

“The Effects of Religion on Well-Being

Jan 27, 2011

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at the Texas Medical Center,
Houston, TX 77054

Thursday Class Schedule

- January 13, 20, 27 – John Graham, M.D., 3-week study entitled, “Religion and Effects on Health and Healing”
 - Jan 13: Positive and Negative Effects of Religion on Health and healing
 - Jan 20: Effects of Religion when Coping with Chronic Illness
 - **Jan 27: Effect of Religion on Well Being**

Next Thursday Class Schedule

- February 3, 10, 17 – Rabbi David Lyon, 3-week study entitled, "God, Be With Me: Imagining God for a Lifetime," based on his new book (Jewish Lights Publishing, 2011).
- **Feb 3: God is Everywhere and God Lives with Me**
- Feb 10: God Knows Me and God Receives Me
- Feb 17: God Comforts Me and God Strengthens Me

Thursday Class Schedule

- February 24 – The Rev. Stephen Spidell – 1-week study on subject entitled, “Essential Spirituality in Patient Care.”
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Thursday Class Schedule

- March 3, 10, 17, 24, 31 – John Graham, M.D., 7-week study entitled, “Effects of Faith on Health & Medicine” --Review of H. Koenig, et al, *Handbook of religion and Health (HRH)*
- March 3: Effect of Religion on Depression and Suicide, (chapter 7 - 8 HRH)
- March 10: Effect of Religion on Mental Health (chapter 15 HRH)

Thursday Class Schedule

- March 17: Effect of Religion on Anxiety Disorders, Schizophrenia, and other Psychoses (ch. 9 - 10, HRH)
- March 24: Effect of Religion on Alcohol and Drug Use, Delinquency (chapter 11 - 12, HRH)
- March 31: Effect of Religion on Heart Disease & Hypertension (chapters 16-17, HRH)
- April 7: Effect of Religion on Immune System Dysfunction and Cancer (chapter 19-20, HRH)
- April 14: Effect of Religion on Longevity; and, Religion and Disability (Chap. 21-22, HRH)

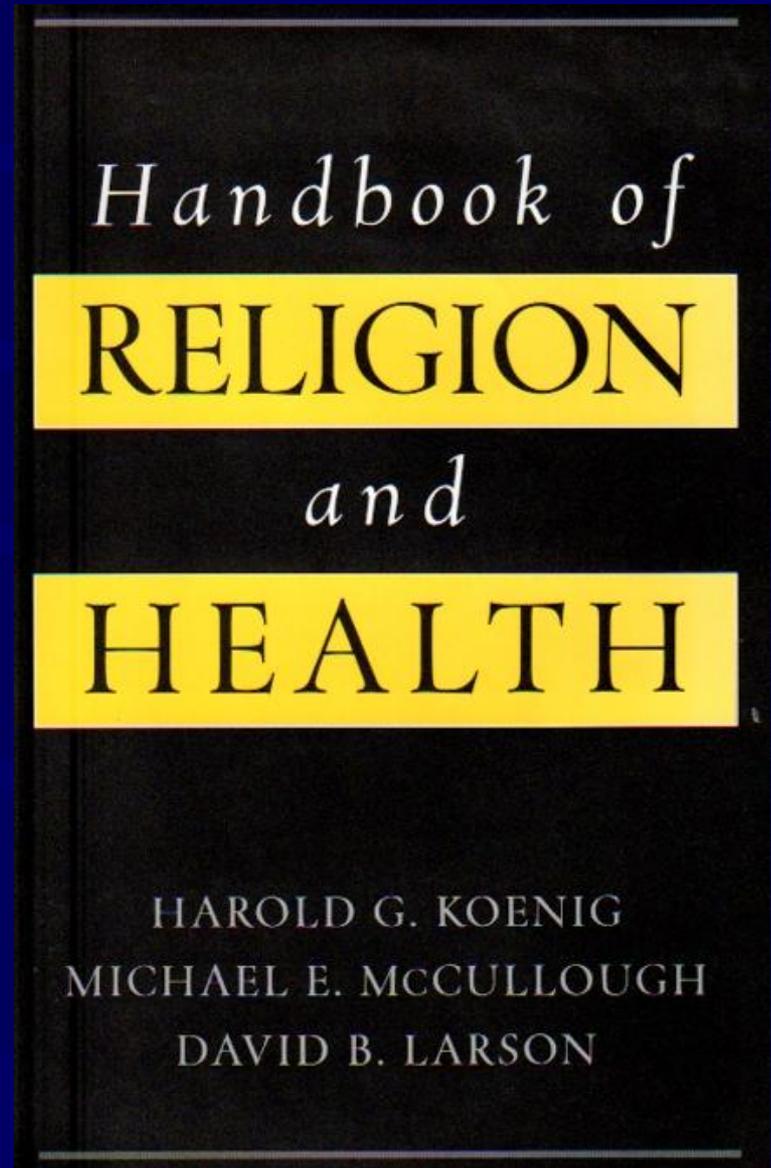
Outline for today's talk

"The Effects of Religion on Well-Being"

- Introduction
- Religion and Predictors of Well-Being
- Research on Religion and Well-Being
 - Positive Association & No Association in Young Adults
 - Positive Association & No Association in Older Adults
- Intervention Studies
- Conclusions

Introduction to the Series

- During January and March-April, 2011, we will be looking at Dr. Harold Koenig, Michael McCullough and David Larson's book,
- ***Handbook of Religion and Health (2001)***
- published by Oxford University Press, New York.



Well-Being

1. Later in this series, we will look at chapters which seek to discern the effect between religion and disease/healing.
2. In this chapter, Koenig et al explores religion's connection with well being – the positive side of mental health
3. Synonyms for well-being include:
happiness, joy, satisfaction, enjoyment, fulfillment, pleasure, contentment, and other indicators of life being lived at its fullest.

Well-being is not a condition achieved by reaching a threshold of “good feelings”

- Instead, well-being exists on a continuum sustained over a length of time:



- And, rather than existing to avoid pain, humans strive to experience pleasure, joy, completeness, and meaning.

David Myers', *Pursuit of Happiness*,

- Myers notes that Aristotle (384-322 B.C.E.) argued that happiness is the “supreme good” and said that “all else is merely a means to its attainment.” (Myers, 1993, p 19)
- Likewise, the American psychologist William James (1890) wrote that, “how to gain, how to keep, how to recover happiness is in fact for most men at all times the secret motive of all they do.” (Myers, 1993, p. 19)
- Question is: How does religion contribute to well-being?

Nonreligious Predictors of Well-being

- According to W. Wilson & W. Kawamura's 1967 study, persons with the most advantages have the highest well-being and greatest happiness and:
- the "happy person emerges as a young, healthy, well-educated, well-paid, extroverted, optimistic, worry-free, religious, married person with high self-esteem, high job morale, modest aspirations, of either sex and of a wide range of intelligence."

(Journal of the Scientific study of religion, Vol. 6, p. 294)

E. Diener's (1984) more recent review:

- Reported that, in fact, no single factor explains the variance. Rather, well-being is determined by a large number of different factors, including:
- biologic forces (inherited personality traits)
- developmental influences (extent to which basic emotional needs are met in infancy and childhood)
- positive and negative life events during adulthood
- current situational factors.

Contrary to expectations, income or wealth is a not an indicator of happiness.

- Increases in income have not been associated with proportional increases in well-being
- Real income rose in the US between 1946 to 1978 dramatically but was not associated with increased average well-being (in fact, it decreased slightly).
- Wealthier people were happier than those who were poor in the study, yet once basic needs were met, there was no proportional increase in happiness with further increases in income.

Other factors Not correlated with well-being:

1. Surprisingly, education is not associated with well-being once the study controls for income.
2. Age is inconsistently associated with well-being:
 - Many early studies reported the younger were happier
 - Later studies have not demonstrated this effect with age
 - Younger people often report higher levels of joy but
 - older people have higher levels of life satisfaction and, in general, have a more positive judgment about their lives

What about Marital Status?

Well-designed studies have shown that marital status does influence well-being -- married persons report greater happiness than never-married, divorced or separated persons

- Glenn & Weaver (1979) found that marriage was the strongest single predictor of well-being after they controlled for income, education and occupational status.
- Marital status, by itself, appears to have small effect.
- More relevant are marital satisfaction and family satisfaction (strong correlates to well-being)

What about Gender?

- Women report more negative affect than men but also tend to experience greater joy, so the two neutralize each other.
- There is an interaction with gender and age; younger women are happier than younger men, and the association reverses later in life.
- The result overall is that gender differences in well-being are not great. And, homemakers are not less happy than women with salaried jobs!

What about Race?

- After controlling for factors such as education, income and urban residence, race exerts a small but significant effect on well-being, often dependent on age and gender.
- African-American young adults in general report a lesser sense of well-being than white young adults
- However, this trend reverses in later life when older African-Americans tend to be happier than older whites.

Health is the strongest predictor of Well-being

- In both younger and older populations, health is the strongest predictor of well-being.
- One meta-analysis on well being and health revealed a consistent correlation of approx. 0.32; correlations were particularly strong in women.
- Well-being has been more strongly related to measures of subjective health than to objective measures of health (physician ratings).

Activities are associated with greater happiness

- Particularly among the elderly, being involved in active life is vital to a sense of well-being
- A popular theory (Activity Theory) argues that active involvement creates happiness for elderly
- It appears this is highly confounded by being healthy and having income permitting such activity
- One study says certain activities are associated with well being; some are not – involve “others” but not **competitive**. (Kozoma & Stones, *Canadian Psychological Review*, vol 19, 1978, p 241-9)

Social Support and Well-being

Numerous studies show positive correlation between well-being and social support. And, increasing with age social contacts is associated with increased well-being

- Okun (1984) found that social activity predicts about 2 – 4 % of the variance in well-being after other covariates are controlled.
- Studies have shown that while friends are associated with greater well-being, other contacts (relatives) may be contrary to well-being.

Psychological Factors are Strong Predictors

- Although all socio-demographic facts may account for only 10% of the variance, psychological facts have a much higher predictive value.
- Psychological factors include attitudes such as optimism, purpose in life, high self-esteem, extroversion.
- Psychological variables however may actually be components of well-being, rather than independent variables that lead to greater happiness.

Personal Control and Well-being

- Personal control (or perceived control) is a strong predictor of happiness.
- Conversely, persons with no control over their lives – prisoners, nursing home patients, or the poverty stricken – have the least sense of well being.
- Likewise, persons with an internal locus of control (a tendency to attribute outcomes to oneself rather than to external causes) seem to have a greater sense of well-being than those with an external locus.

Personal Control, Religion, and Well-being

- While religion (depending on God as agent of control) on the surface appears to involve an external source of control, most studies that examine this relationship have found the opposite to be true.
- In other words, religious involvement is related to a greater *internal* locus of control.
- We will discuss this in more detail when we look at Religion and mental illness.

Religion and Marital Status

- Numerous studies have shown that religious persons are less likely to divorce or separate and are more likely to have intact, stable families.
- Cohen (1997) studied 5,286 persons over 28-year followup and found that married persons who attend religious services at least once a week were 80% more likely (than those who attended less frequently) to stay married to the same person.

Religion and Health

Persons with high religious involvement are less likely to abuse alcohol and drugs, and they experience less hypertension, heart disease, stroke, cancer and disability, and live longer.

- In March-April, 2011, we will look at each of these diseases more closely and the statistical studies that have been done to verify what I have just said.

Religion and Activities

Most religions promote activities such as attendance at religious services, participation in prayer and scripture study groups, volunteer activities, religious pilgrimages, and active involvement in social and community life.

- This makes it more difficult for religious persons to be sedentary and uninvolved.
- Religious activities may be a particularly important source of well-being for older adults.

Religion and Social Support

Religious institutions typically promote and even prescribe socialization among members of the congregation (“love thy neighbor as thyself”).

- Many studies show that persons who participate in religious activities, whether attending religious services or participating in a prayer group, have:
 - larger support networks
 - more social contacts and
 - greater satisfaction with support.

Religion and Optimism

Many religious beliefs promote optimism and positive thinking.

- Sethi and Seligmann (1993) studied 623 members of nine major religions and found significant differences among groups in terms of religious influence in daily life, religious involvement, and religious hope, which were all significantly greater among fundamentalists.
- Fundamentalists were also much more optimistic than members of liberal religions.

Religion and Optimism

Investigators selected tape-recorded sermons and typical hymns and prayers for each religion. They found more optimism in the fundamentalist' religious materials and religious services than in liberal churches.

- The study concluded that optimism in religious settings depended on the nature of the religious material persons are exposed to rather than differences in denominational teaching.

Religion and the Message of Hope

Sethi and Seligman (1993) also found that the religiously devout were more hopeful.

- Numerous studies have reported the positive relationship between measures of religiousness and hope in a variety of clinical and nonclinical settings.
- A few studies have not shown that correlation

Religion and Purpose/Meaning in Life

Religion also provides adherents with a sense of meaning and purpose in life. Many religions teach that existence is not merely a random act of chance but rather the design of a creator who has purpose and intention and who desires human involvement in that purpose.

- Consequently, many studies have found a positive correlation between religious involvement and having a sense of purpose and meaning in life.
- There are a few exceptions, however.

Religion and Internal Locus of Control

While believing that God is in control might suggest an external locus of control, this is actually not the case.

- Most studies have found a positive and significant relationship between religious beliefs or activities and an internal locus of control.
- Religious belief gives persons a form of indirect control over their lives that reduces the need to depend on chance or powerful others (political leaders, rich relatives, physicians, employers).

In many respects:

An internalized, intrinsically motivated religious faith empowers the individual.

- Prayer directed to an all-powerful and sympathetic God gives religious persons a tool that can be used to change their situation or acquire the strength to endure it.
- This counteracts feelings of helplessness, loss of control, and need to depend on others.

Positive Associations (for all age groups)

Spreitzer and Snyder (1974) studied 1,323 persons in a cross-sectional study found that church attendance was significantly related to greater life satisfaction in those under 65, but not to those over age 65.

- Hadaway and Roof (1978) studied 2,164 persons, the importance of religious faith was significantly correlated with “worthwhileness of life”
 - 60% of those saying their faith was “extremely important” reported high worthwhileness compared to only 35% where their faith was recorded as “not very important.”

Positive Associations (for all age groups)

In fact, the importance of faith was the strongest predictor in a model that included:

- Number of friends
- Marital status
- Age
- Education
- Health
- Income
- Race

- Investigators concluded that religion provided 2 benefits: (1) meaning and purpose in life and (2) a sense of belonging to and participating in a fellowship of like-minded believers.

Reed (1987) surveyed Terminally Ill

Religiousness was measured with a 10-item Spiritual Perspective Scale (SPS); Well-being was measured by Campbell's 9-item Index of Well Being (IWB).

There was a significant positive relationship between SPS scores and IWB scores in terminally ill patients.

Pollner (1989) examined relationship between religion and life satisfaction

Religious variables were religious experience, image of God, and religious attendance; life satisfaction variables were general happiness, marital happiness, life excitement and life satisfaction.

- Religious experience (termed "divine relations") was measured by closeness to God, frequency of prayer, and closeness of a powerful spiritual force.
- Continued ...

Pollner (1989) relationship between religion and life satisfaction, cont ...

Images of God were measured as follows:

- God as ruler (king, judge, master)
- God as source of remedy for human problems (healer, liberator, redeemer, creator)
- God as someone to relate to (friend, lover, mother, father, spouse)

- Studies indicated a positive relationship between global happiness and church attendance, and between global happiness and divine relations.
- Divine relations were correlated with life satisfaction, life excitement, and marital happiness.

Pollner (1989) correlations cont....

- Divine relations were correlated with life satisfaction, life excitement, and marital happiness.
- Perception of God as ruler was correlated negatively with global happiness.
- Perception of God as healer or liberator was positive associated with greater life satisfaction.
- Perception of God in relational terms was unrelated to any of the four well-being measurers
(God as a pal doesn't bring a sense of well-being)

Pollner (1989) correlations cont....

- An important conclusion from this study was that one's image of God' (i.e., beliefs about God) may impact the relationship between religious experience and well being.

Life satisfaction and personal happiness associated with Church attendance

- Ellison (1991) compared data from 997 subjects and concluded life satisfaction and personal happiness were associated with church attendance, divine interaction, and existential certainty.
- Personal happiness was positively related to greater existential certainty and negatively related to being Catholic.

Different Types of Prayer

- Poloma and Pendleton studied types of prayer (conversational, petitional, ritual and meditative):
- They found that conversational and meditative prayer were more strongly related to well-being than was ritual prayer.
- Ritual prayer was associated with greater negative effect (feeling sad, lonely, depressed, tense) whereas meditative prayer was related to greater sense of well-being.
- Conversational prayer was correlated with greater happiness.

Negative Associations

- A few studies have found a negative association between religious involvement and well being. Maranell (1974) examined the relationship between religiosity and personality adjustment among college students. Two of 8 measures were considered pathological (superstition and ritualism).
- Author found no relationship between emotional pathology and church orientation, altruism, fundamentalism, theism, idealism, or mysticism.
- Yet he concluded that religious persons are likely to be less well adjusted than nonreligious persons.

Summary of Sense of Well-being

- A mixture of many factors such as genetic, family of origin, favorable developmental and life situations were correlated with a sense of well-being.
- Well-designed studies have shown that marital status does influence well-being -- married persons report greater happiness than never-married, divorced or separated persons
- Religious variables were religious experience, image of God, and religious attendance were positively correlated with general happiness, marital happiness, life excitement and life satisfaction.

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