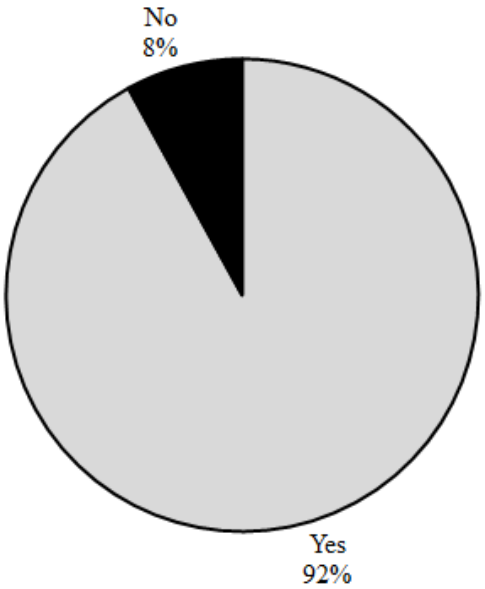


Figure 4.3 *Distribution of Respondents by Highest Level of Education*

Salvation Status

Respondents were asked whether they were born again or not. The distribution is presented in Figure 4.4.The figure shows that 92% of the respondents said 'yes' and 8% said 'no'. Thus, majority of the respondents reported that they were born again. This suggests that most of the respondents recognized Jesus Christ as their personal Lord and Savior.

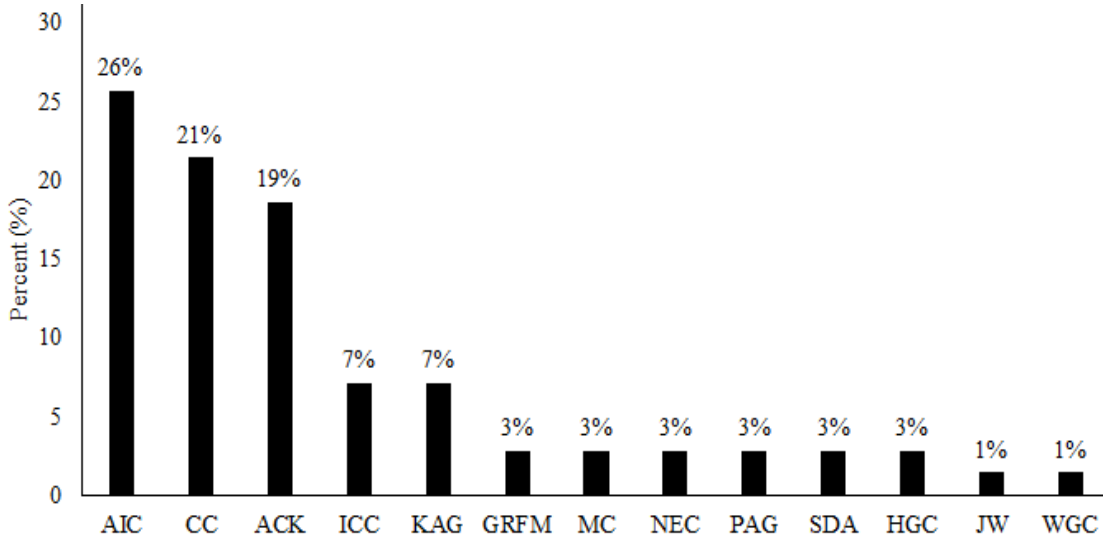
Figure 4.4*Whether Respondents are Born Again*



Respondents' Church

Respondents were asked to indicate the church they attended in Kitengela Town. The findings are shown in figure 4.5. The figure shows that most of the respondents attended AIC (26%), CC (21%) or ACK (19%). Some 7% of the respondents attended ICC and KAG each, respectively. The remaining respondents were distributed equally across six churches except JW and WGC which were least attended at 1% each, respectively. The results suggest that three churches accounted for two-thirds of the sample: Africa Inland Church, Catholic Church and Anglican Church of Kenya. It can be deduced that the religious practices of these three churches potentially informed a large share of the responses obtained from this study which, in turn, might have played a role in their psychological wellbeing.

Figure 4.5*Respondent's Church*



Quantitative Analysis

This section presents, interprets and discusses quantitative findings for each of the specific objectives. These were: to establish the varying manifestations of psychological wellbeing in Kenyan population, to evaluate the relationship between religious practices and psychological wellbeing, and; to determine the predictors of religious practices on psychological wellbeing.

Manifestations of Psychological wellbeing in Kenyan Population

The first objective of the study was to establish the varying manifestations of psychological wellbeing in Kenyan population. This section presents the minimum score (Min), maximum score (Max), mean score (M) and standard deviation score (SD) of various psychological wellbeing items on a 6-point scale from 0 to 5 regarding how respondents felt in the last two weeks.

Table 4.2 *Descriptive Analysis of Various Manifestations of Psychological Wellbeing*

Item	N	Min	Max	M	SD
I have felt active and vigorous	76	1	5	3.15	1.183
My daily life has been filled with things that interest me	76	0	5	3.09	1.482
I woke up feeling fresh and rested	76	0	5	3.07	1.417
I have felt cheerful in good spirit	76	0	5	3.05	1.344
I have felt calm and relaxed	76	0	5	2.75	1.489
Psychological wellbeing composite mean score	76	1	5	3.03	0.943

Table 4.2 shows that with regards to the statement; “I have felt active and vigorous”, the mean score was moderately high (M=3.25, SD=1.183, N=76). This suggests that respondents’ psychological wellbeing was average in terms of feeling active and vigorous. The table also shows that as pertains to daily life being filled with interesting things, a moderate mean score was computed on a 6-point scale (M=3.09, SD=1.482, N=76) which means that the psychological wellbeing of respondents was average on this respect. Concerning whether the respondents felt cheerful in good spirit in the last two weeks, a moderate mean score was realized on a 6-point scale M=3.05, SD=3.05, N=76). This implies that respondents’ psychological wellbeing was measured by cheerfulness and good spirit was average (M=3.05, SD=1.344, N=76). As pertains whether respondents woke up feeling fresh and rested in the last two weeks, the mean score on a 6-point scale was moderate (M=3.07,

SD=1.417, N=76). This means that respondents' psychological wellbeing was average in terms of feeling fresh and rested. Regarding whether respondents felt calm and relaxed in the last two weeks, the mean score obtained was low (M=2.75, SD=1.489, N=76). This suggests that the psychological wellbeing of respondents was below average in terms of feelings of calmness and relaxation. On aggregate, the psychological wellbeing composite mean score on a scale of 0 to 6 moderate (M=3.03, SD=0.943, N=76). This finding implies that respondents had average psychological wellbeing, which means that their quality of psychological wellbeing was moderate.

Religious Practices and Psychological Wellbeing

The second objective of the study was to determine the relationship between religious practices and psychological wellbeing. This section presents both descriptive findings on different religious practices and correlation analysis between religious practices and psychological wellbeing.

Descriptive Analysis of Religious Practices

This sub-section presents composite scores for prayer, meditation, fellowship and fasting items on a 4-point scale from 1=rarely to 4=always. The scores include the minimum score (Min), maximum score (Max), mean score (M) and standard deviation score (SD). The descriptive statistics are presented in Table 4.3.

Table 4.3*Descriptive Statistics of Religious Practices*

	N	Min	Max	M	SD
Prayer	76	1.00	4.00	2.82	.704
Meditation	76	1.00	4.00	2.58	.700
Fellowship	76	1.00	4.00	2.48	.852
Fasting	76	1.00	4.00	2.20	.760

Table 4.3 shows that prayer was the religious practice most common among the respondents (M=2.82, SD=.704, N=76) followed by meditation (M=2.58, SD=.700, N=76), fellowship (M=2.48, SD=.852, N=76) and lastly, fasting (M=2.20, SD=.760, N=760). The scores suggest that the level of religiosity and spirituality of the respondents was above average.

Correlation between Religious Practices and Psychological wellbeing

Correlation analysis was performed on the composite measure of psychological wellbeing and religious practices composite scores. Statistical significance was accepted at $p<.05$. Table 4.4 shows the output.

Table 4.4*Inter-correlation between Psychological Wellbeing and Religious Practices*

		1	2	3	4	5
1 Psychological wellbeing	Pearson Correlation	1				
	Sig. (2-tailed)					
	N	76				
2 Prayer	Pearson Correlation	.302**	1			
	Sig. (2-tailed)	.010				
	N	76	76			
3 Meditation	Pearson Correlation	.326**	.593**	1		
	Sig. (2-tailed)	.005	.000			
	N	76	76	76		
4 Fellowship	Pearson Correlation	.276*	.470**	.565**	1	
	Sig. (2-tailed)	.020	.000	.000		
	N	76	76	76	76	
5 Fasting	Pearson Correlation	.190	.525**	.422**	.391**	1
	Sig. (2-tailed)	.118	.000	.000	.001	
	N	76	76	76	76	76

**. Correlation is significant at the 0.01 level (2-tailed).
*. Correlation is significant at the 0.05 level (2-tailed).

Table 4.4indicates that all the religious practices were positively correlated with each other, which means that as respondents' increased one practice, the other practices also increased. In terms of psychological wellbeing, the table shows that there was a statistically significant positive correlation between psychological wellbeing scores and prayer scores (r=.302, p<.05, N=76). This implies that psychological wellbeing scores increased with more

prayers. This finding concurs with the results of a study by Kiyani et al. (2011) among college students which reported that prayerful students attained higher psychological wellbeing scores than their less prayerful counterparts.

The table also shows that psychological wellbeing was also positively and significantly correlated meditation (r=.326, p<.05, N=76). It can be inferred from this finding that the more respondents meditated, the higher the quality of their psychological wellbeing. This is consistent with the observation by Newman and Graham (2018) which linked meditation to increased well-being.

Table 4.4 shows similarly that the correlation between psychological wellbeing and fellowship was positive and statistically significant (r=.276, p<.05, N=76). This finding also supports Newman and Graham's (2018) argument that fellowships are important ritualistic experiences that have important wellbeing implications.

Table 4.4 however reveals that psychological wellbeing was not significantly correlated to fasting (r=.190, p>.05, N=76). This suggests that the positive relationship observed in the coefficient occurred out of chance alone. It can be inferred from this finding that there was no significant increase in psychological wellbeing with increased fasting. This finding is in line with a study by Mousavi (2014) among a Middle Eastern population which reported that fasting did not significantly influence psychological wellbeing. Similarly, it agrees with two studies done in Africa by Cater (2016) and Waite (2017) which found that fasting and psychological wellbeing was insignificantly correlated.

Predictors of Religious Practices on Psychological Wellbeing

The third objective was to determine the predictors of religious practices on psychological wellbeing. In order to achieve this objective, psychological wellbeing composite score was regressed on the three religious practices with statistically significant

correlation coefficients namely: prayer, meditation and fellowship and the output presented in Table 4.5.

Table 4.5*Regression of Psychological Wellbeing on Individual Religious Practices*

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.364[a]	.133	.094	.90061

a. Predictors: (Constant), Fellowship, Prayer, Meditation

ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	8.309	3	2.770	3.415	.022[b]
	Residual	54.343	73	.811		
	Total	62.653	76			

a. Dependent Variable: Psychological wellbeing
b. Predictors: (Constant), Fellowship, Prayer, Meditation

Coefficients[a]

		Unstandardized Coefficients		Standardized Coefficients		
Model		B	Std. Error	Beta	t	Sig.
1	(Constant)	1.531	.495		3.094	.003
	Prayer	.205	.194	.150	1.056	.295
	Meditation	.253	.208	.185	1.217	.228
	Fellowship	.109	.157	.099	.691	.492

a. Dependent Variable: Psychological wellbeing

Table 4.6 shows that religious practices explained 13.3% of the variance in psychological wellbeing to a statistically significant degree (R^2=.133, p<.05). This finding supports the theoretical notion of the bio-psycho-socio-spiritual model that recognizes the contribution of spiritual dimensions of wellbeing to overall health. The finding contradicts the results of empirical studies by Cater (2016) and Waite (2017) which reported non-statistically significant explanatory power of religious practices on psychological wellbeing. This signals that there may be underlying value differences between the western world and Kenya. However, the individual predictive power of prayer (B=.205, p>.05), meditation (B=.253, p>.05) and fellowship (B=.109, p>.05) were not statistically significant. This finding suggests that the religious practices are not effective in isolation. This finding is in accord with a study by Vitorino (2018) which investigated how different levels of influence

of spirituality and religiousness on psychological wellbeing problems and found that having higher levels of both spirituality and religiousness were more correlated to better outcomes than having just one of them or none of them. The joint effect of religious practices on psychological wellbeing was further analyzed by regressing psychological wellbeing on the combined scores of the four religious practices. The output is presented in Table 4.6.

Table 4.6 Regression of Psychological Wellbeing on Combined Religious Practices

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.358[a]	.128	.116	.87854

a. Predictors: (Constant), Religious Practices

ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	8.039	1	8.039	10.415	.002[b]
	Residual	54.800	75	.772		
	Total	62.839	76			

a. Dependent Variable: Psychological wellbeing

b. Predictors: (Constant), Religious Practices

Coefficients[a]

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	T	Sig.
1	(Constant)	1.625	.452		3.593	.001
	Religious Practices	.559	.173	.358	3.227	.002

a. Dependent Variable: Psychological wellbeing

Table 4.6 shows that the joint effect of prayer, meditation, fellowship and fasting had statistically significant explanatory power on psychological wellbeing; R^2=.128, p<.05, F(1) = 10.415. An examination of the coefficients reveals that one unit increase in the four religious practices was associated with 0.559 unit improvement in psychological wellbeing (B=.559, p=.022). The ANOVA output however suggests that 87.2% of the variance in psychological wellbeing was not explained by religious practices. Thus, there may be other factors that are at play, which explained more variation in psychological wellbeing than

religion/spirituality. A visual presentation of the joint effect of religious practices on psychological wellbeing is presented in figure 4.6.

Figure 4.6*Scatter-plot of Psychological Wellbeing on Religious Practices*

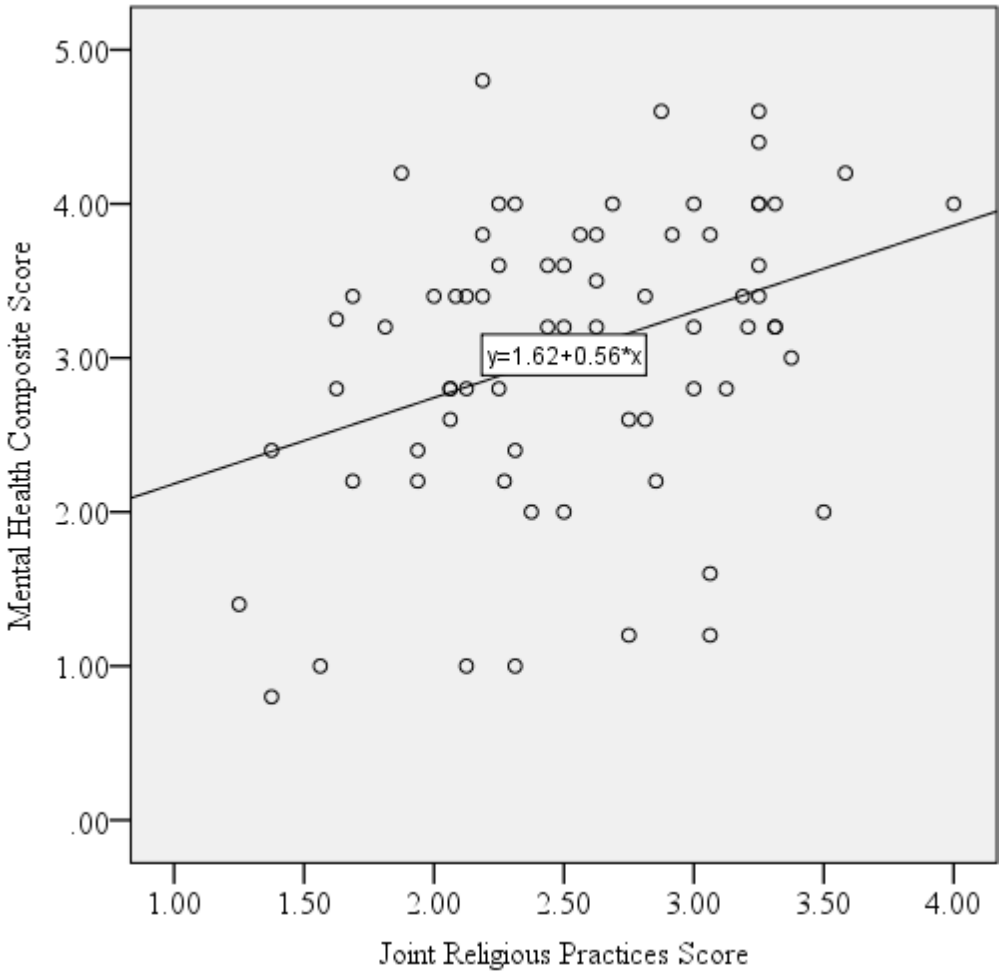


Figure 4.6 shows that psychological wellbeing increased with joint increase in religious practices (prayer, meditation, fellowship and fasting). In keeping with the Extended Bio-psycho-social Framework, the finding supports the idea that psychological and social factors interact in a complex manner in psychological wellbeing. However, most of the data-points were scattered away from the line of best fit, suggesting that the association between religious practices and psychological wellbeing was not strong.

Qualitative Analysis

This section analyzes the findings from open-ended questions in an attempt to provide an explanation of the relationship between religious practices and psychological wellbeing. The process involved marking the underlying ideas, grouping similar ideas into categories and drawing out the emergent patterns and themes from the data. This process yielded two overarching themes: sense of belonging/security and emotional regulation. The theme of sense of belonging/security had two sub-themes: connectedness to God and connectedness to fellow man. The theme of emotional regulation had five sub-themes: release from stress and anxiety, source of strength and courage, source of encouragement and hope, source of meaning in life, and psychological clarity. The transcribed data from which the themes and sub-themes were extracted are presented in Appendix C.

Sense of Belonging and Security

The theme of sense of belonging and security was the most salient thematic mechanism that explained the influence of religious practices on psychological wellbeing of the respondents. Underpinning this theme were the sub-themes of connectedness with God and man. For instance, one of the respondents – R10, while explaining how prayer has impacted on his psychological wellbeing, reflected thus; “It has helped me get closer to God and to know that he is always with me”. This finding aligns with the perspective of Singh and Madan (2017) that a healthy spiritual identity involves feeling connected to God’s love. The finding thus puts a sense of connection with God at the center of psychological wellbeing, with that sense of connection accruing from a fellowship with God through prayer serving as its mechanism.

The expressed sense of connectedness with the almighty potentially conferred in the respondents the sense of security and safety that they felt because they know a higher power is present to come to their rescue in times of trouble. This finding is in line with an empirical

review by Rusu and Turluc (2011) who explicated the affective dimension of psychological wellbeing anchored on the notion that spirituality breeds, among others, care and security. Another respondent – R19- was even more apt, thus: "I feel covered, protected whenever I speak to God through prayer during my low moments". This is an indication that the respondent felt safe in God's presence, meaning that respondents derived a sense of security from feeling connected with God. The finding is consistent with the results of a study by Issaco et al. (2015) who examined how priests' relationship with God influenced their psychological health and found that participants described their relationship with God as central to their health and contributed to their sense of connection and support.

Respondents also felt a sense of belonging which is an important ingredient for psychological wellbeing. One respondent – R21 qualified thus; "It gives me a sense of belonging knowing that God listening and he is always available". This sense of connectedness was not only derived from prayer but also from fellowship with fellow man. It conferred a sense of togetherness, belonging and acceptance. This finding is in tandem with the idea that people have a high psychological wellbeing when they evaluate their interpersonal relationships as satisfactory or high quality (Garcia-Alandete et al., 2017).For instance, R72 had the following to say; "Through fellowship my spiritual bonds with other people has really grown strong. Some of the people have really motivated me spiritually and mentally since…" This finding affirms the idea put forth by Rusu and Turluc (2011) that fellowship is a form of spiritual coping where one gets a sense of spiritual connection with others and enjoys higher psychological wellbeing as a result.

Emotional Regulation

Emotional regulation was another salient theme that was characterized by five related sub-themes whereby release from stress was the most recurrent. This finding suggests that stress release was one of the main mechanisms which explained the relationship between

religion and psychological wellbeing. This is in line with Ellison et al.'s study (2012) which examined the relationship between attachment to God and psychological distress among Presbyterian elders and lay persons and found that a secure attachment to God was associated with decreased psychological distress and buffered against the deleterious effects of stressful life events. In the present study, this manifested in various ways including reduction of worry, and an increase in relaxation, emotional release, sense of peace and calmness, dispassion of pressure, psychological relief, and psychological rest and healing, and elevation of happiness. Through mainly prayer but also through meditation and fellowship, respondents were able to regulate their emotions which kept them healthy psychologically. This finding agrees with the study by Boelens et al. (2012) which examined the effect of prayer on depression and anxiety and found a significant reduction in depression and anxiety. For instance, one respondent had the following to say;

> Prayer has helped to stay calmer in responses, reaction etc. before I was always reactive and didn't really think about the outcome of my reaction (*R29*).

What the foregoing means is that prayer had a calming effect on the temperament of an individual and this potentially positively impacted on their psychological wellbeing. This finding agrees with multiple scholarly literature sources (South & McDowell, 2018; Voutilainen & Peräkylä, 2014) that identify the therapeutic effects of prayer as reduced anxiety through its calming effect on the individual. That is, prayer made individuals less agitated about issues of life, thereby acting as a protective factor against triggers of negative energy that would have adversely disrupted their psychological state. This was further corroborated by the viewpoints of another respondent thus;

> Prayer has really had a great impact in my psychological wellbeing since I have perfected my communication with God. I have been able to surrender my problems and burdens to God therefore been at peace with my mind and my heart (*R30*).

What this respondent suggests is that prayer is a means of connecting with a deity, and that this connection facilitates psychological release. Psychologically, God appears to perform the function of a social support system that individuals turn to when overwhelmed by issues of life. This is affirmed in scripture which states that God is not only a refuge and strength but an ever present help in times of trouble (Cf. Psalm 46:1). The implication of this finding is that the sense of belonging or social wellbeing that accrue from the perceived connectedness to God affects emotional and psychological wellbeing facets of psychological wellbeing, thereby underscoring the interrelated and mutually reinforcing nature of psychological wellbeing facets as theorized by Dyakova et al. (2017). This was particularly apparent in the following verbatim excerpt;

> Prayer is talking to God. This has impacted me positively; when I pray I feel less pressured, relaxed and of good mood. I feel less depressed and it boosts my morale in life to keep going in daily activities (*R33*).

This finding also reveals another function of prayer, namely, a safe space for self-expression, with God acting as a confidante and an empathic listener. As a result, the internal tension that individuals feel dissipates and a sense of restoration is experienced. In line with this revelation, another value extracted from prayer was psychological reorientation as suggested in the following verbatim example;

> Meditating on the word of God and his goodness and faithfulness helps me to overcome anxiety and worry (*R55*).

The foregoing finding suggests that prayer fosters meditation on scripture which redirects individuals' thoughts away from negative feelings and cultivates in them a positive psychological attitude by focusing on the brighter side of life. In this way, the thoughts that way down oneself are neutralized. This means that prayer activates emotional regulation

which, according to McClelland et al. (2018), is outwardly manifested through reframing one's circumstance in a positive light. In the present study, this reframing is accrues from meditating on God's word. This finding signifies the importance of knowledge of God's word, since one can only meditate on God's word if they know it.

Another sub-theme observable from the qualitative responses was hope and encouragement. Some participants indicated that they found comfort and solace in prayer while others remained sober, joyful and hopeful after getting assurance of friends and confidants about their life stressors. Through fellowship with other brethren, respondents were able to share their burdens and concerns, thus acting as emotional release outlet. This finding is resonant to the results of a study by Ismail and Desmukh (2012) which explored the link between fellowship and psychological wellbeingwithin a Pakistani population. Their results revealed a strong positive relationship between fellowship different facets of psychological well-being.

The foregoing is demonstrated in the present study, for instance, in a comment by R49 who had the following to say; "Fellowship with like-minded people and persons with similar goals and sharing our experiences, history and life stories encourages me to that I am not alone. It gives us hope knowing if God come through for one person he can come through for me". Through such sharing, respondents are also able to put their challenges into perspective, which make them cope effectively with problems. Further evidence of the same is reflected in the following verbatim comments:

> "I have been encouraged especially when am about to lose hope and has strengthened my faith" (R19).

This finding means that through fellowship with fellow believers, individuals are re-energized because they get a chance to hear of the testimonies of victories that others have

experienced through God, which gives them hope that they too shall overcome and fortifies them to keep the faith. This was even more vividly evidenced in the following viewpoint;

> "Fellowship with other brethren helps me share burdens and concerns. I get refreshed, connected and encouraged. Also gives me a sense of belonging and takes away loneliness" (R52).

The finding suggests that through fellowship, individuals also get an opportunity to learn that they are not alone in the battles of life and this knowledge fosters self-encouragement. Further, the finding demonstrates that individuals find a sense of belonging in fellowship, which has a positive psychological effect in the sense that feelings of loneliness that would make one vulnerable to worry and other anxieties of life are kept at bay. Individuals know that they have a refuge in the community of believers in times of distress.

> "Sharing and hearing from God encourage me by knowing my challenges that are unique to me" (R75).

Religious practices also aroused in some respondents forgiveness to difficult issues and created in them a sense of love for others. This finding agrees with the viewpoint of Harris et al. (2015) that forgiveness has a healing and restorative power as it involves reappraisals of circumstances surrounding the issues of life.

A third sub-theme was strength and encouragement. Through meditation and prayer, fellowship and fasting, respondents attained boldness to overcome life challenges as well as any fears that they might have had. They received courage to face everyday life challenges and were able to maintain a positive perspective. As a result, they were able to face adversity. This is in keeping with the argument that seeking spiritual support from God is beneficial in terms of less anxiety and depression and more positive perspective (Hefti, 2011). This notion of strength and encouragement from religious practices was evident in the qualitative data gathered as observable in the following verbatim example:

> "It has been a pillar in strengthening my mental capacity of tackling issues and accepting things which happens in life without being so judgmental" (R44).

This finding suggests that through religious practices such as prayer, an individual's mental frame is positioned to problem-solve. It also suggests that individuals are able to put their predicaments into perspective, hence making way for their capacity to adjust to life's happenstances. A further demonstration of this notion is found in the perspective of one respondent thus;

> "Prayer gives me positive energy. It enables me to trust in God's love, power, wisdom when faced with life's challenges and inevitable demands. Helps one to develop an attitude of thankfulness, acceptance and understanding" (R40).

This finding means that through the religious practice of prayer, individuals draw positive energy, which puts them in the right state of mind and directs them to respond to their environment in more appropriate and productive ways. The pattern of positive energy was also apparent in subsequent viewpoints as expressed by another respondent thus;

> "When I read the Bible it shows me the love of God and also gives me the strength to face adversity" (R56).

The foregoing finding suggests that religious practices have a strengthening effect on the self, which boosts one's resilience to difficult life situations. It is also implied that the belief that one has God on his or her side emboldens one to face adversity courageously knowing that because of the love of God, victory is in store for them.

The fourth sub-theme pertained to religion as a source of meaning in life. Through the religious practices of prayer, meditation, fasting and fellowship, respondents got a better understanding of the reasons to live, reflected on the true meaning of life, had a proper meaning of things, understood the deep meaning of scripture and engaged in virtuous deeds from which made their lives meaningful. This is in keeping with the idea that when one believes that their life matter and they have a sense of purpose, this is an indication of

positive psychological wellbeing (Garcia-Alendete et al., 2017). The study agrees with Newman and Graham (2018) who posit that psychological wellbeing as a construct is associated with purpose and meaning in life. Consequently, respondents were able to regulate their emotions in a way that enabled them to cope with demands of life. This association of the concept of meaning in life with psychological wellbeing resonated throughout most of the responses as exemplified in the following verbatim excerpt:

> "It allows me to stop focusing on myself (issues, pressure) and listen to others and being in their presence is a source of joy" (*R23*).

This finding means that individuals derive a sense of usefulness in the lives of others despite their own predicament, with positive implications on their own psychological health as it leads to the activation of delight. This finding is in keeping with Vinayak and Judge's (2018) conceptualization of psychological wellbeing as a function of sense of purpose in life and positive relation with others. Given Singh and Madan's (2017) postulation that a healthy spiritual identity involves having meaning and purpose in life, an argument can well be fronted that there exists an intricate intertwinement between spirituality and psychological wellbeing. Giving the example of fasting, one respondent captured the theme of meaning so explicitly by commenting thus;

> "Fasting has helped me to remember the less fortunes in our societies and the challenges they go through. It has helped me understand that the spiritual food is more important than the physical food" (*R72*).

The fifth sub-theme that was identifiable from the qualitative data was mental clarity. On this respect, respondents opined that religious practices of prayer and meditation as well as fellowship and fasting, in varying degrees, enabled them to: have a clearer view of issues and think properly, stabilized and control their emotions, established their thinking and influenced their speech and temperament. This means that through prayer, fasting, meditation

and fellowship, respondents were able to regulate their emotions in a manner that helped them maintain emotional and mental stability. The results underscore the practice of spiritual discipline in human life as put forward by Foster (2012). These were apparent in the following verbatim example:

> "It has helped me to have a better focus and concentration; it has as well improved my self-esteem and awareness as well as reducing stress" (*R14*).

This finding implies that individuals' proper functioning is boosted through religious practices. With focus and proper function for example, individuals are able to achieve better results of whatever they engage in. This supports the idea that elements of psychological wellbeing are inter-dependent and mutually reinforcing, which is in line with Dyakova et al. (2017)'s postulation. The religious practices also stimulate one's mental faculties as expressed by one respondent thus;

> "It has established my thinking and understanding of the world we are living" (*R30*).

The foregoing expression means that through religious practices of prayer, meditation, fasting and fellowship, individuals gain insights on how the world functions and this potentially puts them at a vantage point in the face of adversity. It means they are able to make sense of why things happen the way they do, and this understanding increases their likelihood to adapt effectively to circumstances of life through emotional self-regulation. This finding is consistent with the argument advanced by Gouveia et al. (2018) that people who exhibit positive psychological wellbeing often engage in emotional regulation by, among others, re-interpreting one's circumstances and modifying the implications of ensuing emotions in favor of effective social functioning and generating positive energy that repress stress and increases a sense of optimism. The implication of this is that religious practices put individuals in the right frame of mind to maintain social functioning despite their experience

of adversity. It means that the practice of spirituality and religion is an effective coping mechanism that facilitates social functioning and enables one to be effective in their environment. In turn, such effectiveness potentially reinforces psychological wellbeing since one gains a sense of competence and connectedness, and acquires a sense of environmental mastery.

Chapter Summary

This chapter has presented, interpreted and discussed the findings of the study. The chapter commenced by presenting descriptive analysis of demographic profile of the respondents whereby it was found that majority of the research participants were the youth, and most had post-secondary level of education. The chapter then analyzed and discussed quantitative results of the study which revealed that the joint effect of prayer, meditation, fellowship and fasting had statistically significant explanatory power on psychological wellbeing: a unit increase in the four religious practices was associated with 0.559 unit improvement in psychological wellbeing. Subsequently, it has presented thematic analysis of the qualitative data aspects of the study which yielded two overarching themes: sense of belonging/security and emotional regulation. In the next chapter, the major findings of the study are summarized and the implications discussed before drawing conclusions and recommendations.

CHAPTER FIVE

SUMMARY, IMPLICATIONS, RECOMMENDATIONS AND CONCLUSION

Introduction

This study aimed to contribute to the body of knowledge by investigating the perspectives on the relationship between spirituality and psychological wellbeing and analyze the implications of religious practices on psychological wellbeing. This final chapter summarizes the major findings of the study and discusses the practical and theoretical implications. Recommendations are then drawn and future research directions suggested. Lastly, the main conclusions of the study are drawn.

Summary of Key Findings

The first objective of the study was to establish the varying manifestations of psychological wellbeing of Christian residents of Milimani Estate, in Kitengela Town of Kajiado County in Kenya. The results showed that on a 4-point scale, respondents had above average psychological wellbeing status in terms of feeling active and vigorous, daily life being filled with interesting things, feeling cheerful and in good spirit, feeling fresh and rested, and feeling calm and relaxed.

The second objective of the study was to determine the relationship between religious practices and psychological wellbeing. The study established that prayer was the religious practice most common among the respondents, followed by meditation, fellowship, and lastly, fasting. Correlation analysis revealed that psychological wellbeing was positively and significantly correlated with meditation, fellowship and meditation. However, the correlation between psychological wellbeing and fasting was positive but statistically insignificant. There was a positive and statistically significant interrelationship between all the four religious practices.

The third objective of the study was to determine the predictors of religious practices on psychological wellbeing. Regression results indicated that religious practices explained a small but statistically significant variability in psychological wellbeing of the respondents. However, the individual predictive power of prayer, meditation and fellowship were not statistically significant but their joint effect had statistically significant explanatory power on psychological wellbeing. Nonetheless, the greater share of the variance in psychological wellbeing was not explained by religious practices.

Implications

A number of implications are attributable to the study findings. One of the salient implications is that Christian religious/spiritual practices only boost psychological wellbeing of practitioners when combined. This means that the best effects of spirituality on psychological wellbeing are attained when Christians not only pray, but also meditate, participate in fellowship with the community of believers and practice fasting. It is until then that the restorative power of spirituality begins to manifest. But even then, this power must still be augmented with other interventions to have practical significance since a large share of the variability in psychological wellbeing status was not explained.

Another implication of the study is that there exists a potential hierarchy of effect sizes, with meditation, rather than prayer taking the lead, followed in that order by prayer, then fellowship and lastly, fasting. This sort of pecking order means that when deploying religious practices as psychological wellbeing boosters, priority can be accorded to some (such as meditation and prayer) more than others (such as fasting). It could also be argued that the practice of fasting could be reduced with limited deleterious effects on psychological wellbeing.

Another implication of the study is that psychological wellbeing is a complex mix of aspects of being of which spiritual dimension is just but a small part of its sum total. Thus, while the study sustains the relevance of spirituality as a necessary determinant of psychological wellbeing, it is not in the least sufficient. What this implies is that other dimensions of the bio-psycho-socio-spiritual model should assume preeminence in realizing the overall wellbeing of a person. In fact, it can be argued that spirituality at best plays a supplementary role in the overall psychological wellbeing equation given its small effect size.

The mechanism through which religious practices affect psychological wellbeing implies that the power of spirituality is best demonstrated in the restorative effect from one's negative emotional state back to equilibrium. This suggests that once this state is achieved and the individual is back to normal functioning, spirituality may begin to yield diminishing returns on psychological wellbeing. This notion reverberated throughout the qualitative sub-themes. A case in point is the sub-theme of release from stress and anxiety whereby the utility of religious practices of prayer, meditation and fellowship was expressed using word phrases such as refreshment of psychological wellbeing, letting loose of burdens, restoration of peace and control, relief and calmness.

The implication of the findings for counseling practice is that the effect size notwithstanding, spirituality in the form of religious practices such as prayer, meditation and fellowship plays both preventive and curative role. For instance, the preventive role of prayer is demonstrated in the expression; "prayer has helped to stay calmer in responses, reaction etc. Before I was always reactive and didn't really think about the outcome of my reaction". Likewise, the curative role of spirituality is reflected in such expressions as; "It helps me in the inner healing..."

How Objectives Were Met

The study sought to meet three specific objectives. This section explains how each objective was met.

The Varying Manifestations of Psychological wellbeing in Kenyan Population

The first objective was to establish the varying manifestations of psychological wellbeing in Kenyan population. This objective was met by performing a descriptive analysis of respondents' evaluation of various psychological wellbeing indicators so as to generate a composite psychological wellbeing score. The measures used were found to be highly reliable. Results revealed above average psychological wellbeing score for the sample, suggesting that the population was relatively psychologically healthy. Therefore, this objective was fully met.

The Relationship between Religious Practices and Psychological wellbeing

The second objective of the study was to determine the relationship between religious practices and psychological wellbeing. The objective was met by performing a correlation analysis between psychological wellbeing composite score and the composite indices of the four religious practices. Reliability analysis showed that the measures used met required reliability threshold. Results revealed statistically significant positive relationship between all the religious practice dimensions except one. It is thus the considered view of this research that the objective was met to a great extent.

Predictors of Religious Practices on Psychological wellbeing

The third objective of the study was to determine the predictors of religious practices on psychological wellbeing. This objective was achieved by regressing psychological wellbeing on each of the three religious practices which returned a statistically significant correlation coefficient individually and jointly. Qualitative results further helped in

explaining the mechanism underlying the predictive power of religious practices on psychological wellbeing. Results showed that the collective predictive power of religious practices on psychological wellbeing was significant although each religious practice did not significantly predict psychological wellbeing on its own. Sense of belonging/security and emotional regulation were the two overarching mechanisms through which this happened. The study was therefore able to determine not only the effect size of religious practices but how they affected psychological wellbeing. A hierarchy of religious practices was evident from the findings. At the top of the hierarchy is meditation, followed by prayer, then fellowship, and lastly, fasting. This means that the third research objective was similarly fully met.

Recommendations

In light of the findings and implications of the study, recommendations are made as follows:

i) Inferential analysis demonstrated that the combined effect of prayer, fellowship, fasting and meditation had a statistically significant positive influence on psychological wellbeing. Therefore, Marriage and Family Therapists and other counseling practitioners should integrate spirituality in the arsenal of interventions deployed for Christians presenting with psychological wellbeing sicknesses. Patients should always be encouraged to combine prayer, meditation and fellowship with the community of believers as part of effective ways of coping with mental stressors and healing from psychological illnesses.

ii) Qualitative findings demonstrated that spirituality as outwardly represented by Christian religious practices possess healing and restorative properties. Therefore, Christian counselors as well as spiritual leaders should underscore the healing benefits of spirituality on psychological wellbeing problems in society. This can be achieved

by deliberate inclusion of spiritual disciplines of prayer, meditation, fellowship and fasting as part of psycho-education and emotional empowerment programs targeting Christians.

iii) From the research findings, it was clear that psychological wellbeing facets were integrative and mutually reinforcing in keeping with the bio-psycho-socio-spiritual theory. As such, clinical psychologists attached to hospitals should adopt the bio-psycho-socio-spiritual model of counseling with spiritual therapy prescribed as a supplementary intervention to patients.

iv) The research established that the Christian populace in Kitengela town had above average psychological wellbeing, implying that their adherence to Christian religious practices potentially contributed to their psychological wellbeing status. Thus, the general public should be encouraged to observe regular prayer, meditation and fellowship as one of the ways of coping positively with life challenges. One way to achieve this is to highlight both the preventive and curative power of these religious practices as a way of psychological wellbeing promotion.

v) The study findings underscored the benefits of practicing spiritual disciplines for better psychological wellbeing. Therefore, formal and informal learning institutions at every level of education in society should embed spiritual disciplines in the curriculum to nurture and develop emotional intelligence of the learners as a way of preparing them for effective functioning n society. Such educational initiatives can make use of and build on readily available knowledge resources such as put forward by Foster (2012) to promote spiritual disciplines as a lifestyle, especially among those who subscribe to the Christian faith.

Areas for Further Research

Although the study objectives have been achieved, a number of gaps have been identified in retrospect. These gaps present opportunity for future studies as hereby discussed:

i) The present study has demonstrated that a large proportion of psychological wellbeing status was not explained by religious practices, suggesting that other factors were at play. It is therefore recommended that other factors in the psychological wellbeing equation represented by the error term should be explored to bring out the complex interaction of all the factors that influences overall psychological wellbeing.

ii) The study was conceptually limited to four religious practices. These were: prayer, meditation, fasting and fellowship. This means that the effect of other religious practices like bible study, confession, celebration, giving and community service were not explored. Therefore, another study could focus on these disciplines and how they contribute to psychological wellbeing.

iii) This study was conducted among Christians only. Therefore, it did not encompass the cross-section of religions, meaning that the voices of non-Christians were excluded from the study. To bridge this gap in knowledge, a similar study could be conducted among people who subscribe to other religions.

iv) The present study was also carried out among a largely urban populace whose socioeconomic dynamics are distinctively different from their counterparts from the rural areas. It would thus be interesting to carry out a comparative study between rural and urban Christians to establish whether psychological wellbeing outcomes vary by geographical and demographic settings.

Conclusion

This study has contributed to the body of knowledge by investigating the perspectives on the relationship between spirituality and psychological wellbeing and the implications of

religious practices on psychological wellbeing. The main conclusion that can be drawn from the study is that practices such as prayer, meditation and fellowship play both a preventive and curative role on psychological wellbeing. These practices have significance for counseling interventions when observed in combination rather than when practiced in isolation. However, attaining psychological wellbeing is a complex endeavor and spirituality only contributes a small part. At best, it can be prescribed and administered as a psychological wellbeing supplement.

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APPENDIX A: INFORMED CONSENT FORM

Introduction:

My name is Kariuki Peter Kambo. I am a post-graduate student conducting research for the award of a Master of Marriage and Family Therapy at Pan Africa Christian University.

Purpose of the Study:

The purpose of the study is to investigate the perspectives on the relationship between Christian religious practices and psychological wellbeing of Christian residents of Kitengela Town of Kajiado County, Kenya.

Confidentiality:

To ensure your confidentiality, all the information gathered during this research will be kept strictly confidential and will be used for the purpose of this research study only. Please do not reveal your name or identity anywhere on the instrument.

Statement of Informed Consent:

I understand that participation in this study is voluntary and that I am free to withdraw my consent to participate in this study at any time. Refusal to participate or withdrawal will involve no penalty or benefits. I have been given the opportunity to ask questions about the research, and I have received answers concerning the areas that I do not understand. I willingly consent to participate in this research.

_____ _____

Signature of Respondent Date

APPENDIX B: QUESTIONNAIRE

This questionnaire comprises of three short sections. Please take a moment to fill your responses.

SECTION A: DEMOGRAPHIC PROFILE OF RESPONDENTS

1. What is your gender? Male ☐ Female ☐
2. Please indicate your age bracket?
   - Under 30 years ☐
   - 30 to 39 years ☐
   - 40 to 49 years ☐
   - 50 to 59 years ☐
   - 60 years and above ☐
3. What is your highest level of education?
   - Primary level ☐
   - Secondary level ☐
   - College level ☐
   - University level ☐
4. Are you born again (i.e. have you accepted Jesus Christ as your personal savior)?
   - Yes ☐
   - No ☐
5. Which church do you attend? -

SECTION B: PSYCHOLOGICAL WELLBEING

In this section, please respond to each item by marking one box per row, regarding how you felt in the last two weeks.

Key:
0 =At no time;
1 = Some of the time;
2 =Less than half of the time;
3 = More than half of the time;
4 =Most of the time;
5=All of the time;

tem	0	1	2	3	4	5
1. I have felt cheerful in good spirits	☐	☐	☐	☐	☐	☐
2. I have felt calm and relaxed.	☐	☐	☐	☐	☐	☐
3. I have felt active and vigorous.	☐	☐	☐	☐	☐	☐
4. I woke up feeling fresh and rested.	☐	☐	☐	☐	☐	☐
5. My daily life has been filled with things that interest me`	☐	☐	☐	☐	☐	☐

SECTION C: RELIGIOUS PRACTICES

In this section, describe how often you engage in the following practices

Key:
1=Rarely
2= Sometimes
3 = Often
4= Always

Item	1	2	3	4
Prayer				
1. I privately prayer for myself and for others	☐	☐	☐	☐
2. I have a prayer partner				
3. I pray when I rise and when I go to sleep				
4. I pray with my family				
Meditation				
5. I meditate on the word of God				
6. I recite bible verses				
7. I read spiritual books				
8. I reflect upon the meaning of life				
Fellowship				
9. I go to church				
10. I participate in religious meetings				
11. I go for estate fellowships				
12. I feel connected with others				
Fasting				
13. I skip meals in order to focus on my spiritual life				
14. I go without food as part of my dedication to God				
15. I fast whenever directed to by my church				
16. I deny myself pleasurable things to meet the needs of others				

17. How have the following practices in your Christian life influenced your psychological wellbeing?

i) Prayer

- -
- -
- -
- -
- -
- -

ii) Meditation

- -
- -
- -
- -

iii) Fellowship

- -
- -
- -
- -
- -
- -

iv) Fasting

- -
- -
- -
- -
- -
- -

****Thank you for your time and cooperation****

APPENDIX C: EXTRACT OF THEME FILE

TRANSCRIBED RESPONSES	SUB-THEMES	THEMES
R1- Bringing me reason to my God and it has my personal savior. It is important because it is directly communicating with God		
R2- Connect with God		
R3- Connects me with God and builds up my relationship with God		
R4- Has made my mind persistent on trusting on God		
R5- Helps me to get closer to God		
R6- I feel connected to God		
R7- In being intimate with God		
R8- Increased my prayer life and sometimes surprised by the things from other people		
R9- It has helped me draw closer to God and he has become my shepherd		
R10- It has helped me get closer to God and to know that he is always with me		
R11- It keeps me focused on my daily life and what God speaks to me		
R12- Made my mind persistent on trusting on God	Connectedness with God	
R13- One is connected spiritually to God and reveals his/her issues to God		
R14- Prayer being the only connect between people and our maker, my intentions are love for God and my neighbors. God to grant me good health. Do work productively in my small shamba and house chores and connecting with others		
R15- Prayer have helped me to be closer to God and know that he is the only one who gives an answer to my problems at all times		
R16- Prayer influence my life in many ways; Helps me makes choices in life matters, sensing when doing good and bad, praying is my way of talking to God		
R17- Prayers reminds us we are not in control and keeps us close to the one who is		
R18- Though prayer have been able to repent and receive salvation		
R19- I feel covered, protected whenever I speak to God through prayer during my low moments		
R20- I feel protected on day to day basis		

R21- It gives me sense of belonging knowing that God listening and he is always available		
R22- A better understanding of God's word and knowledge and this gives me assurance of belonging and relationship		
R23- Dedicated my life to memorizing the Word and increase in spiritual life		
R24- Directs me to do what makes God happy		
R25- Enabled my mind to be at one and at peace with the word of God		
R26- Helps me get revelation of the word of God		
R27- Helps to understand more about God and to follow his commandments		
R28- Holy Spirit guides me when I meditate on the Word of God		
R29- I have a very deep connection to the person of God when I R30- meditate on the Word of God		
R31- I read the Bible to understand the love of God in my life		
R32- I tend to understand on God's purpose message and what the spirit inspires and requires		
R33- It helped me apply the Word of God in my life		
R34- It makes me know God and friends		
R35- It makes my mind connect intimately with God. I feel deeper longing for God		
R36- Keep me closer to God and motivates me to keep praying		
R37- Makes me feel God's presence		
R38- Meditation has helped ,me to become close to God		
R39- On how big God the love of God is		
R40- One is able to follow the right channel to God		
R41- This helps me know God and his personality		
R42- To know the goodness of knowing God and communicating with the Holy Spirit		
R43- To practice what the Bible wants		
R44- Believe in Christ		
R45- Boosted my connection and faith in God		
R46- Brings me closer to God and allows me to let God have his way. Sometimes our pride gets in the way		
R47- Clears a way unwanted stuff in my mind and body and this refreshes		

R48- Fasting enables me to reinforce my personal values and trusting in God for breakthrough. It deepens my relationship with God, brings a sense of devotion and self-discipline and commitment		
R49- Fasting has not been easy activity since I have had to sacrifice some of my time and my daily meals. Fasting has really helped me to surrender my prayer requests and has really made me grow spiritually.		
R50- Fasting helps me to step back from the rat race of life and focus and spend time with God. This gives me direction over issues I am grappling with.		
R51- Has intensified my relationship with God and grown more spiritually		
R52- He gives me spiritually stronger		
R53- Helps feel stronger when prayer, seeking God's righteousness in all areas, although it is not an easy task		
R54- Helps in concentrating more and dedication		
R55- Helps in letting go of idols		
R56- Helps in letting go of things which are beneficial (draining) and increasing it more		
R57- Helps me to be closer to God because I usually give myself more time to be closer to him during fasting		
R58- Helps me to have more time to talk to God		
R59- Helps surrender to God and through that, many situations that seems difficult with men God has intervened by his power, love and kindness		
R60- I am able to focus on God and shut everything out		
R61- I can sacrifice for oneself for the sake of the kingdom of God		
R62-I get closer to God when fasting. I also study the Word of God intensely and more during the time		
R63-Increased in sacrifice to God and obedience also in disciple of self-control		
R64-It connects you with spiritual world and it enables you to go into her/his level spiritually		
R65-It has boosted my family's connection to God and improved our faith in Him		
R66-It helps in creating a close relationship with God hence serving Him more		
R67-It helps me connect more with God and draws me near to him		
R68-It helps me to feel closer to God thus enabling me to be confident and know that everything before God is possible no matter the situation that I face		

R69-It helps believe that it's only God that giver of life and who takes but not that we live by the power of what we take R70-It makes me feel and understand what lack of something means R71-It makes me feel focused on Holy Spirit's goal R72-It refreshes my psychological wellbeing making me more humble towards God R73-Reduces doubt and blesses my mind R74-This deepens relationship with God and important on the agenda in assistance of the needy/ vulnerable in the communicating by donating foodstuffs and clothing R75-To feel more close to God R76-We realize that man does not leave by bread alone as the Bible says so it gives me strength knowing that he is there for us. He can satisfy us through his wonders		
R1-Being with people fellowshipping together makes me understand the word of God R2-Brings me sense of togetherness R3-Building my relationship towards by family members R4-Company helps in bringing joy, solutions to understand issue and ears that hear R9-Connecting others gives you comfort R11-Create a sense of belonging acceptance and togetherness with others. Strengthens spiritual wellbeing and a craving to serve R17-Creates a sense of belonging to the society R18-Fellowship has greatly created a strong social bond between me and other evangelists/ Christians which has helped us preach the gospel of God. Also it has created a platform for us to share our adversities/challenges when come across R19-Fellowship is a platform that provides one with an opportunity to share, learn and grow spiritually. There is a sense of belonging and connection when you share the same interest and aim R20-Fellowship with others has helped me in getting to learn from others so grow social and spiritually R21-Gives me a sense of belonging. I feel part of the bigger Church by participating in activities of the small Christian community R22-Gives me the ability to connect with others spiritually and emotionally R30-Helps me to pray	Connectedness to God and man	Sense of belonging and security

R34-I connect to brethren during fellowship and connect to their daily living	
R35-I desire company of fellow believers who have helped as a sounding board one especially a brother who we a lot in common with	
R36-I feel connected with other	
R37-I have benefited on spiritual growth by sharing and benefited from other believers testimony	
R38-Improved my knowledge of Word and God. How should I communicate in the knowledge of God	
R39-Increased my connection and apathy and sympathy grown	
R45-It connects me with other people	
R46-It gives a sense of adoration knowing that all the people are there to give God the glory he really deserves	
R47-It gives me a satisfaction of love and hope and belonging	
R48-It gives me a sense of belonging and being able to connected with others spiritually an emotionally	
R49-It gives me a sense of belonging. It strengthens my faith in God	
R50-It has helped me engage with people when sharing the word of God together	
R53-It has helped me to have faith in God and grow spiritually whenever I share the Word of God I feel encouraged	
R57-It helped to learn and train from those deep in spirit	
R58-It makes you believe in God	
R59-It me strong and how to grow spiritually in Christ	
R60-It stronger me spiritually	
R63-Leads me into commitment to God	
R64-One feels connected with others	
R65-One grows spiritually and commits his/herself in serving God	
R66-One grows spiritually and is able to praise God even at home with the family	
R69-Stronger connection and contact in the spiritual world with others	
R70-Stronger connection with other people and the spiritual world	
R71-Takes closer to the people	

R72-Through fellowship my spiritual bonds with other people has really grown strong. Some of the people have really motivated me spiritually and mentally since. I have been able to interpreted the Bible using the help of others R73-Unites me with people of God and we share the word of God together R74-When I do fellowship I enlighten myself mentally R75-Whenever we meet with other Christians in our fellowship it impacts me well. I feel I belong R76-Whenever we meet with other Christians in our fellowship it impacts well to all of us personally I feel that I am not alone and whenever I have issues pressing, I can talk to my fellowship Christians and relieved	
R1-Gives me some sort of satisfaction and less worry Gives peace of mind and less worry R2-Helps me in letting loose of my burdens and sharing them to God' feel great R13-Helps me relax and reflect R14-Helps me vent honestly. Sometime life gets overwhelming. Knowing I can speak to the Holy Spirit helps R15-I pray to feel better and with good mood R23-It gives me a peaceful mind R27-It gives me an opportunity to let go of my burdens sharing them to God R28-Prayer gives me a peace and control over life in that I speak to God and know that everything will fall into place and I am less anxious about everything R29-Prayer has helped to stay calmer in responses, reaction etc. before I was always reactive and didn't really think about the outcome of my reaction R30-Prayer has really had a great impact in my psychological wellbeing since I have perfected my communication with God. I have been able to surrender my problems and burdens to God therefore been at peace with my mind and my heart R33-Prayer is talking to God. This has impacted me positively; when I pray I feel less pressured, relaxed and of good mood. I feel less depressed and it boosts my morale in life to keep going in daily activities R34-Prayer is talking to God. This has impacted positions in my mental wellbeing. Whenever I pray, I feel less pressure R35-Prayer makes me feel at peace concerning anything I pray about believing that it has been done by God	Release from stress and anxiety

R36-Praying over different issues in my life, family and country gives peace of mind R37-Recognize the psychological wellbeing is a gift from God. Through prayer God gives me good psychological wellbeing R38-When anxious I talk to God in prayer and I feel the relief R39-Has enabled my mind to feel free and at peace R40-Helps in peace of mind, relaxation, less worry R44-I am relaxed and I feel as if the weight of everything we have been facing is off my shoulders R45-It gives a sense of calm and relaxation R46-It gives peace of mind and clarity of thought R47-It makes me more relaxed as well as rejuvenating my body and mind R54-Make you to be calm and relaxed focus R55-Meditating on the word of God and his goodness and faithfulness helps me to overcome anxiety and worry R56-Mental in God gives me peace and mental rest. My meditation heals my mental anxiety R57-The Holy Spirit fills me inside giving me a sense of calmness thus closer to God R58-Been able to relieve myself through fellowship when in hard times R59-Fellowship with others help me to cope with mental stress. I learn new things which helps me to grow mentally R60-It has helped me release some stress since I met a prayer partner who taught me how to pray R61-When we meet with people worshiping God together. It helps me to relief stress gives me hope in life R62-This practice elevates my happiness and confidence and reduces anxiety R63-To focus on God who is my mental healer. During times of fasting that God will heal others mental R74-Provide a kind of relaxation of the mind. Improves my patience and focus on dealing with issues in life R75-It helps me in the inner healing and getting closer to God in the areas in my life that I feel strained and drained.		
R7-Final strength in prayer when life proves to be tough R9-Give me boldness to overcome challenges of life. I tend to overcome any fear that comes my way	Source of strength and courage	Emotional regulation

R13-It gives me strength to face the challenges in my daily life with courage R44-It has been a pillar in strengthening my mental capacity of tacking issues and accepting things which happens in life without being so judgmental R20-It helped me face daily challenges with courage and overcome them and move R26-It makes stronger spiritually R27-It strengthens me and being strong and courageous in life R28-It strengthens you mentally and helps in making the right decision R35-Makes strong and have faith in God R40-Prayer gives me positive energy. It enables me to trust in God's love, power, wisdom when faced with life's challenges and inevitable demands. Helps one to develop an attitude of thankfulness, acceptance and understanding. Helps one to develop an attitude of thankfulness, acceptance and understanding R41-Praying has become my strength keeps me moving and very stronger R42-Rarely brings me inner and calmness and fills me with energy and courage to face the hurdles and puddles of life R43-Strengthen me in my doing. Fight life obstacles R44-When I am down, I get strength R55-It has helped me know the scripture verses and so relate them with day to day engagement and it has strengthen me especially when it partisans the evangelical work R56-When I read the Bible it shows me the love of God and also gives me the strength to face adversity R67-Being strong in the word	
R1-Encouraging me to never give up R2-Gives me hope in life R11-I have found comfort and solace in prayer. Prayers never give up R14-I remain sober, hopeful and joyful. Assurance of a friend and confidant in Christ R15-It helps me to keep moving on R16-Positively-I feel good about myself R17-Prayer helps me a lot in my life it boast my spirit to know reveal things and good things R18-I feel cheerful mentally	Source of encouragement and hope

R19-I have been able to been able to be encouraged especially when am about to lose hope and has strengthen my faith R22-It encourages me to keep on keeping on and realize I have purpose in all life will live R31-It gives me hope in life R32-Makes my faith in God strong especially when I meditate about the great wonders, miracles of God i.e. making away in the Red Sea, dry bone coming back to life etc. R33-Meditating on God's word given me hope, joy and solutions to challenges R34-Provides hope to otherwise hopeless situation. Arouses forgiveness to difficult issues and creates a sense of love to others R35-Provides hopeless situation R36-It inspires and encourages me in the long run of up and downs of life. It encourages me that God has good plans for everyone R45-Allows me to be able to interact with other Christians and strengthen each other in the faith R48-Fellowship raises my spirit R49-Fellowship with like-minded people and persons with similar goals and sharing our experiences, history, life stories and encourages me to that I am not alone. It gives us hope knowing if God come through for one person he can come through for me R52-Fellowship with other brethren helps me share burdens and concerns. I get refreshed, connected and encouraged. Also gives me a sense of belonging and takes away loneliness R55-I feel encourages, gives me hope and renews my faith R62-I get encouraged by other Christians R63-My fellowship with others raises my spirit R64-Positively-I am more around people. It is an emotionally uplifting moment R75-Sharing and hearing from God encouraging me by knowing my challenges even unique to me R76-When sharing the Word of God with other believers, I get encouraged	
R11-To me, prayer is speaking with God. I converse with God and tell him what I feel, I am real with Him. I tell Him when I think He did not come through for me and he always answers me and then learn the true	Source of meaning in life

meaning of "All things work together for those who love Him". R20-Get exposure and experience as in our meeting after reading verses in the Bible then reflect on our daily lives e.g. during Easter period as a catholic fast it is advisable to go for a retreat or participate in acts of mercy by visiting sick prisoners or children's home with goodies. None of these took place because of COVID 19 R23-It allows me to stop focusing on myself (issues, pressure) and listen to others and being in their presence is a source of joy R34-Reading the Bible and other Christian motivational books has helped me better understand the reasons to live. R35-I reflect life's event and the true meaning of life and learn something from it. R36-It clears up issues by understanding which it brings you are able to have proper meaning of things therefore your mind is clear R40-Reading the Bible and other Christian motivational books has helped me better understand the reasons to live R48-Reading the Bible and spiritual books has really been a great influence in my life. I have learnt and understood the teachings of the Bible and also been able to positively impact the lives of others R49-I am to understand the deeper meaning of scripture and the Word of God R60-Allowed me to appreciate every aspect of life R61-Helps me to understand the meaning of life R72-Fasting has helped me to remember the less fortunes in our societies and the challenges they go through. It has helped me understand that the spiritual food is more important than the physical food		
R1-Gives a clear view of things. Opens up way for proper thinking R12-Has improved my level of spirituality and emotions in regards to myself and surroundings. R14-Helped me to have a better focus and concentration, it has as well improved my self-esteem and awareness as well as reducing stress R16-Helps a Christian control his/her emotion R25-Though meditation, I am able to forge through life by making life changing decisions R30-It has established by thinking and understanding of the world we are living it	Mental clarity	

R37-Meditating on the word of God has influenced my speech, temperament and quality of prayer has been enhanced R38-I has a calming effect, enables you to reflect on your thoughts, increases self-awareness, reduces stress and pain R49-Organized R60-Enhance growth and strength to my mind R71-It has made me put things that I treasure aside and look at life differently. You deny yourself for God's sake R72-It helps me rediscover and get back on the right track		

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21ST APRIL, 2021

TO WHOM IT MAY CONCERN

Dear Sir/Madam,

RE: RESEARCH AUTHORIZATION & ETHICS CLEARANCE LETTER FOR KARIUKI PETER KAMBO REG. NO: MMFT/7492/16

Greetings! This is an introductory letter for the above named person a final year student at Pan Africa Christian University (PAC University), pursuing the degree of Master of Arts in Marriage and Family Therapy.

He is at the final stage of the programme and is preparing to collect data to enable him finalise on his Thesis. The Thesis title is ***"Perspectives on the Relationship between Spirituality and Psychological Wellbeing: An Analysis of the Implications of Religious Practices on Mental Health".***

We kindly request that you allow him obtain a research permit so as to proceed and conduct research.

Warm Regards,

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NAIROBI KENYA

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APPENDIX D: NACOSTI PERMIT

REPUBLIC OF KENYA

NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Ref No: 250317

Date of Issue: 18/May/2021

RESEARCH LICENSE

This is to Certify that Mr.. Peter Kambo Kariuki of Pan Africa Christian University, has been licensed to conduct research in Kajiado on the topic: perspectives on the relationship between spirituality and psychological wellbeing: An analysis of the implications of religious practices on mental health for the period ending : 18/May/2022.

License No: NACOSTI/P/21/10641

250317

Applicant Identification Number

Director General
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