Confirmatory Analysis of the Indonesian Version of the Centrality Religiosity Scale

[1]SUCI NUGRAHA, [2]ELIZABETH KRISTI POERWANDARI, [3]DHARMAYATI B. UTOYO

[1]Doctoral Student at the Faculty of Psychology, Universitas Indonesia, [2]Lecturer at the Faculty of Psychology at Universitas Islam Bandung, [3]Lecturer at the Faculty of Psychology, Universitas Indonesia
Email: [1]sucinugraha.psy@gmail.com,[2]kpoerwandari@gmail.com, [3]yatibu@ui.ac.id

Abstract. Religiosity in studies of sociology and psychology of religion is generally measured by using a scale constructed for a particular religious tradition. The Centrality of Religiosity Scale (*CSR*) developed by Huber & Huber (2012) is a religiosity measure scale that can be used by adherents of different religions. Research on religiosity in heterogeneous Indonesian society requires an instrument that can be used by various religious adherents. The purpose of this study is to translate and test the reliability and validity of CSR from English to Indonesian. The translated CRS is a 15-item version that is divided into 5 dimensions, namely ideology, knowledge, experience, public worship, and private worship. This study was conducted in 2 stages. It began with translating the English version of the CRS-15 measuring instrument into Indonesian which was carried out using the back forward translation method from Brislin (1980). The next stage was to test the psychometric appropriateness of CRS-15 using confirmation analysis which was conducted on data from 328 research respondents who were recruited using a convenient sampling technique. The results of statistical analysis showed satisfactory reliability results (ɑ=.787). In addition, it was also indicated that the Indonesian version of the CRS consists of 14 items and could be used in studies of religiosity in Indonesian-speaking communities.

Keywords: religious centrality scale, religiosity, personality psychology

Introduction

Even though spirituality and religiosity are closely related, they have different definitions so that these concepts need to be considered as two separate constructs for research purposes. Spirituality is defined as a set of inner experiences and feelings, which individuals use to search for meaning, purpose, and relationships between themselves, family, other people, society, nature that are important or sacred to them (Baumsteiger & Chenneville, 2015; Austin et al., 2017). Religiosity is often defined as adherence to beliefs, doctrines, ethics, rituals, texts, and practices associated with the highest power individually and in groups (Hood et al., 2009). Research on religiosity is associated with many other variables such as feelings of coherence with the environment (Zarzycka, et al., 2014), the industrial sector (Asamani & Mensah, 2016; Amaliah et al., 2020), and also health psychology, particularly in the management of chronic disease patients (Austin, et al., 2017). These studies are generally carried out in community groups or populations that adhere to certain religions.

One of the measurement instruments that is often used to examine the level of religiosity is the instrument developed by Wilkes et al., (1986), which is a scale designed to measure four basic factors of religiosity: (1) self-perceived religiousness; (2) the importance of religious ethics; (3) church attendance; and (4) assurance in religious norms. Aziz and Rehman (1996)

developed a Religiosity Index (IR) which has 27 seven items to assess three dimensions of religiosity among adherents of Islam such as (1) religious effect, (2) doctrine, and (3) belief. King et al., (2001) developed a Spiritual Confidence scale consisting of 6 items designed to measure an individual's spiritual beliefs. Krauss et al., (2005) designed the MRPI, which aims to measure an individual's Islamic view and the depth of religious personality possessed by an individual. De Vries-Schot et al., (2008) developed the Religious Maturity Scale which aims to measure inner freedom and dependence on God who instills the whole of life and the responsibility to take care of humans.

The scale that is very often used in religiosity research is the one compiled by Glock and Stark (1965) which measures religiosity from a sociological perspective and looks at religiosity from how similar a person's behavior meets societal expectations related to religious behavior. The concept of religiosity from Glock and Stark (1965) measures the intellectual, ideology, public practice, private practice, and experience domain. Glock's research on religiosity focuses on the Christian tradition (Stark & Glock, 1968) so that the indicators used to build the model of religiosity have a Christian bias that contradicts his theoretical claims about universality. In addition to the problem of universality is the problem of the difficulty to distinguish the five dimensions of religiosity operationally (Huber & Huber, 2012).

To overcome such a problem, the CRS is constructed so that the items are closely related to the typical expressions of each dimension and become universal. The religious content measured must be a general concept in terms of religiosity and relevant but meaningful in the context of different religious traditions (Huber & Huber, 2012). The psychological basis in developing CRS is the theory of Allport and Ross (1967) regarding intrinsic and extrinsic religious orientation. This theory explains the motives behind religious behavior. Intrinsic orientation is the belief in practicing religion for its own sake and extrinsic is the belief in practicing religious activities to gain social approval. Another theory that forms the conceptual basis for CRS is the personality theory of Kelly (1955) regarding the theory of personal construct. In this theory, individual differences are the result

of the individual's perception and prediction of an event. Kelly (1955) defines it as a personal construct. The term refers to the way individuals obtain information from the world around them and build hypotheses based on that meaning. The process is similar to that of a scientist constructing a hypothesis and testing his thought. Based on the results of these tests, individuals construct unique ways to interact with the world.

The CRS measures "total religious life" and is intended to be used to measure the religiosity of adherents of different religions (Huber & Huber, 2012). For this reason, CRS is constructed to measure the intensity of five dimensions of religiosity which are generically found in all religious behaviors. These five dimensions are explained by the frequency and intensity of religious activation in the personality system and the central position of religious constructs in personality which will increase the frequency and intensity of activation of religiously appropriate values or views in processing information from the environment (Huber & Huber, 2012).

CRS consists of five basic dimensions of religiosity, namely the intellectual dimension which refers to people's expectations about the knowledge that individuals should know about their religion and how they express opinions about their relationship with God, religion, and religiosity. Psychologically, in the personal construct, this dimension will be seen from interests, ways of thinking, and giving meaning to the environment. One characteristic of religious people is that they tend to think and find out about matters related to their religion. The second dimension is ideology, namely the belief that religious people have a rational view of the existence of God and the relationship between humans and God. The dimension of public practice as the third dimension is the belief that religious people will perform communal religious rituals, for example, the participation of Christians in church activities, Muslim ritual activities in mosques especially on the occasion of Friday prayers and Eid prayers, worship in temples for Hindus, etc. The fourth dimension is the dimension of personal practice, namely the belief that religious people often have a dialogue with their God during their worship every day, such as salah/praying for Muslims, praying and reading Bible verses for Christians, and meditating or praying for Hindus and Buddhists. The last dimension is

a religious experience which explains that religious people experience God's 'presence/ influence/intervention' in their lives.

There are 3 versions of the CRS, namely 15 items (CRS-15), 10 items (CRS-10), and 5 items (CRS-5) that can be used by people with different religious traditions and have the concept of monotheistic God such as Islam, Judaism, and Christianity. To accommodate polytheistic religious practices such as Buddhism and Hinduism, on a scale for adherents of these religions, the concept of God is changed to divine power (Huber & Huber, 2012). This study is important for researchers in the field of psychology of religion who are interested in investigating the level of religiosity in the Indonesian-speaking population. With an instrument that can measure the level of religiosity in populations of people who follow different religions, researchers will have both theoretical and practical advantages. Theoretically, researchers will be able to review this religious problem through the same concept and are universal for many religious traditions. Practically, this instrument will increase the efficiency of research because there is no need to use a variety of different tools to measure the religiosity of people of different religions such as in Indonesia.

CRS-15 has been translated and tested in various countries. Gheorghe (2019) translated CRS-15 in Romanian with more than 200 participants with different faiths/ religions. The Romanian version of the CRS-15 showed good discriminant validity and a high degree of reliability, except for item 7 relating to beliefs in the afterlife (e.g., the immortality of the soul, reincarnation) which is thought to lead to different interpretations of non-Christian religious traditions (Gheorghe, 2019). Research in Poland examined the relationship between centrality and feelings of coherence in adolescents, adults, and parents (Zarzycka, 2008; Zarzycka & Rydz, 2014). In that study, the Cronbach alpha value for the CRS-15 Polish translation was 0.94 with a coefficient subscale ranging from 0.80 to 0.89 (Zarzycka & Rydz, 2014). In African cultures, religiosity as measured by CRS-15 is associated with organizational behavior in the Ghana region (Asamani & Opoku Mensah, 2016). The reliability coefficient of CRS-15 in this study was 0.827. In the Asian context, CRS-15 validation in Urdu Pakistan was carried out on 300 participants (Abbasi et al., 2019). The

results of the confirmatory analysis show that CRS-15 in Pakistani culture and Urdu language has three dimensions (renamed to exclusive beliefs, inclusive beliefs, and collective beliefs) and consists of 11 items. A study in the Philippines that examined the relationship between religiosity as a predictor of prosocial behavior found total reliability of CRS-15 of 0.902 (Batara, 2018). This study also succeeded in finding that religiosity as measured by CRS-15 is related to religious identity and the importance of faith in everyday life (Huber & Krech, 2008; Batara, 2018).

The majority of studies on religion use Western concepts to understand religion (Höllinger & Eder, 2016), whereas, the term "as a religious person" is fundamentally different between Western and Asian societies (Lee & Kuang, 2020). CRS-15 was originally developed for a Western context and has since been extended to 'Eastern' religions. Studies have demonstrated the validation of the CRS-15 factor structure in Western culture and several Asian countries, such as the Philippines (Batara, 2018), Thailand, South Korea, and Indonesia (Huber & Huber, 2012).

Indonesia is a country whose population consists of different religious adherents. CRS-15 was translated once into Bahasa Indonesia intended for use by Muslims/Islam adherents (Wardhani & Dewi, 2015), which is the religion followed by most of the Indonesian population. With the diversity of religions in Indonesia, the researcher sees the need for a scale of religiosity instrument that can be used by adherents of religions in Indonesia. Therefore, the purpose of this study is to translate, interpret and equalize perceptions about CRS-15 and to test the psychometric property of the Indonesian translation of CRS-15 with a sample of Indonesian people.

Research Methodology

This research was conducted in 2 steps. Step one was translating CRS-15 from English into Indonesian, and step two was the development of psychometric appropriateness using confirmatory analysis to assess the factorial structure of CRS-15 and the correlation between subscales on CSR-15. Participants were recruited through the convenient sampling technique. The data were taken online by using Google Form. The number of questionnaires filled in was

425, the appropriate data were 328.

Measuring Tool. The instrument translated is The Centrality of Religiosity Scale 15 items or CRS-15i (inter-religion) which accommodates Buddhist traditions and other spiritual beliefs besides Islam and Christians. This CRS scale consists of five basic dimensions of religiosity, namely intellectual, ideological, public worship practices, private worship practices, and religious experiences. The five dimensions were measured using a five-point Likert scale. Each statement has 5 alternative answers (1 = never to 5 = very often). The intellectual dimension consists of 3 items (1, 6, 11), ideology consists of 3 items (2, 7, 12), the public practice dimension contains 3 items (3, 8, 13), private practice contains 3 items (4, 9, 14), a religious experience which has 3 items (5, 10, 15), and when all dimensions are summed up it indicates the overall level of individual religiosity. The range of reliability of CRS-15 that has been found in previous studies was between = 0.73 to 0.83.

Research Step I: Translating the English version of the CRS-15 into Indonesian

Participants. Step one was carried out by seven people, namely, two people with a background in psychology who were in charge of translating CRS-15 from English to Indonesian, a translator with a background in comparative religion, a professional translator, and three people who do not have a background in psychology and religion who were in charge of reading the translated items. The translation results obtained from psychology background translators were then re-translated into English by professional translators. The next process was the equalization of the results of the translation which was carried out through discussions with comparative religion experts. The results of the discussion were then read by three people who were given the task of reading the translation and going through an interview process aimed at getting the Indonesian version of the CRS-15 data to be understood.

Procedure. The research activities were carried out based on the procedures proposed by Brislin (1980) and Wild et al., (2005) with the following steps: (1) CRS-15 was translated by two translators separately; (2) Discussion to see the equality of translation results; (3) Professional translators translate the Indonesian version

of CRS-15 into English: (4) Compare the results of the translation in point 3 with the English version of CRS-15. The differences found in the retranslation into English were resolved through agreement on the Indonesian translation which was deemed not to reduce the meaning of the constructs measured by CRS-15; (5) Based on the results of point 4, the Indonesian version of the CRS-15 item was rewritten (the results of point 2) to have conformity with the daily context of Indonesian culture; (6) The Indonesian version of the CRS-15 was then read by three readers to determine the general public's understanding of the statements of each item.

Research Step II: Testing the Reliability and Validity of CRS-15

The second step of the study is the main study phase which aims to test the reliability and validity of the Indonesian version of the CRS-15. The Cronbach Alpha coefficient was calculated using SPSS 23 and Confirmatory Analysis was conducted using Moment Structure Analysis (AMOS 20). Confirmatory analysis (CFA) was carried out to determine the structure of factors and the correlation between factors in CRS-15.

Procedure. Before participating in research activities, each respondent filled out an *informed consent* to know their rights and obligations during the study and signed it. The scale is given *online*. Respondents were asked to answer carefully on each item according to their circumstances without being given a time limit. After completing and submitting answers, participants were rewarded for their participation and the researcher states that the personal data provided will be kept confidential, will not be published, and will only be used for research purposes.

Sample. This study is a part of a project that explores the role of religiosity as a predictor of health-related quality of life of patients with *systemic lupus erythematosus* (SLE) in Indonesia and has been approved by the Ethics Committee of the Faculty of Psychology, University of Indonesia. The Indonesian language religiosity instrument tool that can measure religiosity in various religious adherents is not yet available, especially for patients with the SLE population. The sample was selected using a convenient sampling technique with inclusion criteria, namely SLE patients aged at least 18 years old and in *low disease*

activity level for the last 6 months before data collection. 425 forms were filled out and 97 did not meet the criteria so that the number of respondents in this study was 328 people. Respondents are members of the Indonesian Lupus Volunteer Community (Reli) whose data were taken from March to June 2020.

Results and Discussions

The results of the research will be elaborated sequentially, starting from the first step followed by the second step. The translation process of CRS-15 refers to the procedure proposed by Brislin (1980) and Wild et al., (2005). The suitability of the model in the CRS-15 confirmatory analysis refers to the opinion of Kline (2011) which is required to report the Chi-square ($\chi2$), p, and RMSEA values. Meanwhile, the CFI and RMR values are data that can be reported. The fit criteria in this model require a small Chi-square ($\chi2$) value, p 0.05; RMSEA 0.05; CFI 0.90 and RMR 0.05.

Step I Results

The results of the first step will be described at each dimension sequentially (intellectual dimensions, ideology, public practice, private practice, and experience dimension). The items on the intellectual dimension on the CRS-15 measure knowledge about religion and how that knowledge is expressed. In the individual personality system, this is represented by interests, way of thinking and giving meaning, and a *body of knowledge* about their religion. The general indicator of this dimension is the frequency of individuals thinking about religious issues which will be measured by how often knowledge about the religion is updated. The dimension indicator does not depend on religious affiliation, so it can be used by various religions. Questions on this dimension (items 1, 6, and 11) relate to the frequency with which individuals think about matters related to religion, the depth of individual interest in studying religious topics, and the frequency with which individuals make efforts to update their knowledge about their religion through various media such as radio, television, internet, newspapers or books.

The ideological dimension is a dimension that measures beliefs about the existence of God and how individuals relate to their God. Characteristics of people with a strong ideological dimension are the existence of an indisputable belief in the existence of God. This belief is basic in all religious traditions that underlie subsequent religious behavior. Questions in this dimension relate to the depth of an individual's belief about the existence of God; belief that Allah or God or divine power is the supreme power; and individual beliefs about life after death. In questions that measure life after death, the translation team omitted sentences that stated examples of life after death.

The dimension of public worship measures the pattern of behavior and sense of belonging to carry out religious activities together with other people. This dimension can be measured easily through the intensity and frequency of attendance in performing rituals with the community in mosques, churches, etc. The items in this dimension translated into questions related to the frequency with which individuals attend religious activities at places of worship, the importance of attending religious activities in places of worship, and the importance of being a member of a religious group. One study among Muslims suggested translating the word '*religious service'* into Friday prayers (Huber & Huber, 2012). Considering that Friday prayers are obligatory prayers for men, the researchers and the translation team took a different approach, by translating them into joint activities in *rumah ibadah*. This is done with the aim that the questions in this dimension apply to adherents of different religions and all gender characteristics.

The next dimension is of private practice which represents the pattern of individual worship as a sign of worship and obedience to God. On the original CRS-15 scale, prayer activity was used to measure this dimension for Muslims, Christians, and Catholics; while on the English CRS-15i, there were additional questions to accommodate religious traditions such as Buddhism and other spiritual beliefs, which Huber termed the 'eastern' religious traditions (Huber & Huber, 2012). The panel of translators agreed to translate the term prayer on the original scale of private practice differently for Muslims and Christians and Catholics. This is done because in Islam private practice consists of obligatory worship and circumcision worship. For Muslims, the most important worship that becomes an indicator of religiosity is the obligatory prayers, which should not be abandoned. Prayer activities

that measure the frequency and importance of the dimensions of personal worship in the CRS-15 are not very appropriate when used to measure the private practice of Muslims. To measure this dimension, the researcher agrees with Huber & Huber (2012) to prioritize the frequency and importance of Sholat as an indicator of personal worship of religious Muslims. Items related to the frequency of Sholat for Muslims are translated into questions about the frequency of Sholat in 1 day with answer choices (5 times a day, 4-3x a day, 2x a day, 1x a day, never). For Catholics or Christians, questions are asked about the frequency of prayer. The items for Buddhists and Hindus measure the frequency with which they perform meditation. Another item from this dimension is a question that measures the importance of private practice for its adherents. Questions for adherents of Islam are related to the importance of sholat for them. Questions for Christians and Catholics measure the importance of praying, while for Buddhists and Hindus they are asked about the importance of meditating. The next item measures the implementation of private practice in everyday life.

The last dimension measured in the CRS-15 is experience. This dimension represents religious feelings and experiences and connection with God. Regarding the differences in the concept of God in monotheistic religions and other beliefs, Huber & Huber (2012) provide additional items to accommodate these differences. For Muslims or Catholics or Christians, questions in this dimension are aimed at measuring the frequency of religious emotional experiences as indicated by the belief that Allah or God determines human life and the belief that Allah or God gives His guidance in everyday life. Meanwhile, Buddhists or Hindus were asked the frequency with which they experience divine intervention in their lives, and their efforts to stay connected with the Almighty when dealing with everyday situations.

Step II Results:

Demographic Profile. The study was conducted on 328 people consisting of 277 Muslims (84.5%), Catholics 24 (7.3%), Christians 20 (6.1%), Buddhists 4 (1.2%), and Hindus 3 people (0.9%). Table 1 shows the demographic profile of the study sample.

Reliability. The internal consistency of CRS-15 was assessed by Cronbach Alpha. The results of the analysis show that the Indonesian version of CRS-15 has acceptable reliability of (0.781), mean of (65.8), and SD of (5.64) based on the scores obtained from 328 samples. Confirmatory analysis was conducted to validate the factor structure and confirm the relationship

Table 1. Socio-demographic Characteristics of Participants

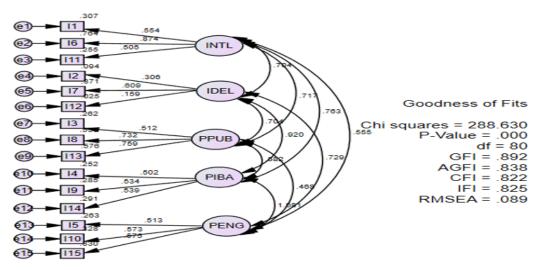|	Mean (± SD) or n (%)
Age	32.05 (±8.67)
Gender	SD
Male	17 (5.2)
Female	211 (94.8)
Education	%
Junior High School	15 (4.6)
Senior High School	153 (46.6)
Diploma	35 (11.3)
Bachelor/Master	123 (37.5)
Etc.	3 (0.9)
Religion	%
Islam	277 (84.5)
Catholic	24 (7.3)
Christian	20 (6.1)
Buddhism	4 (1.2)
Hinduism	3 (0.9)

Figure 1. Theoretical Model of the Indonesian Version of the CRS-15

between the dimensions of the observed indicator and the original factor using AMOS-20.

The results show a sufficient fit of the structural model (figure 1). The result is as follows: CMIN/DF = 80; p = 0.000; RMSEA = 0.089 [0.069; 0.098]; CFI = 0.822. Reliability for this research model is satisfactory but good on the overall scale of 0.787, and Cronbach's Alpha value for each dimension is 0.77; 0.70; 0.76; 0.77; 0.78.

Validity. CFA was conducted to test the validity of items from the Indonesian version of CRS-15, especially to validate the construct structure of the factors in order to confirm the relationship between the observed variables and the main factors. The results of the analysis show that 14 valid items are indicated with a correction value

greater than 0.3, except for 12 invalid items (0.209) (see Table 2).

Discussions

The purpose of this study was to translate CRS-15 from English to Indonesian and test its reliability and validity. The research was conducted in 2 steps. In the first step, the process of translating and interpreting the CRS-15 was carried out. The research activities in this step refer to the process proposed by Brislin (1980) and Wild et al. (2005). The second step was to test the CRS-15 Indonesian version's reliability and validity using a confirmatory analysis.

The result of the first step of research is the Indonesian version of the CRS-15, which consists of 15 items. This

Table 2. Validity Test Results

	Correction Value	Alpha Value When Item is Omitted
1.	.420	.772
2.	.309	.787
3.	.363	.779
4.	.418	.773
5.	.349	.778
6.	.632	.754
7.	.428	.771
8.	.524	.764
9	.441	.781
10	.403	.773
11.	.419	.772
12.	.254	.809
13.	.531	.762
14.	.462	.769
15.	.501	.766

measurement scale is constructed to measure 5 dimensions of religiosity, in which each dimension is measured by 3 items. There are several important things to do in this translation process: (1) Items measuring private practice are interpreted differently for adherents of Islam and Christianity or Catholicism. On the original scale, prayer activities are used as indicators for private practice. For Muslims, prayer activities were translated to *sholat.* This dimension is measured through indicators that measure the frequency, value of sholat, and prayer behavior in daily life; (2) Items that measure beliefs about life after death are translated by omitting some sentences that give examples of life after death. This is done with the consideration that each religious tradition has a different abstraction regarding life after death and omitting the examples mentioned on the original CRS scale which is considered not to reduce the meaning of the item.

The results of the confirmatory analysis revealed that the Indonesian version of the CRS-15 could be relied on as acceptable (α = 0.787). These results support the previous studies that the reliability of the original 2 scales (CRS-10 and CRS-15) was in the range of 0.73 to 0.83 (Huber & Huber, 2012). Each item has a *corrected value* above 0.3. A high value (above 0.3) indicates that the scale item has a correlation or is consistent with the whole scale, which states that the item represents the construct. The results show that all items have an acceptable correlation except for item 12 which has a low correction value, meaning that the item is poorly understood or does not measure the dimensions it represents.

The results of the reliability test on each dimension are as follows: the intellectual dimension in this scale measures interest, skills in finding information about matters related to religion, thinking style and interpreting stimuli, and how much individuals know their religion. People with high intellectual dimensions will show high interest which is indicated by their frequent updating of knowledge about their religion, frequency of thinking about religion or religious issues. The results of translation and analysis in this dimension show that the original item can be translated for use by different religions. The Alpha Cronbach value of 0.78 showed acceptable reliability even close to a good value, meaning that the items in this dimension can be used to measure

interest, knowledge, and behavior in seeking information about their religion. Previous studies conducted in Poland and Hong Kong showed higher results for this dimension (Lee & Kuang, 2020; Zarzycka & Rydz, 2014)

The ideological dimension is measured through 3 items. This dimension assesses beliefs about the existence of God. The results show the reliability which is *accepted* (0.7). Belief in the existence of God is the core of the measurement of a person's belief about his religion. The measurement results on the ideological dimension show consistent results with a good level of reliability (Gheorghe, 2019; Lee & Kuang, 2020). Research in Pakistani Urdu culture shows that factors in this dimension correlate with other factors and form different constructs (Abbasi et al., 2019). This indicates cultural differences in interpreting the existence of God.

The next dimension is public practice. Religious people often participate in communal religious activities. Cronbach's alpha value for this dimension is 0.76, which means that this dimension has an *accepted reliability*. This result is almost similar to the results of previous studies which showed consistent results at a good level of reliability (Gheorghe, 2019; Lee & Kuang, 2020; Zarzycka & Rydz, 2014).

The dimension of private practice is related to individual ritual practices as a form of worship to God. CRS-15 of Indonesian translation has different items for adherents of different religions, where the Cronbach alpha value for this dimension is 0.77 which means it has *accepted* reliability. This result is also in line with the results of previous studies which showed reliability in the range of 0.81 to 0.87 (Gheorghe, 2019; Lee & Kuang, 2020; Zarzycka & Rydz, 2014).

The last dimension is the experience that assesses the individual's religious emotional experience which is perceived as a result of the individual's relationship with his God. Cronbach's alpha value for this dimension is 0.78, which means that this dimension has *accepted* reliability. This value is consistent with the results of previous studies which showed good reliability values (Gheorghe, 2019; Zarzycka & Rydz, 2014).

The original CRS 15 (in the German language) has a high discrimination coefficient so that it can be applied separately to measure a behavioral phenomenon. In

previous studies, the reliability of each religiosity dimension in CRS 15 was in the range of 0.80 to 0.93, overall 0.92 to 0.96 (Huber & Huber, 2012) higher than the results obtained in this study. However, the reliability of the CRS-15 of the Indonesian version has an acceptable value to be used.

Conclusions

The problem to be answered by this study is the need for an Indonesian-language religiosity measurement scale that can be used to measure religiosity among adherents of different religions within the Indonesian context. The existence of such a measurement instrument will be useful for research studies on religiosity, particularly ones focusing on sociology and psychology of religion in Indonesian society whose society consists of various religious adherents. This study showed that the CRS of the Indonesian version is a valid scale with acceptable reliability. It can be concluded that the CRS of the Indonesian version can be used to measure religiosity in Indonesian-speaking individuals.

References

Abbasi, SB, Kazmi, F., Wilson, N., & Khan, F. (2019). Centrality of religiosity scale (CRS) confirmatory factor analysis. *Sociology International Journal*, *3* (4), 319–324. https://doi.org/10.15406/sij.2019.03.00193

Allport, GW, & Ross, JM (1967). Personal religious orientation and prejudice. *Journal of Personality and Social Psychology*, *5 4*, 432–443.

Amaliah, I., Aspiranti, T., & Riani, W. (2020). Religiosity Performance of BMT Leaders and Its Implications to Sukuk Preference. *MIMBAR: Journal of Social and Development*, *36* (2), 401–410. https://doi.org/10.29313/mimbar.v36i2.6145

Asamani, L., & Opoku Mensah, A. (2016). Religion as an Antecedent of Employees' Organizational Citizenship Behavior. *Advances in Social Sciences Research Journal*, *3* (7), 34–45.

Austin, P., Macleod, R., Siddall, P., McSherry, W., & Egan, R. (2017). Spiritual care training is needed for clinical and non-clinical staff to manage patients' spiritual needs. *Journal for the Study of Spirituality*, *7* (1), 50–63. https://doi.org/10.1080/20440243.2017.1290031

Aziz, S., & Rehman, G. (1996). Index of religiosity: The development of an indigenous measure. *Journal of the Indian Academy of Applied Psychology*, *22* (1–2), 79–85.

Batara, JBL (2018). Public Practice of Religion and Prosocial Behavior among Filipino College Students. *Prism*, *23* (1).

Baumsteiger, R., & Chenneville, T. (2015). Challenges to the Conceptualization and Measurement of Religiosity and Spirituality in Mental Health Research. *Journal of Religion and Health*, *54* (6), 2344–2354. https://doi.org/10.1007/s10943-015-0008-7

Brislin, RW (1980). Translation and content analysis of oral and written materials. *Methodology*, 389–444.

de Vries-Schot, M., Pieper Heitink, G., van Uden, M., & Pieper, J. (2008). Healthy Religion and Salutary Faith: Clarification of Concepts from the Perspectives of Psychology, Psychiatry and of Theology. *Journal of Empirical Theology*, *21* (1), 88–108. https://doi.org/10.1163/092229308x310759

Gheorghe, H. (2019). The Psychometric Properties of a Romanian Version of the Centrality of Religiosity Scale (CRS 15). *Religions*, *10* (1). https://doi.org/10.3390/rel10010011

Glock, CY, & Stark, R. (1965). *NoReligion and Society in Tension Title*. Rand McNally.

Höllinger, F., & Eder, A. (2016). Functional equivalence and validity of religiousness indicators in cross-cultural comparative surveys. *Methodological Innovations*, *9*, 2059799115622756.

Hood, RW, Spilka, B., & Hilll, PC (2009). The Psychology of Religion, Fourth Edition: An Empirical Approach. In *The Guilford Press* (4th ed.). https://doi.org/10.1037/h0067109

Huber, S., & Huber, OW (2012). The Centrality of Religiosity Scale (CRS). *Religions*, *3* (3), 710–724. https://doi.org/10.3390/rel3030710

Huber, S., & Krech, V. (2008). The religious field between globalization and regionalization: Comparative perspectives. *What the World Believes: Analyses and Commentary on the Religion Monitor*, 53–93.

Kelly, G. (1955). *The Psychology of Personal Constructs*. Norton.

King, M., Speck, P., & Thomas, A. (2001). The royal free interview for spiritual and religious beliefs: development

and validation of a self-report version. *Psychological Medicine*, *31* (6), 1015–1023. https://doi.org/10.1017/s0033291701004160

Kline, RB (2011). *Principles and Practice of Structural Equation Modeling (Methodology in the Social Sciences)* (3rd ed.). Guilford Press. https://doi.org/10.1017/cbo9781107415805.015

Krauss, S., Hamzah, A., Juhari, R., & Abdul Hamid, J. (2005). The Muslim Religiosity-Personality Inventory (MRPI): Towards Understanding Differences in the Islamic Religiosity among the Malaysian Youth. *Pertanika Journal of Social Sciences & Humanities*, *13* (2), 173–186.

Lee, JC, & Kuang, X. (2020). *Religiosity Scale (CRS): Teacher Perspectives*. *1965*.

Stark, R., & Glock, CY (1968). *American Piety: The Nature of Religious Commitment*. University of California Press.

Wardhani, N., & Dewi, R. (2015). Content Validity Study Crs-15 Tii (the Centrality of Religiosity Scale – For the Atmosphere of Islamic *Religious* Traditions in Indonesia. *Proceedings of SNaPP2015 Social, Economic, and Humanities*, *5* (1), 749–754.

Wild, D., Grove, A., Eremenco, S., McElroy, S., Verjee-Lorenz, A., & Erikson, P. (2005). Principles of Good Practice for the Translation and Cultural Adaptation Process for Patient-Reported Outcomes (PRO) Measures: Report of the ISPOR Task Force for Translation and Cultural Adaptation. *Values in Health*, *8* (2), 94–104.

Wilkes, RE, Burnett, JJ, & Howell, RD (1986). On the Meaning and Measurement of Religiosity in Consumer Research. *Journal of the Academy of Marketing Science*, *14* (1), 47–56. https://doi.org/10.1177/009207038601400107

Zarzycka, B. (2008). Tradition or charisma? Religiosity in Poland. *Religion Monitor 2008. EUROPE - Overview of Religious Attitudes and Practices*, 26–29.

Zarzycka, B., & Rydz, E. (2014). Centrality of Religiosity and Sense of Coherence: a Cross-sectional Study with Polish Young, Middle and Late Adults. *International Journal of Social Science Studies*, *2* (2), 126–136. https://doi.org/10.11114/ijsss.v2i2.346