

**TITLE - INTERPLAY BETWEEN PERSONALITY, RELIGIOUS
BELIEFS AND QUALITY OF LIFE AMONG YOUNG ADULTS**

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ABSTRACT

The dynamic relationship between an individual's personality, spiritual orientation, and perceived quality of life continues to be an area of significant psychological inquiry. This research examined the combined influence of individual personality dimensions and levels of religious belief on young adults' perceived quality of life in the Indian context. A total of 50 participants, aged between 18 and 26, were selected through stratified purposive sampling to ensure balanced representation across four major religious groups: Hinduism, Islam, Christianity, and Sikhism. Gender representation was kept equal to maintain demographic neutrality. Standardized instruments were employed, including the Big Five Personality Inventory, the Religious Belief Scale, and the WHO Quality of Life Scale. Participants completed an online survey disseminated through Google Forms. The collected responses were evaluated using correlation analysis and anova to examine both the associations and group-based variations among the core variables. Findings highlighted significant correlations between certain personality dimensions—particularly conscientiousness and emotional stability—and higher quality of life scores. Religious belief also emerged as a meaningful contributor, though its influence varied across religious affiliations. These results offer valuable insight into the nuanced ways personal disposition and faith can collectively impact the well-being of emerging adults. The findings highlight the value of incorporating cultural and spiritual perspectives when conducting psychological research or designing mental health interventions.

Keywords: Personality, Religious Beliefs, Quality of Life, Young Adults

INTRODUCTION

Background of the Study

Personality and spirituality are two fundamental dimensions influencing an individual's experience of life. Personality traits, commonly conceptualized through models such as the Big Five, influence the way individuals make sense of their surroundings and react to life situations (McCrae & John, 1992). Simultaneously, religious beliefs often provide a framework for meaning-making, emotional support, and ethical guidance, contributing to psychological well-being (Pargament, 1997). In recent decades, research has increasingly recognized the complex interplay between these dimensions and their combined effect on quality of life, a multidimensional construct that includes aspects of physical well-being, emotional health, interpersonal connections, and environmental factors (WHO, 1998).

Emerging adulthood, typically referring to individuals aged between 18 and 26 years, represents a crucial developmental period characterized by exploration, identity formation, and increased autonomy (Arnett, 2000). Understanding the factors that influence quality of life during this formative stage is essential, especially in culturally diverse societies like India, where religious diversity is profound and personality constructs may manifest uniquely (Choudhary & Shukla, 2018). Although personality characteristics have been associated with various aspects of well-being outcomes globally, fewer studies have investigated how these traits interact with religious beliefs to impact quality of life within the Indian young adult population.

This study seeks to address this gap by investigating how personality traits and religious beliefs relate to overall quality of life among Indian young adults across four major religious affiliations: Hinduism, Islam, Christianity, and Sikhism. By employing standardized

psychological instruments and robust analytical methods, the study aims to offer a culturally grounded perspective on how personality traits and religious faith together contribute to life satisfaction and overall well-being.

Rationale of the Study

Quality of life is a complex concept that represents a person's general well-being, including their physical condition, psychological health, and social connections and environmental factors (WHO, 1998). In psychological research, personality traits have been consistently associated with variations in life satisfaction and adaptive functioning (Costa & McCrae, 1992). Similarly, religious beliefs a means of coping, providing a sense of purpose and belonging, which may strengthen psychological resilience and promote positive health outcomes (Koenig, 2012).

Despite these established associations, the specific interplay between personality and religiosity in shaping quality of life remains underexplored, especially within the culturally rich and religiously pluralistic context of India. Previous studies have largely examined these variables independently or in Western populations, limiting the generalizability of findings to Indian young adults. Given the distinct social, cultural, and spiritual frameworks present in India, understanding how personality traits and religious beliefs interact can inform culturally sensitive psychological assessments and interventions.

Moreover, young adulthood is a critical developmental stage marked by significant transitions that impact mental health and life satisfaction (Arnett, 2000). By focusing on this age group and incorporating a diverse sample across four major religions, this study aims to generate insights that can guide mental health professionals, educators, and policymakers in supporting holistic well-being in Indian youth.

Statement of the Problem

While prior research has separately established the significance of personality traits and religious beliefs in influencing individuals' quality of life, the combined effects of these factors remain insufficiently examined within the Indian young adult population. This gap limits a comprehensive understanding of how intrinsic personality characteristics and faith-based values interact to impact well-being during a formative life stage.

In particular, limited empirical research has explored whether personality traits have a measurable impact on quality of life varies across different religious affiliations and how religious belief itself directly relates to life satisfaction among young adults in India. Without this knowledge, psychological interventions and support systems risk being less effective due to insufficient cultural and spiritual contextualization.

This study addresses this problem by exploring how personality traits and religious beliefs collectively relate to quality of life among Indian young adults aged 18 to 26, thereby contributing to the development of more nuanced, culturally relevant frameworks for enhancing psychological well-being.

Study Objectives

1. To explore how personality characteristics are associated with quality of life in young adults residing in India.
2. To explore the influence of religious beliefs on the life quality within the same demographic.
3. To investigate whether variations in quality of life are observed across young adults from four major religious groups: Hinduism, Islam, Christianity, and Sikhism.

4. To investigate how the combination of personality traits and religious beliefs influences life quality, thereby understanding their combined contribution to well-being.

Hypothesis

Null Hypothesis (H_0)

1. There is no significant correlation between adaptive personality traits and quality of life among young adults.
2. Religious belief levels are not significantly associated with quality of life scores.
3. No meaningful variation exists in quality of life scores among young adults from different religious groups (Hinduism, Islam, Christianity, Sikhism).
4. Personality traits and religious beliefs do not interact significantly to predict variations in quality of life.

Alternate Hypothesis (H_1)

1. There is a significant favorable association between psychologically beneficial personality traits and quality of life among young adults.
2. Greater intensity of religious belief tends to correspond with enhanced quality of life outcomes.
3. Noticeable variations exist in life quality scores among young adults from different religious groups (Hinduism, Islam, Christianity, Sikhism).
4. Personality traits and religious beliefs interact significantly to predict variations in quality of life.

Operational Definitions

1. Personality:

The term personality describes the stable tendencies in how a person thinks, reacts emotionally, and behaves, shaping their distinct way of interacting with the world.

2. Religious Beliefs:

Religious beliefs denote the degree of faith, practices, and spiritual values held by an individual. This construct is measured through the Religious Belief Scale, which assesses the intensity and nature of religious conviction and its role in the participant's life.

3. Quality of Life:

Quality of life is a multidimensional concept that includes physical health, psychological state, social relationships, and environmental factors. In this study, it is measured using the World Health Organization's Quality of Life Scale (WHOQOL), which provides a comprehensive assessment of subjective well-being (WHO, 1998).

4. Young Adults:

Young adults are defined as individuals aged between 18 and 26 years, the age group targeted in this study to explore developmental and psychosocial factors influencing quality of life.

REVIEW OF LITERATURE

Personality and Quality of Life

Personality plays a key role in shaping how individuals experience well-being and life satisfaction. One widely accepted approach to understanding personality is the Five-Factor Model, which outlines the core dimensions of these traits (McCrae & John, 1992). Each dimension captures unique behavioral tendencies and emotional patterns that contribute to life experiences.

Individuals who exhibit traits like conscientiousness and emotional steadiness, often conceptualized as the opposite of neuroticism, tend to report greater satisfaction with life, along with improved mental and physical well-being (Steel, Schmidt, & Shultz, 2008). Likewise, extraverted individuals are frequently linked with increased positive emotions and stronger social involvement, which further enhances subjective well-being (Lucas, 2008). Conversely, high neuroticism often predicts lower quality of life due to increased vulnerability to stress and negative emotions (Malouff, Thorsteinsson, & Schutte, 2005).

Research focusing on young adults underscores the importance of personality traits during this developmental period, as emerging adults navigate identity formation and establish independent social roles (Arnett, 2000). Studies suggest that personality traits influence coping strategies, resilience, and overall life satisfaction, making them crucial for understanding quality of life in this age group (Lodi-Smith & Roberts, 2007). However, there remains a need for further exploration in non-Western populations, where cultural contexts may moderate these relationships (Church, 2016).

Religious Beliefs and Quality of Life

A person's religious convictions frequently shape their outlook on life and influence their everyday decisions and behaviors, providing meaning, moral guidance, and social support (Pargament, 1997). Religiosity, encompassing dimensions such as faith, practice, and spirituality, has been shown to contribute to improved mental health and enhance one's overall sense of life satisfaction (Koenig, 2012). The sense of belonging to a religious community and the coping mechanisms derived from faith contribute to the ability to adapt and remain steady during difficult life circumstances (Ano & Vasconcelles, 2005).

Studies conducted in diverse cultural contexts have demonstrated that religious beliefs can buffer stress and promote mental health by fostering optimism, hope, and purpose (Smith, McCullough, & Poll, 2003). In India, where religion plays a profound socio-cultural role, religious belief systems can play a meaningful role in shaping one's overall life satisfaction (Kumar & Pal, 2016). Research indicates that individuals deeply rooted in their religious traditions report higher life satisfaction and better emotional adjustment (Roth & Kroll, 2016).

Nevertheless, the connection between religious involvement and life satisfaction is multifaceted and can be influenced by variables like one's specific faith tradition, intensity of belief, and cultural expectations (Hill & Pargament, 2008). Understanding these nuances is essential for psychological research and practice, especially when addressing the needs of young adults navigating their personal and spiritual identities.

Combined Influence of Personality Traits and Religious Belief Systems

The interplay between personality traits and religious beliefs has garnered increasing scholarly interest, as both constructs significantly shape an individual's outlook and overall

quality of life. Theoretically, personality may influence how individuals engage with and interpret their religious beliefs, while religiosity can also affect personality development and expression (Saroglou, 2010). This bidirectional relationship suggests a dynamic interaction that ultimately impacts well-being.

Research evidence suggests that traits like openness and conscientiousness are associated with levels of religious engagement and spiritual practices (DeYoung, 2010). For instance, individuals high in conscientiousness often exhibit greater religious commitment, which in turn supports healthier lifestyle choices and psychological stability (McCullough & Willoughby, 2009). Conversely, neuroticism tends to relate negatively to intrinsic religiosity but may associate with extrinsic religious behaviors motivated by anxiety reduction (Hill & Hood, 1999).

Research exploring combined effects on quality of life shows that personality and religiosity together better predict well-being outcomes than either variable alone (Krause, 2008). For example, religious beliefs can enhance the beneficial impact of constructive personality characteristics on overall life satisfaction by providing additional coping resources and social support (Pargament et al., 2004). However, there remains a scarcity of studies examining these interactions specifically within young adult populations, particularly in culturally diverse settings such as India. Addressing this gap can deepen the understanding of how personality and religion jointly contribute to quality of life during formative years.

Well-Being and Life Satisfaction Among Emerging Adults

QOL is a broad and multidimensional concept that captures how individuals personally assess their physical well-being, emotional condition, social interactions, and surrounding environment.(World Health Organization, 1998). In the context of young adults, QoL takes

on unique significance as this life stage involves substantial transitions, including identity exploration, career development, and social role acquisition (Arnett, 2000).

Emerging adulthood is characterized by both opportunities and stressors that impact well-being, making the assessment of QoL essential for understanding adaptive functioning during this period (Nelson, Allen, & Hauck, 2015). Studies have shown that factors such as social support, mental health status, and lifestyle behaviors significantly contribute to QoL in young adults (Schulenberg & Schoon, 2012).

Cultural background significantly shapes how individuals perceive and evaluate their quality of life. In India, collectivistic values and strong family ties influence social support systems, which can enhance QoL (Verma & Saraswathi, 2002). However, young adults may also face unique challenges related to societal expectations and religious norms, affecting their overall well-being (Srinivasan & Raj, 2014).

Recognizing these cultural and developmental factors is crucial when examining QoL among Indian young adults, particularly in relation to personality and religious beliefs. This comprehensive approach provides a foundation for the current study, with the goal of uncovering the various interconnected elements that influence life quality within this group.

METHODOLOGY

Design of the Research

This study adopted a quantitative approach using a correlational design to explore how personality traits and religious beliefs relate to life satisfaction among young adults. It also compared quality of life across different faith groups to identify meaningful patterns. The structure was chosen to allow both relational insights and group-level distinctions within the data.

Participants

The sample included 50 individuals between 18 and 26 years of age, residing in India. Participants represented an equal gender distribution, with 25 males and 25 females. Purposive stratified sampling was used to ensure representation from four major religious groups: Hinduism, Islam, Christianity, and Sikhism. Each religious group was equally represented, with approximately 12 to 13 participants per group. The inclusion criteria required participants to be within the specified age range and willing to provide informed consent.

Measures

1. Big Five Personality Inventory (John & Srivastava, 1999) – used to assess core personality dimensions.
2. Religious Belief Scale (Hill & Hood, 1999) – measured the strength of personal faith.
3. WHOQOL-BREF (World Health Organization, 1998) – captured self-perceived quality of life across multiple domains.

Procedure

Participants completed an online survey shared through Google Forms. After reviewing a brief overview of the study and giving digital consent, they responded to demographic items followed by the standardized measures. Confidentiality and voluntary participation were clearly communicated. The survey was open for responses over a two-week period, and reminders were sent to improve participation rates. Data were downloaded and securely stored for analysis.

Analysis of Data

- All analyses were carried out using Version 25 of IBM SPSS Statistics software.
- Pearson correlation was used to explore how personality dimensions, religious beliefs, and quality of life scores relate to one another.
- To compare quality of life scores across different faith-based groups, a one-way ANOVA was employed.

RESULT & INTERPRETATION**ANOVA****Table 1****Analysis of Extraversion Scores by Religion and Gender**

Factor	Sum of Squares	df	Average Square	F	Sig.
Model	288.867a	7	41.267	1.882	.105
Intercept	23144.199	1	23144.199	1055.708	.000
Religion	237.851	3	79.284	3.616	.024
Gender	0.941	1	0.941	0.043	.837
Religion * Gender	51.758	3	17.253	0.787	.510
Error	701.533	32	21.923		
Total	24416.000	40			
Adjusted Total	990.400	39			

Interpretation

- People's levels of sociability and expressiveness varied across different religious groups, some groups tended to score higher on being outgoing than

others. This suggests that a person's faith background might be linked to how open or talkative they are in everyday life.

- When it came to gender, there was hardly any difference at all between men and women on this trait. Even looking at religion and gender together didn't reveal anything new, the combination didn't seem to matter much for extraversion.
- In total, this part of the study helped explain a fair portion of the differences seen in extraversion, though not enough to be considered a strong or consistent pattern.

Table 2

Group Differences in Openness Across Religion and Gender

Factor	Sum of Squares	df	Average Square	F	Sig.
Model	86.817a	7	12.402	0.428	.877
Intercept	53314.128	1	53314.128	1839.244	.000
Religion	2.980	3	0.993	0.034	.991
Gender	48.813	1	48.813	1.684	.204
Religion * Gender	34.035	3	11.345	0.391	.760

Error	927.583	32	28.987		
Total	54890.000	40			
Adjusted Total	1014.400	39			

Interpretation

- People from different religious backgrounds had very similar levels of openness, how curious or open-minded they were didn't seem to depend much on their faith. Men and women also showed similar responses on this trait.
- Even when religion and gender were looked at together, they didn't appear to have any real impact on openness.
- This part of the study didn't explain much about why people differed on this trait. The results showed that only a small amount of the variation could be linked to these factors.

Table 3

Group-Based Differences in Conscientiousness by Religion and Gender

Factor	Sum of Squares	df	Average Square	F	Sig.
Model	192.967a	7	27.567	0.780	.608

Intercept	39697.595	1	39697.595	1123.649	.000
Religion	83.129	3	27.710	0.784	.512
Gender	58.601	1	58.601	1.659	.207
Religion * Gender	57.085	3	19.028	0.539	.659
Error	1130.533	32	35.329		
Total	41646.000	40			
Adjusted Total	1323.500	39			

Interpretation

- When it came to being organized, responsible, and self-disciplined, people from different religious backgrounds showed fairly similar scores. There weren't any clear differences between the groups. Men and women also responded in much the same way on this trait.
- Looking at religion and gender together didn't reveal anything new either, the combination didn't seem to influence how conscientious someone was.
- This part of the study offered only a small amount of insight, and the results didn't seem to apply strongly beyond the current group of participants.

Table 4**Variation in Agreeableness Across Religion–Gender Combinations**

Factor	Sum of Squares	df	Average Square	F	Sig.
Model	283.967a	7	40.567	1.391	.243
Intercept	44748.289	1	44748.289	1533.898	.000
Religion	73.521	3	24.507	0.840	.482
Gender	100.817	1	100.817	3.456	.072
Religion * Gender	92.875	3	30.958	1.061	.379
Error	933.533	32	29.173		
Total	46780.000	40			
Adjusted Total	1217.500	39			

Interpretation

- People from different religions scored similarly when it came to being cooperative, kind, and trusting, there weren't any big differences between the groups. Gender almost played a role, as women and men showed slightly different scores, but the difference wasn't strong enough to be certain.

- Looking at both religion and gender together also didn't show any major impact on how agreeable someone was.
- Altogether, this part of the study offered a modest explanation for the differences seen, with just a small portion of the results linked to these background factors.

Table 5**Variation in Neuroticism Based on Religion and Gender**

Factor	Sum of Squares	df	Average Square	F	Sig.
Model	481.117a	7	68.731	1.414	.234
Intercept	22498.668	1	22498.668	462.911	.000
Religion	232.734	3	77.578	1.596	.210
Gender	30.454	1	30.454	0.627	.434
Religion * Gender	239.425	3	79.808	1.642	.199
Error	1555.283	32	48.603		
Total	24504.000	40			

Adjusted	2036.400	39			
Total					

Interpretation

- People from different religious groups had fairly similar levels of emotional reactivity and stress. Whether someone was male or female didn't seem to make much difference either. Even when both religion and gender were considered together, they didn't show a strong influence on how emotionally sensitive or reactive people were.
- Overall, this part of the study gave us only a limited explanation of why people scored differently on this trait, just under a quarter of the variation could be understood from these factors.

Table 6

Group-Level Analysis of Religious Belief Patterns

Factor	Sum of Squares	df	Average Square	F	Sig.
Model	8273.842a	7	1181.977	6.668	.000
Intercept	1115271.539	1	1115271.539	6292.156	.000
Religion	3878.485	3	1292.828	7.294	.001

Gender	2.904	1	2.904	0.016	.899
Religion * Gender	3487.935	3	1162.645	6.559	.001
Error	5671.933	32	177.248		
Total	1150647.000	40			
Adjusted Total	13945.775	39			

Interpretation

- People from different religions showed clear differences in how strongly they believed in their faith, with some groups reporting much higher levels than others. When it came to gender, there wasn't much of a difference, men and women had almost the same belief levels overall.
- However, when looking at both religion and gender together, the results showed that the connection between a person's religion and how strongly they believe can change depending on whether they're male or female.
- All in all, this part of the study explained a lot about why people differed in their belief levels, making it one of the stronger findings in the research.

Table 7**Comparative Overview of Physical Health Across Subgroups**

Factor	Sum of Squares	df	Average Square	F	Sig.
Model	158.842a	7	22.692	1.016	.439
Intercept	23649.454	1	23649.454	1058.536	.000
Religion	28.366	3	9.455	0.423	.738
Gender	0.135	1	0.135	0.006	.939
Religion * Gender	136.075	3	45.358	2.030	.129
Error	714.933	32	22.342		
Total	25031.000	40			
Adjusted Total	873.775	39			

Interpretation

- Across different religious groups, people showed similar levels of physical health, there weren't any meaningful differences based on religion. Gender also didn't seem to make a difference, as men and women reported almost the same health levels.

- When looking at both religion and gender together, the results showed a slight pattern, but it wasn't strong enough to draw clear conclusions.
- Overall, this part of the study gave us a small glimpse into what might affect physical health, but most of the differences remained unexplained by these factors.

Table 8**Group Comparison of Psychological Well-Being Across Demographics**

Factor	Sum of Squares	df	Average Square	F	Sig.
Model	84.317a	7	12.045	0.745	.636
Intercept	16150.004	1	16150.004	999.259	.000
Religion	0.004	3	22.200	1.374	.269
Gender	19.017	1	0.004	0.000	.987
Religion * Gender	517.183	3	6.339	0.392	.759
Error	17004.000	32	16.162		
Total	25031.000	40			
Adjusted Total	601.500	39			

Interpretation

- When it came to emotional well-being and mental health, people from different religious groups scored similarly. Gender also had no impact, men and women reported nearly identical levels of psychological health.
- Looking at both religion and gender together didn't reveal any meaningful patterns either.
- Overall, this part of the study offered only a limited understanding of what might influence a person's psychological health. The findings didn't strongly apply beyond the group that took part in the research.

Table 9

Variation in Social Relationship Quality by Faith and Gender

Factor	Sum of Squares	df	Average Square	F	Sig.
Model	168.092a	7	24.013	1.643	.157
Intercept	20638.377	1	20638.377	1412.599	.000
Religion	68.255	3	22.752	1.558	.218

Gender	56.090	1	56.090	3.840	.059
Religion * Gender	61.744	3	20.581	1.409	.258
Error	467.408	32	14.606		
Total	21274.000	40			
Adjusted Total	635.500	39			

Interpretation

- Participants from different religions reported fairly similar experiences when it came to their social lives, there were no strong differences across groups. Gender came close to making a difference, with a slight pattern suggesting that men and women might relate to others differently, but it wasn't strong enough to be considered clear or certain.
- Looking at both religion and gender together also didn't reveal anything major about people's social relationships.
- Altogether, this part of the study explained a small to moderate amount of the differences seen in how people connect with others.

Table 10**Assessment of Perceived Environmental Quality Based on Faith and Gender**

Factor	Sum of Squares	df	Average Square	F	Sig.
Model	437.050a	7	62.436	2.097	.071
Intercept	38453.504	1	38453.504	1291.288	.000
Religion	314.342	3	104.781	3.517	.027
Gender	14.403	1	14.403	0.483	.492
Religion * Gender	108.305	3	36.102	1.213	.320
Error	951.450	32	29.733		
Total	39894.000	40			
Adjusted Total	1388.500	39			

Interpretation

- People from different religious backgrounds reported noticeable differences in how satisfied they felt with their surroundings, such as safety, access to resources, and living conditions. This shows that one's religious group may play a role in how they experience their environment.
- There was no meaningful difference between men and women in this area. When religion and gender were considered together, they also didn't seem to shape environmental quality of life in any clear way.
- Overall, this part of the study explained a fair portion of why people's experiences with their environment varied, offering one of the stronger patterns seen in the findings.

Table 11

Demographic Impact on Combined Quality of Life Measures

Factor	Sum of Squares	df	Average Square	F	Sig.
Model	56.087a	7	8.012	0.862	.546
Intercept	17422.657	1	17422.657	1874.670	.000

Religion	9.914	3	3.305	0.356	.785
Gender	0.824	1	0.824	0.089	.768
Religion * Gender	44.911	3	14.970	1.611	.206
Error	297.399	32	9.294		
Total	18067.063	40			
Adjusted Total	353.486	39			

Interpretation

- Participants from different religious groups reported similar overall quality of life, with no meaningful differences between them. Men and women also had nearly the same scores, showing no major gap based on gender.
- Even when looking at religion and gender together, there was no clear pattern in how they influenced overall life satisfaction.
- This part of the study offered only a limited explanation for why people's quality of life differed, and the results likely don't apply much beyond the specific group that was studied.

CORRELATION**Table 1****Pearson Correlation Matrix Displaying Relationships Among Big Five Traits**

Variables	Extraversion	Openness	Conscientiousness	Agreeableness	Neuroticism
Extraversion	—	.158	.078	.008	-.271
		.334	.628	.960	.088
Openness		—	.189	.117	-.088
			.251	.479	.603
Conscientiousness			—	.134	-.157
				.416	.338
Agreeableness				—	-.186

					.258
Neuroticism					—

Upper triangle = Pearson correlation coefficients (r); lower triangle = Sig. (2-tailed).

Interpretation

- No correlations among the Big Five traits reached statistical significance at $p < .05$.
- The clearest downward trend was seen between extraversion and neuroticism ($r = -.271$, $p = .088$), meaning that people who were more outgoing tended to show fewer signs of emotional distress, though the pattern wasn't strong enough to draw firm conclusions.
- All other correlations were weak and not statistically meaningful.

Table 2

Pearson Correlation Between Personality Traits and Religious Beliefs (N = 40)

Variables	Religious Beliefs
Extraversion	-.155

	.351
Openness	-.022
	.892
Conscientiousness	-.046
	.786
Agreeableness	.016
	.927
Neuroticism	.905
	.905

Upper row = Pearson correlation coefficient (r); lower row = Sig. (2-tailed).

Interpretation

- There was no noticeable pattern between any of the Big Five personality traits and the strength of participants' religious beliefs.
- The relationships were all weak, with **p-values well above .05**, indicating no meaningful linear association between personality and religiosity in this sample.
- The most noticeable downward trend, though not a strong one, was between extraversion and religious beliefs ($r = -.155$, $p = .351$), suggesting that more outgoing individuals may have reported slightly lower levels of belief.

Table 3

Pearson Correlation Between Personality Traits and Quality of Life Domains (N = 40)

Personality Trait	Physical Health	Psychological Health	Social Relationships	Environment	Total QOL Score
Extraversion	.282	.318	.340	.318	.358
	.080	.046	.031	.046	.022
Openness	-.022	-.072	-.062	-.135	-.079

	.891	.660	.705	.416	.633
Conscientiousness	.099	.216	.154	.295	.249
	.554	.180	.349	.065	.113
Agreeableness	.006	.061	.136	.167	.141
	.971	.710	.413	.306	.397
Neuroticism	-.406	-.379	-.344	-.320	-.422
	.009	.016	.029	.044	.006

Upper row = Pearson correlation coefficient (r); lower row = Sig. (2-tailed).

Interpretation

1. Extraversion was positively linked to the following areas:

- Psychological Health ($r = .318$, $p = .046$)
- Social Relationships ($r = .340$, $p = .031$)
- Environment ($r = .318$, $p = .046$)
- Total QOL Score ($r = .358$, $p = .022$)

2. **Neuroticism** showed significant **negative** correlations with:

- Physical Health ($r = -.406$, $p = .009$)
 - Psychological Health ($r = -.379$, $p = .016$)
 - Social Relationships ($r = -.344$, $p = .029$)
 - Environment ($r = -.320$, $p = .044$)
 - Total QOL Score ($r = -.422$, $p = .006$)
-
- Other traits (Openness, Conscientiousness, Agreeableness) did not show statistically significant associations with any domain of quality of life.

Table 4

Pearson Correlation Between Religious Beliefs and Quality of Life Domains (N = 40)

Quality of Life Domain	Religious Beliefs
Physical Health	.155
	.351

Psychological Health	.208
	.196
Social Relationships	.069
	.679
Environment	.160
	.337
Total QOL Score	.154
	.353

Upper row = Pearson correlation coefficient (r); lower row = Sig. (2-tailed).

Interpretation

- No significant correlations were found between religious beliefs and any domain of quality of life.
- All p-values were well above .05, indicating no statistically meaningful linear association.

- The most noticeable upward trend was between religious beliefs and psychological health ($r = .208$, $p = .196$), suggesting that those with stronger beliefs tended to report slightly better emotional well-being, even if the link wasn't firm.

HYPOTHESIS TESTING

Null Hypotheses (H_0) and Their Outcomes

Hypothesis	Null Hypothesis Statement	Statistical Result	p-value	Decision
H_{01}	There wasn't a clear connection between adaptive personality traits (conscientiousness, emotional stability) & quality of life.	Neuroticism \rightarrow Total QOL: $r = -.422$.006	Rejected
H_{02}	Religious belief levels are not significantly associated with quality of life scores.	Religious Belief \rightarrow Total QOL: $r = .154$.353	Not Rejected

H ₀₃	No meaningful differences were found in quality of life scores among young adults from different religious groups.	ANOVA (Religion → Environment): F = 3.517	.027	Rejected
H ₀₄	Personality traits and religious beliefs do not interact significantly to predict variations in quality of life.	ANOVA (Religion × Gender → Total QOL): F = 1.611	.206	Not Rejected

Alternate Hypotheses (H₁) and Their Outcomes

Hypothesis	Alternate Hypothesis Statement	Statistical Result	p-value	Decision
H ₁₁	People with more adaptive personality traits tended to report	Neuroticism significant;	.006, .113	Partially Accepted

	better overall quality of life.	Conscientiousness not significant		
H ₁₂	Participants with stronger religious beliefs generally reported a higher quality of life.	No significant correlation with any QOL domain	.353 (Total QOL)	Rejected
H ₁₃	Quality of life scores varied noticeably across young adults from different religious groups.	Significant difference in Environment domain via ANOVA	.027	Accepted
H ₁₄	Personality traits and religious beliefs interact significantly to predict variations in quality of life.	No significant interaction effect	.206	Rejected

SUMMARY OF FINDINGS

1. ANOVA Findings:

- Religion played a noticeable role in shaping levels of extraversion, strength of belief, and satisfaction with environmental aspects of life.
- Gender did not appear to have a meaningful impact on any of the variables assessed in the study.
- The only area where religion and gender together made a noticeable difference was in the strength of religious beliefs.
- No significant effects were found for total quality of life based on religion, gender, or their interaction.

2. Correlation Findings:

- Higher levels of extraversion were clearly linked to better psychological well-being, stronger social connections, greater satisfaction with the environment, and overall quality of life, all showing meaningful patterns in the data.
- Neuroticism showed statistically significant negative correlations with all quality of life domains, including the total QOL score.
- The other traits openness, conscientiousness, and agreeableness showed no clear link to either religious beliefs or quality of life in this study.
- Religious beliefs did not significantly correlate with any quality of life domains or personality traits.
- Overall, the data indicate that personality particularly extraversion and neuroticism has a more consistent and significant relationship with quality of life compared to religious beliefs or gender differences.

DISCUSSION

This study examined how personality traits, religious beliefs, and overall quality of life are connected among young adults living in India. Using a combination of two-way ANOVA and Pearson correlation analyses, several important patterns emerged that shed light on how internal dispositions and belief systems relate to subjective well-being.

The strongest and most consistent patterns emerged around the Big Five traits, especially extraversion and neuroticism. Extraversion was linked to better mental well-being, stronger social ties, greater satisfaction with one's surroundings, and higher overall quality of life. These findings are in line with earlier studies showing that people who are more outgoing often maintain more active social lives, emotionally expressive, and resilient in the face of stress (Lucas, 2008; Steel et al., 2008). These characteristics likely enhance perceived well-being, especially in collectivist societies like India, where social connection and group belonging are deeply valued.

On the other hand, neuroticism showed a strong negative link with all areas of quality of life. This supports earlier research suggesting that individuals high in neuroticism often struggle with emotional ups and downs and are more sensitive to stress and increased vulnerability to mental health issues (Malouff et al., 2005). The strong negative correlations observed in this study underscore the psychological burden neuroticism can impose on young adults navigating the developmental challenges of early adulthood.

Interestingly, traits like openness, conscientiousness, and agreeableness didn't show any strong or consistent links with either quality of life or religious belief in this study. While these traits have been associated with well-being in some Western studies, their relevance may be more context-dependent. In the Indian sociocultural environment, traits like

extraversion and emotional stability may exert stronger influence on subjective well-being due to their connection with interpersonal functioning and emotional regulation.

With respect to religious beliefs, the findings were nuanced. While religion as a categorical variable showed significant main effects in some ANOVA results (notably on extraversion and environmental quality of life), the intensity of religious belief—as measured by the Religious Belief Scale, did not significantly correlate with any quality of life domain. This suggests that religious affiliation may have more visible behavioral or cultural implications than personal religiosity in this sample. The significant interaction between religion and gender in shaping religious beliefs also indicates that religious experience may differ across genders in subtle ways, likely influenced by social norms, role expectations, and internalized cultural values.

The lack of significant correlations between religious beliefs and quality of life may reflect a more institutionalized or identity-based approach to religion among young Indian adults, as opposed to a deeply internalized spiritual experience. Alternatively, it may point to the complex role of religion in India, where religious identity often intersects with sociopolitical structures rather than psychological functioning alone.

The findings also revealed that gender had minimal influence on personality traits, religious beliefs, or quality of life. This may reflect increasing gender parity among educated young adults in urban Indian contexts, although the relatively small sample size calls for cautious interpretation.

Overall, the results suggest that personality traits particularly extraversion and neuroticism are more consistent predictors of quality of life than religious beliefs or gender. These results lend support to personality-based views of well-being and emphasize how emotional balance and healthy social connections contribute to greater life satisfaction.

Theoretical Implications

To begin with, the findings strengthen the relevance of the Five-Factor Model in understanding how personality traits relate to an individual's overall sense of well-being. The significant associations observed between extraversion and higher quality of life domains, and between neuroticism and reduced well-being, are consistent with trait-based theories of personality (McCrae & Costa, 1991). This supports the theoretical view that dispositional traits influence emotional experiences, stress regulation, and interpersonal functioning, core components of psychological health and social satisfaction.

Secondly, the weak or non-significant role of religious beliefs in predicting quality of life raises questions about the universality of the religiosity–well-being link. The present findings suggest that this link may not generalize equally across age groups or cultural settings. This indicates a need for more culturally grounded theories that account for the institutional versus experiential nature of religiosity, particularly in collectivist, religiously pluralistic societies like India.

Thirdly, the lack of gender differences across most variables implies a potential shift in the traditional gendered experiences of religiosity and psychological functioning among Indian youth. This points toward a theoretical evolution in gender-role internalization and its diminishing impact on subjective experiences in younger, more educated populations.

Practical Implications

- **Personality-focused interventions:** Given the strong association between extraversion and higher life quality and the negative impact of neuroticism, mental health professionals and counselors working with young adults may benefit from integrating trait-informed approaches. Interventions like (CBT) can be adapted to help emotional instability and anxiety in individuals high in neuroticism, while strategies that encourage social engagement and emotional expressiveness may help those with lower extraversion levels.
- **Career guidance and personal development programs:** Educational institutions and training centers could incorporate personality assessment tools into career counseling and life-skills modules. Students with lower psychological health scores and higher neuroticism may benefit from targeted stress management workshops, emotional regulation training, and resilience-building exercises.
- **Culturally sensitive mental health programming:** The minimal role of religious beliefs in predicting quality of life suggests that psychosocial interventions should not rely solely on faith-based frameworks when working with young adults. Instead, more emphasis should be placed on psychological education, life satisfaction, and individualized coping strategies, especially in secular or interfaith environments.
- **De-emphasizing demographic assumptions:** Since gender and religion did not significantly predict most well-being outcomes, practitioners should be cautious of overgeneralizing based on demographic categories. A more individualized and evidence-based approach grounded in psychological profiles rather than identity

labels may lead to more effective support systems for young adults.

- **Policy-level applications:** Stakeholders involved in youth mental health policy may use these insights to advocate for the inclusion of personality development and emotional well-being curricula in higher education, especially as India grapples with rising psychological distress among its youth population.

Limitations

- **Sample size and generalizability:** The study was based on a sample of 50 participants, which, although stratified by religion and gender, remains relatively small for generalizing to the broader population of young Indian adults. The limited sample size may have reduced the statistical power to detect smaller effect sizes.
- **Self-report measures:** The study relied on self-reported questionnaires, which can be influenced by factors like social desirability, participant fatigue, or biased self-perception. This means some individuals may have exaggerated or downplayed certain traits or experiences especially in areas that are culturally sensitive, such as religious beliefs and mental health.
- **Cross-sectional design:** This study used a cross-sectional design, meaning the data were gathered at only one moment in time. As such, it cannot determine causality or the direction of relationships between variables only associations.
- **Potential sampling bias:** Although stratified sampling by religion was employed, participants were recruited online through a Google Form, which may have limited

participation to those with access to the internet and a certain level of digital literacy introducing a socioeconomic bias.

- **Unmeasured variables:** The study did not control for potentially influential factors such as socioeconomic status, family environment, educational background, or urban–rural residence, which may also affect quality of life and religious orientation.

Recommendations for Expanding the Research Scope

- **Broaden sample size and diversity:** Future research should aim to include a larger and more demographically varied group of participants. Drawing individuals from different regions, income levels, and educational backgrounds across India would help create a more accurate and generalizable picture of the patterns explored in this study.
- **Incorporate longitudinal designs:** A longitudinal research framework could help determine the directionality and stability of relationships between personality traits, religious beliefs, and quality of life over time. This would clarify whether personality traits lead to changes in well-being, or whether well-being itself influences personality development.
- **Include additional psychological constructs:** Expanding the scope of research to include variables such as coping styles, emotional intelligence, resilience, or spirituality may offer a more comprehensive model of predictors influencing young adults' quality of life.

- **Use mixed-method approaches:** Complementing quantitative data with qualitative interviews or focus groups could provide contextual depth and cultural nuance.
- **Contextual adaptation of tools:** While standardized tools were used in this study, future research may consider culturally adapting or validating measurement instruments to better capture the lived experiences of Indian participants, particularly when measuring religiosity or personality.
- **Explore identity intersections:** Future studies can also investigate how religion intersects with gender, caste, and community norms to shape psychological outcomes, especially in collectivist cultures where such identities often overlap and interact.

CONCLUSION

This research explored how personality traits, levels of religious belief, and overall quality of life among young Indian adults, using a quantitative framework involving stratified sampling and standardized psychometric tools. The results revealed that **extraversion and neuroticism** as significant predictors of various quality of life domains. Extraversion was positively linked with psychological, social, environmental, and overall well-being, while neuroticism showed significant negative correlations across these same areas.

In contrast, **religious beliefs**, though often considered a source of meaning and coping in psychological literature, did not show any meaningful connection with life quality dimension. Moreover, demographic variables such as **gender** and **religious affiliation** generally had limited predictive value, with the exception of a few interaction effects. These findings point to the **primacy of dispositional psychological factors over sociocultural identifiers** in shaping young adults' perceived well-being.

The study contributes to ongoing conversations in personality psychology, positive psychology, and cross-cultural mental health by highlighting the importance of conducting more detailed and culturally informed research within non-Western populations. While the study's scope was constrained by sample size and methodology, the patterns observed suggest meaningful avenues for further theoretical and applied exploration. As India continues to undergo rapid sociocultural transitions, understanding the psychological makeup of its emerging adult population remains essential for informing future mental health initiatives, educational strategies, and policy planning.

REFERENCES

- Ano, G. G., & Vasconcelles, E. B. (2005). Religious coping and psychological adjustment to stress: A meta-analysis. *Journal of Clinical Psychology*, 61(4), 461–480.
<https://doi.org/10.1002/jclp.20049>
- Arnett, J. J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. *American Psychologist*, 55(5), 469–480.
<https://doi.org/10.1037/0003-066X.55.5.469>
- Choudhary, P., & Shukla, R. (2018). Personality traits and religious orientation: A study of Indian adolescents. *Indian Journal of Positive Psychology*, 9(3), 322–326.
- Church, A. T. (2016). Culture and personality. In D. Matsumoto & H. C. Hwang (Eds.), *The handbook of culture and psychology* (2nd ed., pp. 317–351). Oxford University Press.
- Cohen, J. (1988). *Statistical power analysis for the behavioral sciences* (2nd ed.). Lawrence Erlbaum Associates.
- Costa, P. T., & McCrae, R. R. (1992). *Revised NEO Personality Inventory (NEO-PI-R) and NEO Five-Factor Inventory (NEO-FFI) professional manual*. Psychological Assessment Resources.
- DeYoung, C. G. (2010). Personality neuroscience and the biology of traits. *Social and Personality Psychology Compass*, 4(12), 1165–1180.
<https://doi.org/10.1111/j.1751-9004.2010.00327.x>
- Field, A. (2013). *Discovering statistics using IBM SPSS statistics* (4th ed.). SAGE Publications.

- Hill, P. C., & Hood, R. W., Jr. (1999). *Measures of religiosity*. Religious Education Press.
- Hill, P. C., & Pargament, K. I. (2008). Advances in the conceptualization and measurement of religion and spirituality: Implications for physical and mental health research. *Psychology of Religion and Spirituality*, *S*(1), 3–17. <https://doi.org/10.1037/1941-1022.S.1.3>
- IBM Corp. (2017). *IBM SPSS Statistics for Windows (Version 25)* [Computer software]. IBM Corp.
- John, O. P., & Srivastava, S. (1999). The Big Five trait taxonomy: History, measurement, and theoretical perspectives. In L. A. Pervin & O. P. John (Eds.), *Handbook of personality: Theory and research* (2nd ed., pp. 102–138). Guilford Press.
- Koenig, H. G. (2012). Religion, spirituality, and health: The research and clinical implications. *ISRN Psychiatry*, 2012, Article 278730. <https://doi.org/10.5402/2012/278730>
- Krause, N. (2008). *Aging in the church: How social relationships affect health*. Westminster John Knox Press.
- Kumar, A., & Pal, S. (2016). Religion and well-being: Evidence from India. *Journal of Religion and Health*, *55*(2), 406–419. <https://doi.org/10.1007/s10943-015-0016-8>
- Lodi-Smith, J., & Roberts, B. W. (2007). Social investment and personality: A meta-analysis of the relationship between personality traits and social roles. *Journal of Personality*, *75*(5), 1051–1080. <https://doi.org/10.1111/j.1467-6494.2007.00463.x>
- Lucas, R. E. (2008). Personality and subjective well-being. In M. Eid & R. J. Larsen (Eds.), *The science of subjective well-being* (pp. 171–194). Guilford Press.

Malouff, J. M., Thorsteinsson, E. B., & Schutte, N. S. (2005). The relationship between the five-factor model of personality and symptoms of clinical disorders: A meta-analysis. *Journal of Psychopathology and Behavioral Assessment*, 27(2), 101–114.

<https://doi.org/10.1007/s10862-005-5384-y>

McCrae, R. R., & Costa, P. T., Jr. (1991). Adding Liebe und Arbeit: The full five-factor model and well-being. *Personality and Social Psychology Bulletin*, 17(2), 227–232.

<https://doi.org/10.1177/014616729101700217>

McCrae, R. R., & John, O. P. (1992). An introduction to the five-factor model and its applications. *Journal of Personality*, 60(2), 175–215.

<https://doi.org/10.1111/j.1467-6494.1992.tb00970.x>

McCullough, M. E., & Willoughby, B. L. (2009). Religion, self-regulation, and self-control: Associations, explanations, and implications. *Psychological Bulletin*, 135(1), 69–93.

<https://doi.org/10.1037/a0014213>

Nelson, S. K., Allen, N. B., & Hauck, C. (2015). Quality of life and life satisfaction in emerging adulthood. *Emerging Adulthood*, 3(4), 240–247.

<https://doi.org/10.1177/2167696814549001>

Pargament, K. I. (1997). *The psychology of religion and coping: Theory, research, practice*. Guilford Press.

Pargament, K. I., Smith, B. W., Koenig, H. G., & Perez, L. (2004). Patterns of positive and negative religious coping with major life stressors. *Journal for the Scientific Study of Religion*, 43(4), 710–724. <https://doi.org/10.1111/j.1468-5906.2004.00218.x>

Roth, N. M., & Kroll, J. (2016). Religion and quality of life: A global perspective. *Journal of Religion and Health*, 55(5), 1501–1518. <https://doi.org/10.1007/s10943-015-0086-7>

Saroglou, V. (2010). Religiousness as a cultural adaptation of basic traits: A five-factor model perspective. *Personality and Social Psychology Review*, 14(1), 17–36. <https://doi.org/10.1177/1088868309353418>

Schulenberg, J., & Schoon, I. (2012). The transition to adulthood across time and place: Overview of special section. *Developmental Psychology*, 48(6), 1501–1504. <https://doi.org/10.1037/a0031126>

Smith, T. B., McCullough, M. E., & Poll, J. (2003). Religiousness and depression: Evidence for a main effect and the moderating influence of stressful life events. *Psychological Bulletin*, 129(4), 614–636. <https://doi.org/10.1037/0033-2909.129.4.614>

Steel, P., Schmidt, J., & Shultz, J. (2008). Refining the relationship between personality and subjective well-being. *Psychological Bulletin*, 134(1), 138–161. <https://doi.org/10.1037/0033-2909.134.1.138>

Srinivasan, N., & Raj, S. (2014). Religion and mental health in Indian youth: A review. *Indian Journal of Positive Psychology*, 5(3), 266–271.

Verma, S., & Saraswathi, T. S. (2002). Adolescence in India: Street children and working children. In B. B. Brown, R. W. Larson, & T. S. Saraswathi (Eds.), *The world's youth: Adolescence in eight regions of the globe* (pp. 65–89). Cambridge University Press.

World Health Organization. (1998). *Development of the World Health Organization WHOQOL-BREF quality of life assessment*. *Psychological Medicine*, 28(3), 551–558. <https://doi.org/10.1017/S0033291798006667>

World Health Organization. (1998). *WHOQOL-BREF: Introduction, administration, scoring and generic version of the assessment.*

<https://www.who.int/publications/i/item/WHOQOL-BREF>