

Do religious doctrine and culture moderate the relationship between beliefs and distress?



David H. Rosmarin, Steven Pirutinsky, Kenneth I. Pargament, & Elizabeth J. Krumrei
 Department of Psychology, Bowling Green State University



Background

A substantial body of research has linked religious beliefs with mental health and illness. Yet the research community recognizes that the salience of beliefs may vary among different religious groups.

For example, while Protestantism is an “assent” religion in which membership is determined by individual agreement to a set of shared truths, Judaism is a “descent” religion in which heritage and religious practice define membership. Consistent with this doctrinal and cultural dichotomy, considerable evidence suggests that Protestants imbue mental states (e.g., religious beliefs) with greater significance than Jews, who conversely stress communal participation and religious practices. Beliefs may be salient for *Orthodox* Jews, however, as they are central to traditional Jewish doctrine and culture.

We therefore compared the extent to which religious beliefs predicted depression and anxiety among Orthodox Jews, non-Orthodox Jews, and Protestants.

Participants & Procedure

Three hundred and thirty-one individuals participated, of which 141 were Orthodox Jews, 93 were non-Orthodox Jews, and 97 were Protestants. Participants ranged in age from 18-79 years and the mean age was 36.8 (*SD* = 14.3). Females comprised 61.5% of the sample. All participants completed an internet based questionnaire measuring religious beliefs, depression and anxiety.

Measures

Religious Beliefs. We created 12 items to measure the belief that God is benevolent. See handout for details.

Depression was measured by the Center for Epidemiologic Studies Depression Scale (*CES-D*; Radloff, 1977).

Anxiety was measured by the 20-item trait subscale of the State-Trait Anxiety Inventory (*STAI-T*; Spielberger, Gorsuch & Lushene, 1970).

Results

Preliminary Analyses. Orthodox, non-Orthodox and Protestant participants did not differ with regards to age, depression, or anxiety. There were significantly more female participants among Protestants ($X^2(2) = 17.13, p < .001$), however this was not seen to be a potential confound as gender was not associated with religious beliefs, depression or anxiety in the sample. There were significant differences between the groups in terms of religious beliefs. Protestants reported significantly higher levels of religious belief than Orthodox Jews who in turn reported significantly higher levels of belief than non-Orthodox Jews.

Correlations between religious beliefs and practices with depression and anxiety for Orthodox, non-Orthodox and Protestant participants are presented below.

Religious beliefs as predictors of distress across religious groups

	Orthodox Jews	Non-Orthodox Jews	Protestants
CESD	$r = -.41^{***}$	$r = -.16$	$r = -.32^{**}$
STAI	$r = -.34^{***}$	$r = -.07$	$r = -.19$

Notes: $**p < .01$, $***p < .001$.

We used hierarchical regression (Aiken & West, 1991) to directly examine whether religious affiliation moderated the relationships between religious beliefs and depression and anxiety. In each analysis, religious beliefs (centered) and affiliation (dummy coded) were entered as predictors in Model 1, and the multiplicative interaction of these two variables was added in Model 2. A significant interaction was found between Orthodox and non-Orthodox Jewish affiliation and religious beliefs with regards to both depression and anxiety ($\beta = -.20, p < .05$). However, the interaction was not significant when examining Orthodox Jewish and Protestant affiliation (depression $\beta = -.04$; anxiety $\beta = -.08, ns$), and was only of borderline significance with regards to non-Orthodox Jewish and Protestant affiliation (depression $\beta = .32, p = .06$; anxiety $\beta = .17, ns$).

Discussion

In this study, the relationship between religious beliefs and distress was moderated by doctrine and culture. While religious beliefs were protective against distress in two communities whose doctrine deeply value religious beliefs (Orthodox Jews and Protestants), beliefs were not predictive of distress among non-Orthodox Jews who tend to define religion by community rather than theology. These findings suggests that specific culture and doctrine of religious groups must be considered when conducting social and personality psychology research in this area of study.

Correspondence concerning this poster should be addressed to David H. Rosmarin, c/o Department of Psychology, Bowling Green State University, Bowling Green, OH, 43403; e-mail: drosmar@bgsu.edu; tel: 647 834 1836