

Does Social Support Mediate the Moderating Effect of Intrinsic Religiosity on the Relationship between Physical Health and Depressive Symptoms Among Jews?

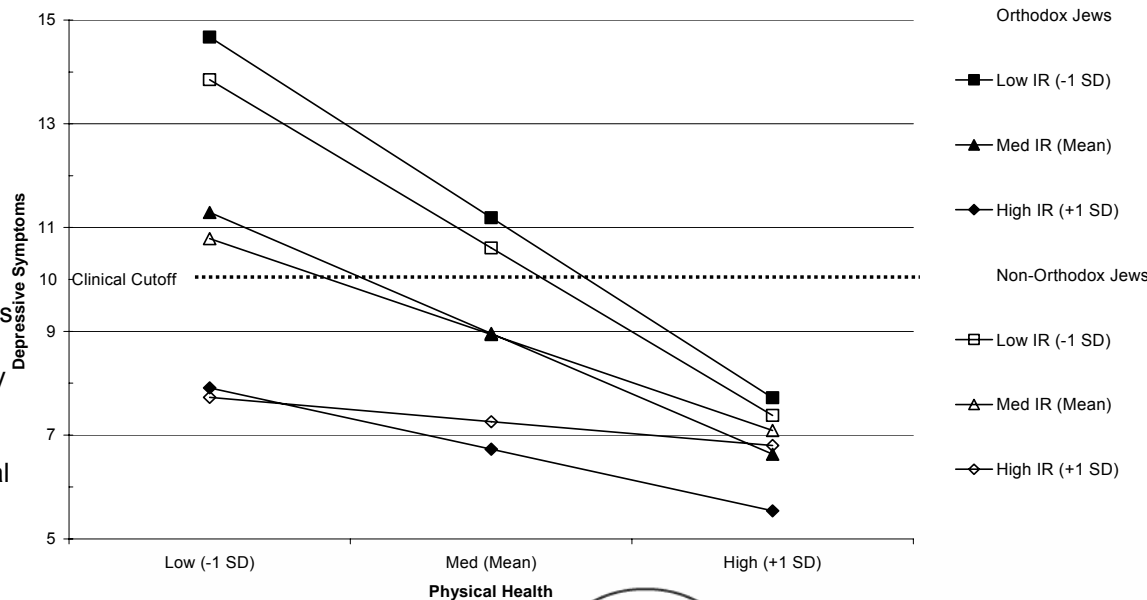
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1. Introduction

Research suggests that intrinsic religiosity moderates the effect of physical health on depression. Few studies focused on Jews. Based on previous research suggesting that non-Orthodox Judaism values religious mental states less and social religiosity more, we hypothesized that intrinsic religiosity would be mediated by social support among non-Orthodox but not Orthodox.

2. Method

- Orthodox: Hassidic = 5, Yeshiva = 45, Modern = 69, Sephardic = 2, Chabad = 2
- Non-Orthodox: Conservative = 32, Reform = 30, Other = 25
- 74.05% Female
- Age $M = 41.74$, $SD = 15.10$
- 82.5% in U.S
- Groups did not differ on age, country, or gender.



3. Results

The relationship between physical health and depression was moderated by intrinsic religiosity ($R^2 = .19$, $F(1, 203) = 9.56$, $p < .01$) equally across both groups ($\Delta R^2 = .01$, $F(4, 201) = .43$, $p = .79$). This was mediated by social support among non-Orthodox Jews, but not among the Orthodox Jews (see Figure). These results were confirmed using a bias-corrected bootstrapping analysis of the mediation model (Preacher & Hays, 2008; 1000 sub-samples, 95%; non-OJ: $-.06$ through $-.004$, OJ: $-.01$ through $.04$)

4. Discussion

- Intrinsic religiosity robustly moderates even clinical depression among Jews.
- Social support mediated for non-Orthodox and not for Orthodox
- Thus, religiosity cannot be understood as a unitary construct, since this equivalent effect involved divergent processes.
- Research requires a contextual approach exploring the relevant religious process

