

# Religion and Mental Health: A Review of Previous Research

1. Religion's role in coping with illness/stress
2. How religion influences coping
3. Well-being
4. Depression
5. Suicide
6. Anxiety
7. Substance abuse
8. Summary of findings prior to year 2000
9. Attention paid since 2000

Religion is a powerful coping behavior

# Religion and Coping with Illness

1. Many persons turn to religion for comfort when sick
2. Religion is used to cope with problems common among those with medical illness:
  - uncertainty
  - fear
  - pain and disability
  - loss of control
  - discouragement and loss of hope

# Religion and Coping

1. Example of patient using religion to cope
2. How common among medical inpatients?
3. How common in different medical disorders?
4. How common in response to national stress?

# Example of Religious Coping

JAMA 2002; 288: 487-493

1. 83 years old
2. Multiple serious medical problems
3. Chronic, progressive, unrelenting pain
4. Traditional medical treatments ineffective
5. Alternative medical treatments ineffective
6. Limited material resources – lives alone
7. But, doing well psychologically
8. Positive, hopeful and optimistic
9. Functioning independently- without assist
10. Concerned with meeting others' needs
11. How does she do it? Religion, she says

## Religion – How?

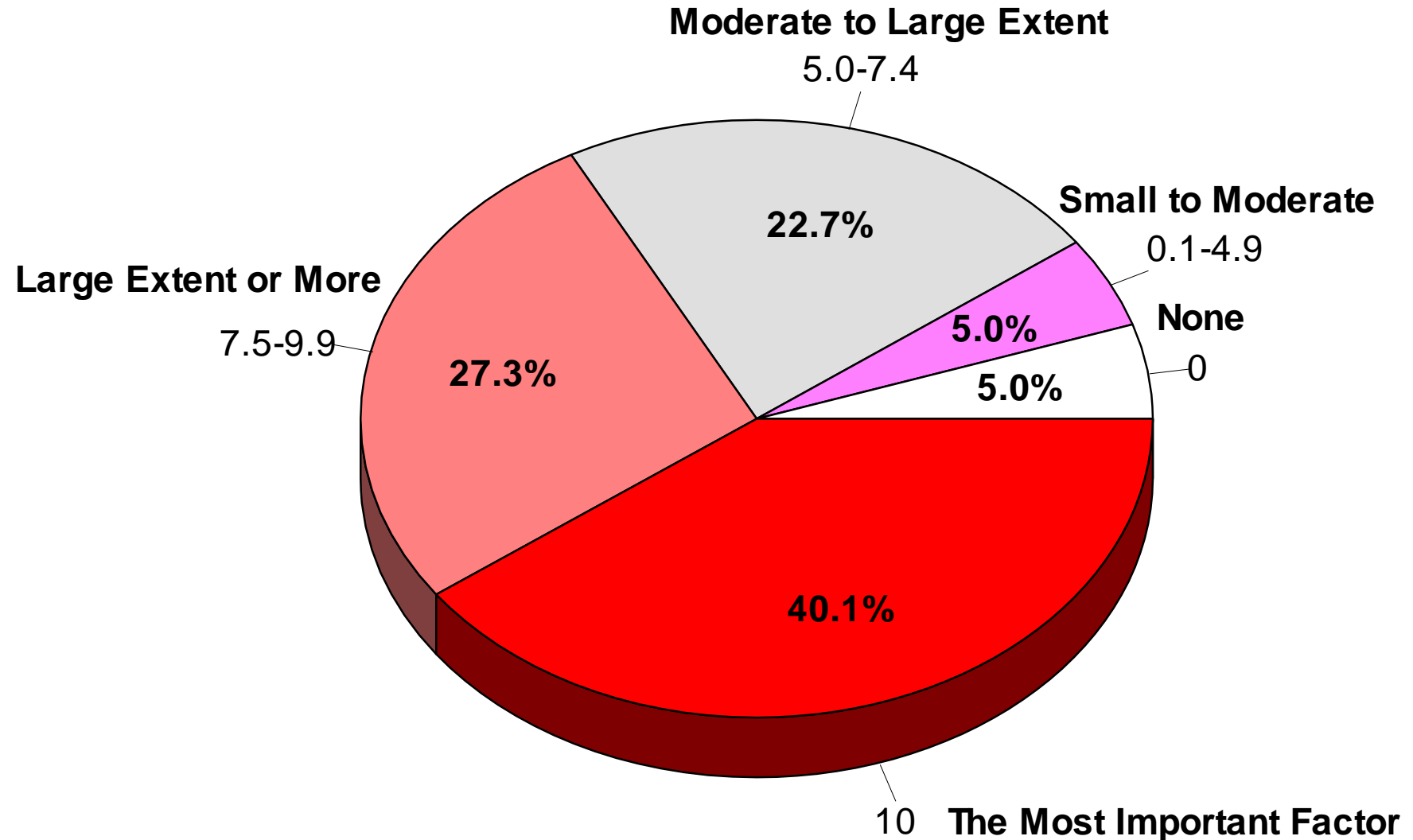
"I don't dwell on the pain. Some people are sick and have pain and it gets the best of them. Not me. I pray a lot.... I believe in God, and I give my whole heart, body, and soul over to him... Sometimes I pray and I'm in deep serious prayer and all of a sudden, my pain gets easy. It slackens up and I drop off to sleep, and wake up and I can do things for myself. So prayer helps me a lot – I give God my heart and soul – and you don't have to worry about nothing. He leads you and directs you, and he takes care of you. And I believe in that. That is my belief."

# How Common in Different Disorders?

1. General medical patients
2. Arthritis
3. Diabetes
4. Kidney disease
5. Cancer
6. Heart disease
7. Lung disease
8. HIV/AIDS
9. Cystic fibrosis
10. Sickle cell disease
11. ALS
12. Chronic pain
13. Severely ill adolescents

# Self-Rated Religious Coping

(On a 0-10 scale, how much do you use religion to cope?)





# Stress-induced Religious Coping

America's Coping Response to Sept 11th:

1. Talking with others (98%)
2. **Turning to religion (90%)**
3. Checked safety of family/friends (75%)
4. Participating in group activities (60%)
5. Avoiding reminders (watching TV) (39%)
6. Making donations (36%)

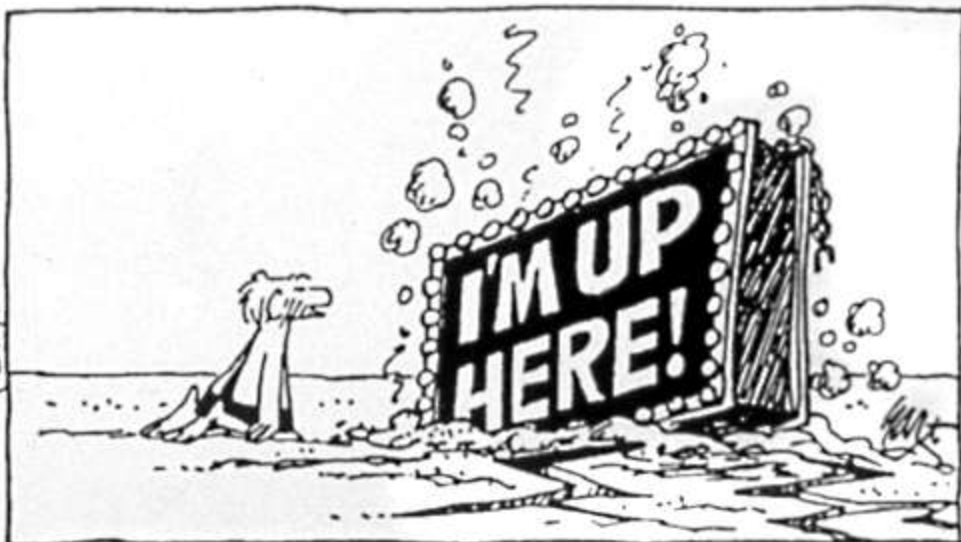
Based on a random-digit dialing survey of the U.S. on Sept 14-16

New England Journal of Medicine 2001; 345:1507-1512

B.C.

by johnny hart

GOD, IF YOU'RE UP THERE,  
GIVE ME A SIGN.



# How Religion Influences Coping

1. Positive world view
2. Meaning and purpose
3. Psychological integration
4. Hope (and motivation)
5. Personal empowerment
6. Sense of control (prayer)
7. Role models for suffering (facilitates acceptance)
8. Guidance for decision-making (reduces stress)
9. Answers to ultimate questions
10. Social support (both human and Divine)

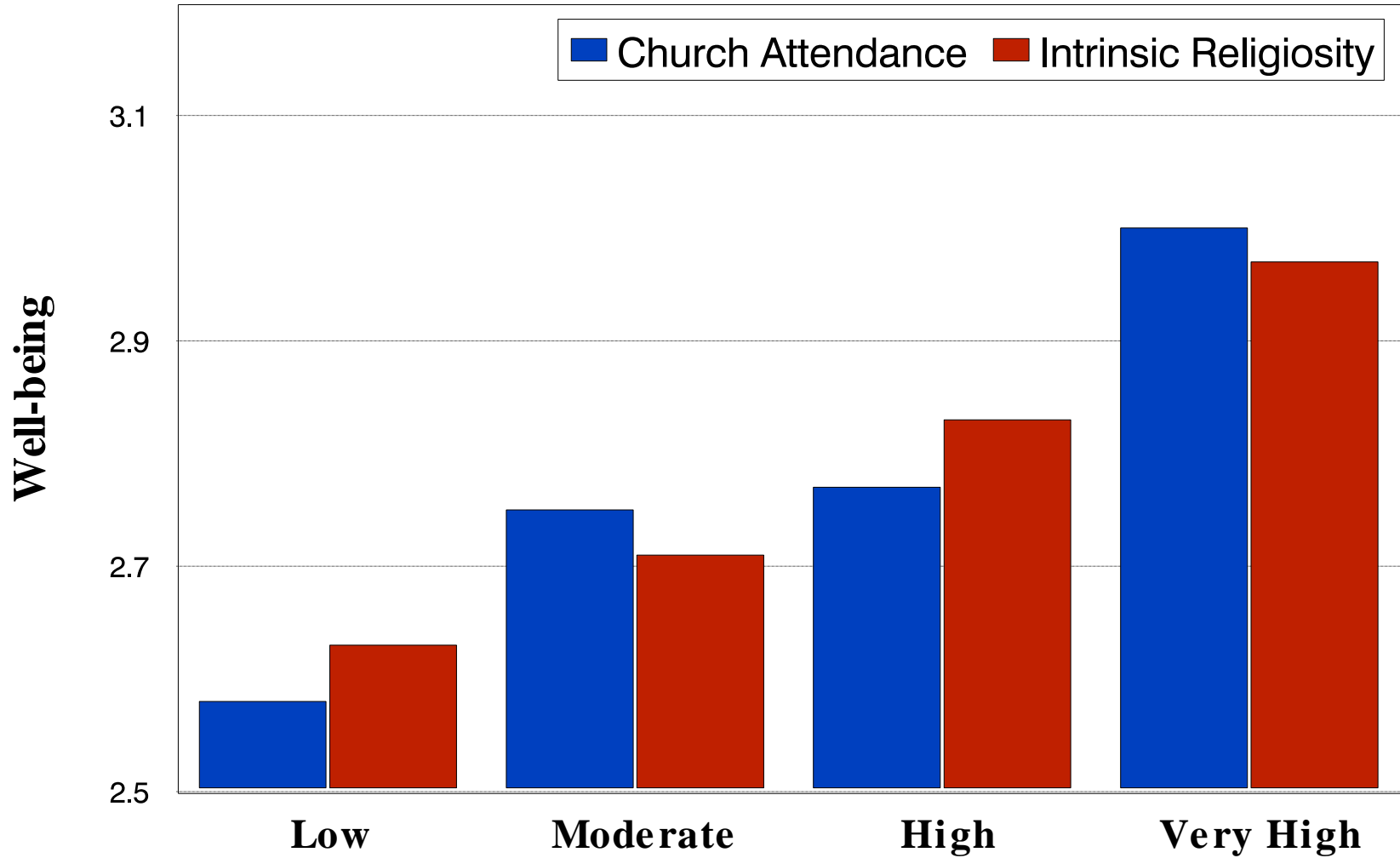
**Not lost with physical illness or disability**

# Religion and Mental Health Studies

1. Well-being
2. Depression
3. Suicide
4. Anxiety
5. Substance abuse

# Religion and Well-being in Older Adults

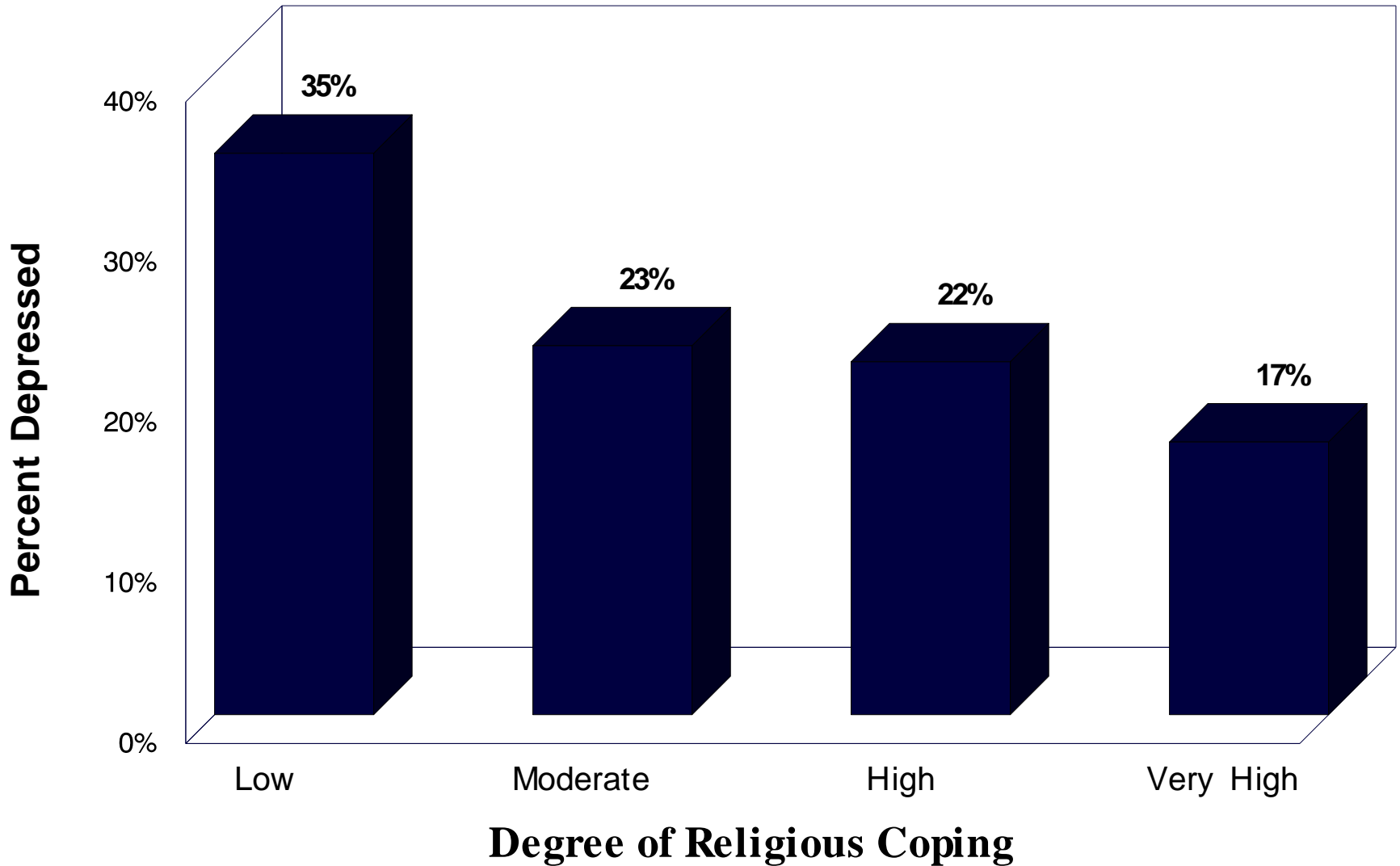
The Gerontologist 1988; 28:18-28



## Church Attendance or Intrinsic Religiosity

Religious categories based on quartiles (i.e., low is 1st quartile, very high is 4th quartile)

# Religion and Depression in Hospitalized Patients

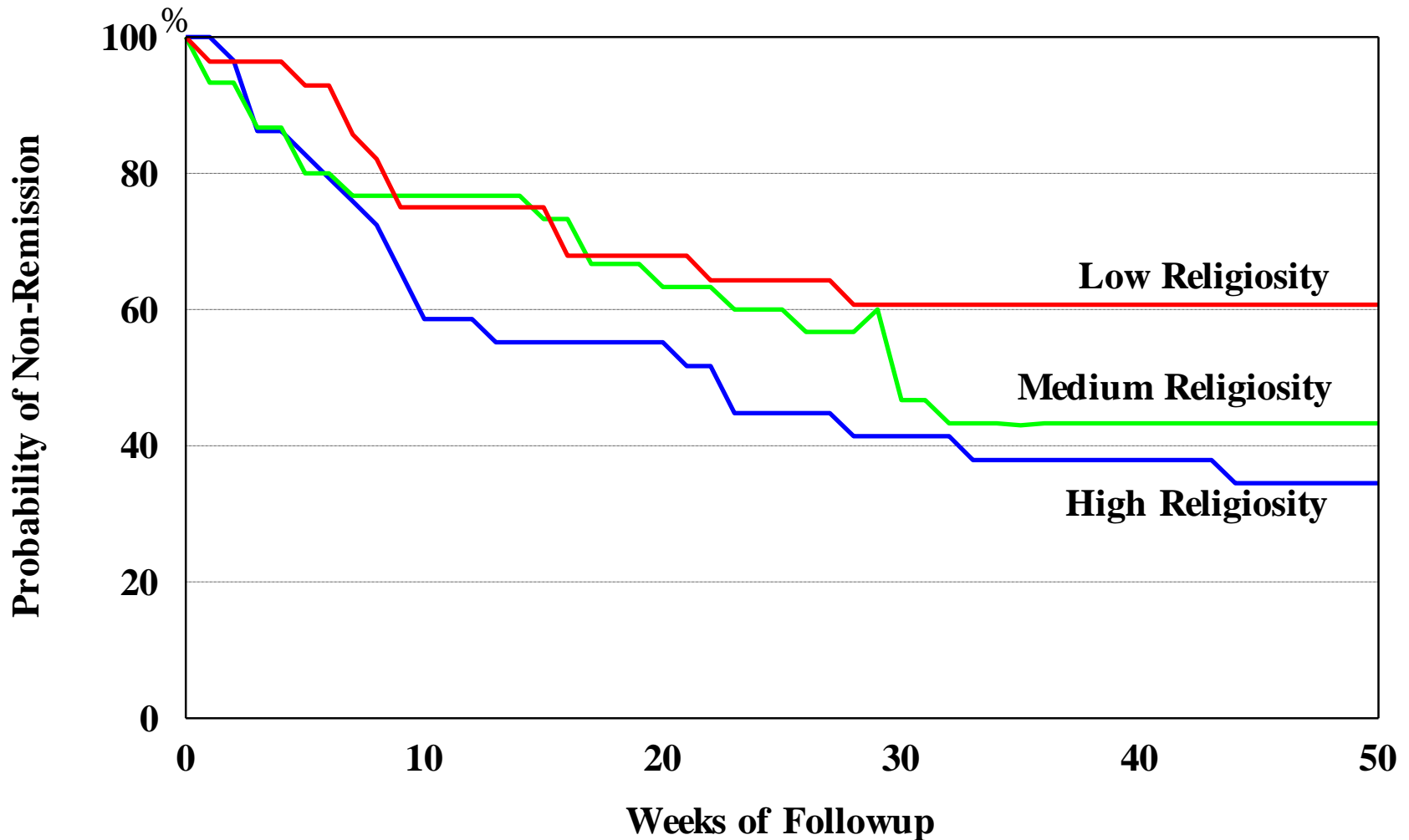


Geriatric Depression Scale

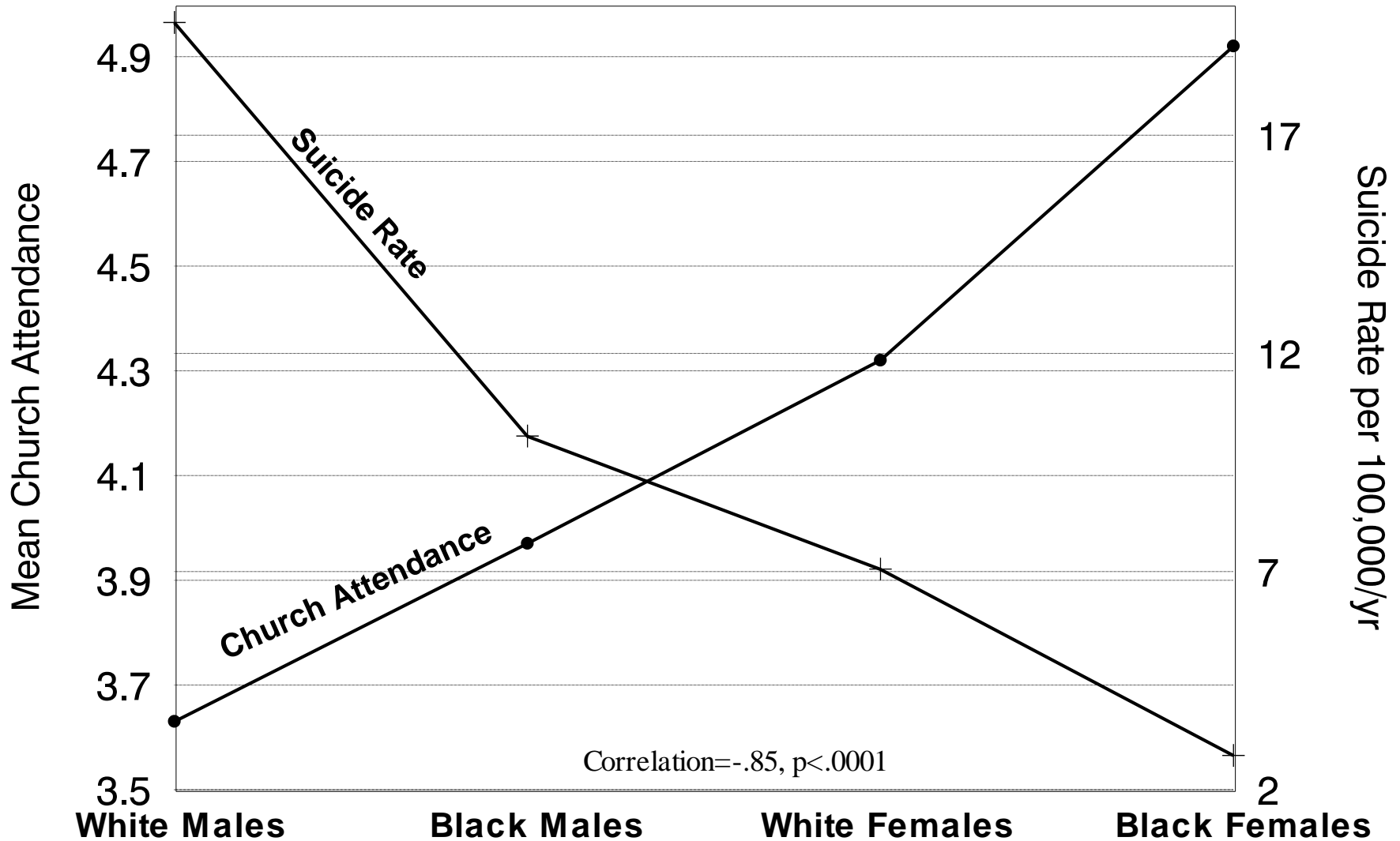
Information based on results from 991 consecutively admitted patients (differences significant at  $p < .0001$ )

# Time to Remission by Intrinsic Religiosity

(N=87 patients with major or minor depression by Diagnostic Interview Schedule)



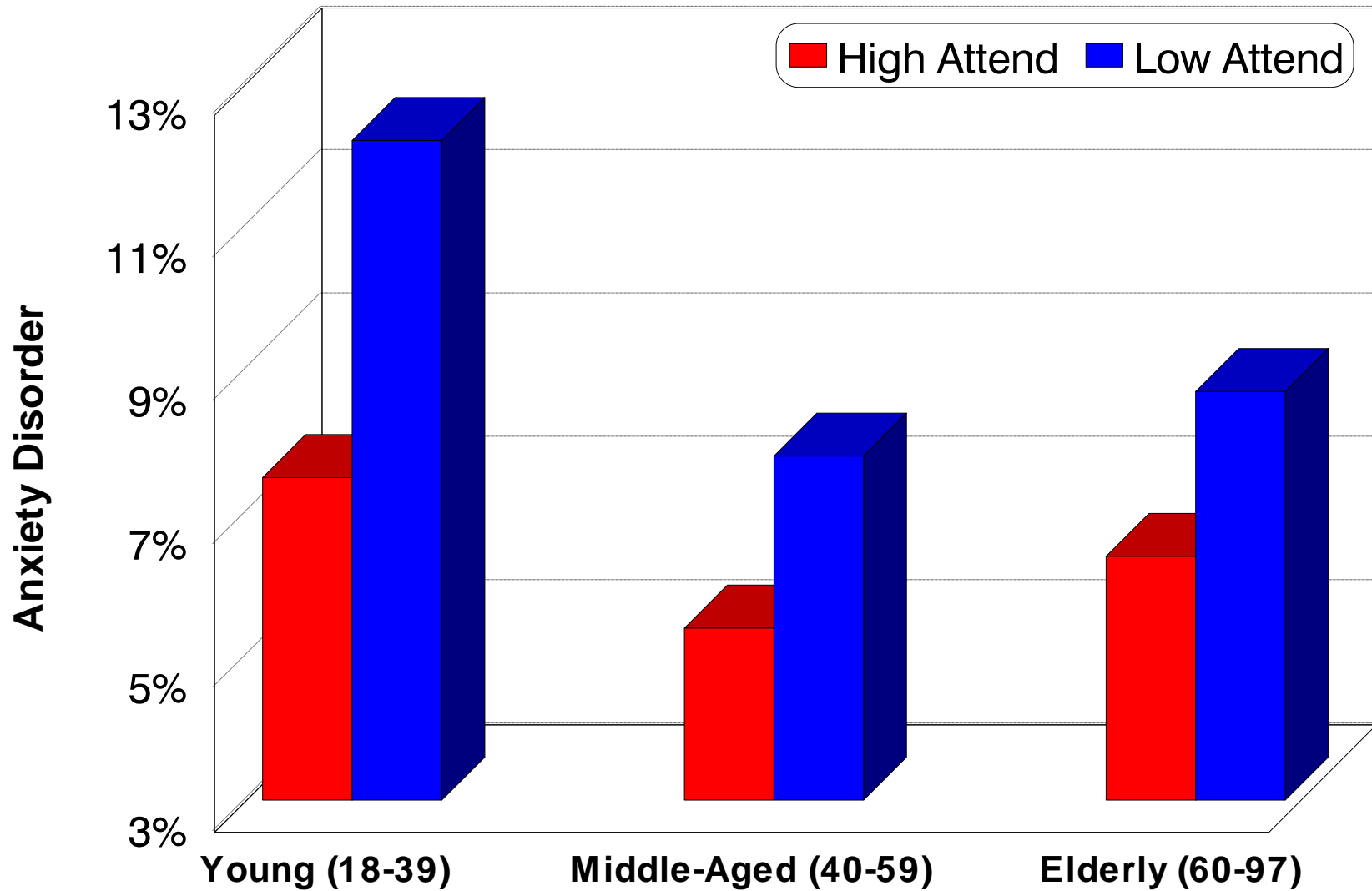
# Church Attendance and Suicide Rates





# Church Attendance and Anxiety Disorder

(anxiety disorder within past 6 months in 2,964 adults ages 18-89)



# KUDZU

ARE YOU PLAGUED BY DOUBT? DO YOU QUESTION THE EXISTENCE OF GOD? IS YOUR FAITH CHALLENGED BY THE VICISSITUDES OF MODERN LIFE?



DO YOU THINK THE CHURCH IS FULL OF PHONIES AND HYPOCRITES?



YOU MAY SUFFER FROM GENERAL SPIRITUAL ANXIETY DISORDER!...



TRY PRAY-ZAC!... THE EXCITING NEW OVER-THE-COUNTER PHARMACEUTICAL NINE-OUT-OF-TEN MINISTERS RECOMMEND!



# Spiritual Injury and PTSD Symptoms

1,385 veterans from Vietnam (95%), World War II and/or Korea (5%) involved in outpatient or inpatient PTSD programs. VA National Center for PTSD and Yale University School of Medicine. Weakened religious faith was an independent predictor of use of VA mental health services—independent of severity of PTSD symptoms and level of social functioning. Investigators concluded that the use of mental health services was driven more by their weakened religious faith than by clinical symptoms or social factors.

Fontana, A., & R. Rosenheck. Trauma, change in strength of religious faith, & mental health service use among veterans treated for PTSD. Journal of Nervous & Mental Disease 2004; 192:579–84.

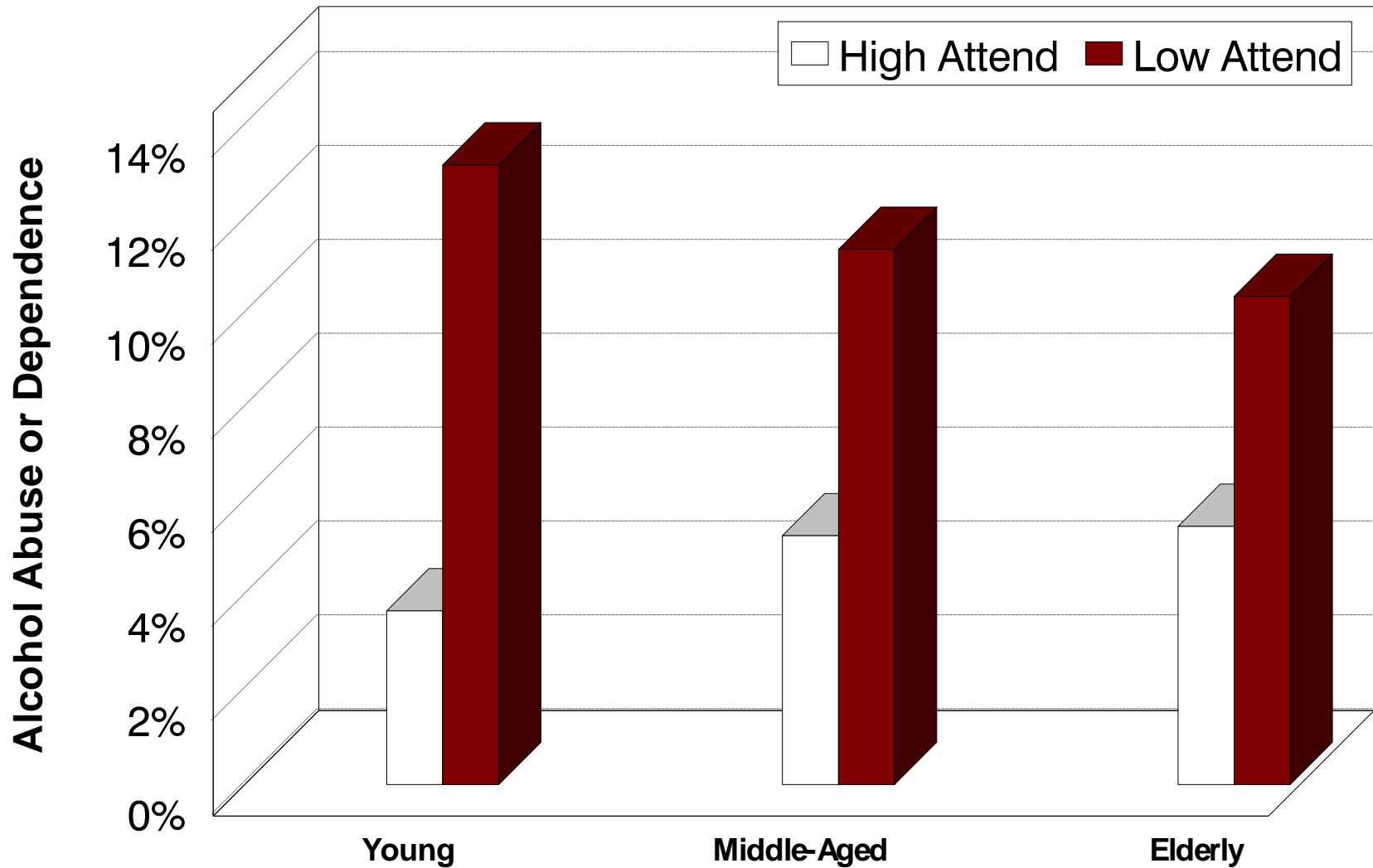
# Studies of Anxiety Disorder Outcomes

1. Mindfulness meditation for GAD/panic disorder (Buddhist)
2. Religious psychotherapy for GAD (Muslim, Tao)
3. “Importance of religion” affecting panic disorder outcomes with CBT in Christian populations (prospective study)

# Religion and Substance Abuse



# Church Attendance and Alcoholism (lifetime)



# Predicting Alcohol Abuse

Sample of 1,337 former Johns Hopkins medical students entering in 1948 through 1964 (91% male) with 1,014 males (85%) completing 1986 follow-up (22-38 years):

13% of these physicians met criteria for alcohol abuse

# Key Predictors of Alcohol Abuse

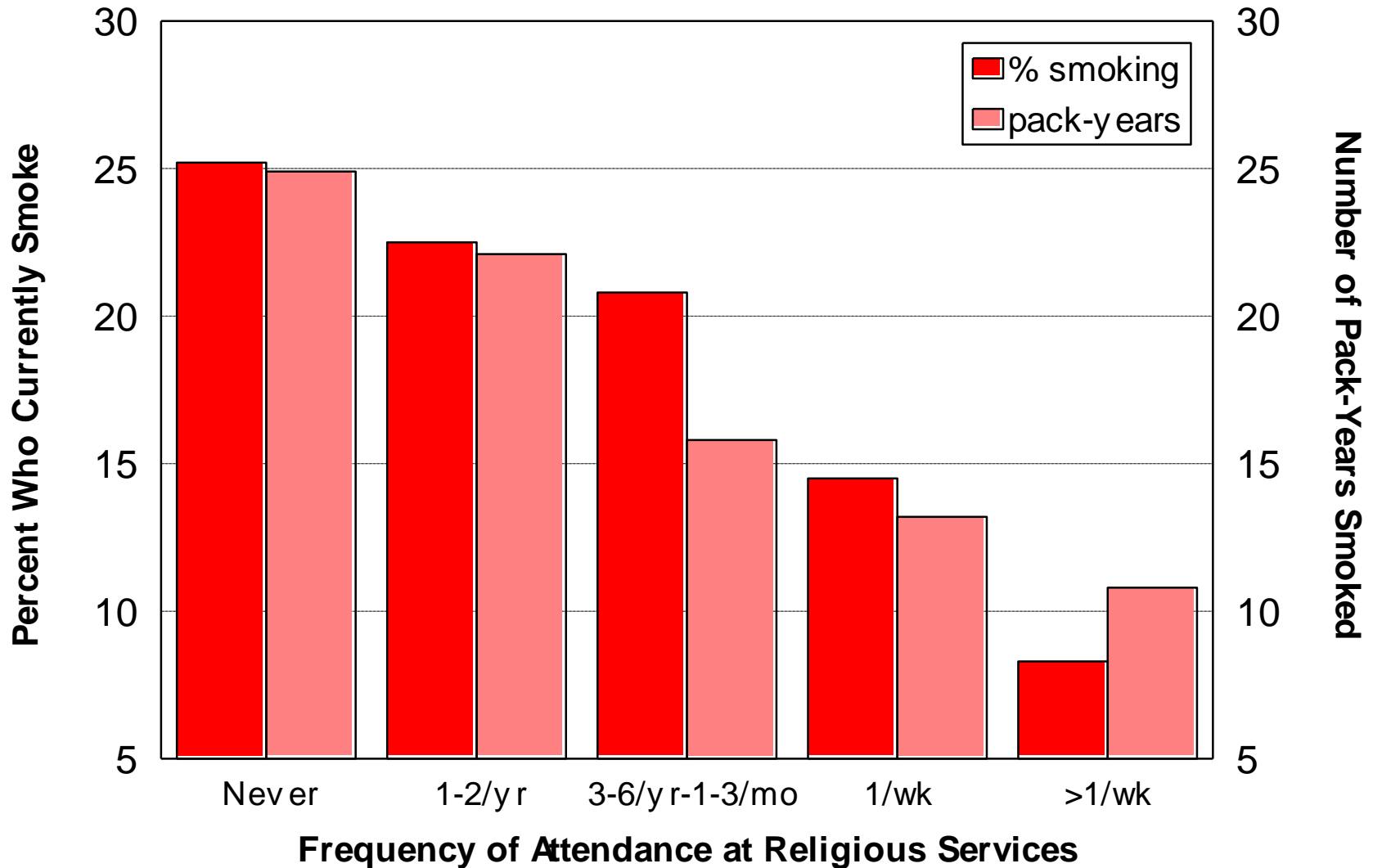
- 1) cigarette use of at least one pack cigarettes per day (OR=2.6)
- 2) past history of alcohol problems (OR=3.1)
- 3) non-Jewish ancestry (OR=3.1)
- 4) regular use of alcohol in medical school (OR=3.6)
- 5) lack of religious affiliation (OR=4.1)

Moore, et al. (1990). *American Journal of Medicine*, 88:332-336.



# Religious Attendance and Cigarette Smoking

3968 Persons aged 65 or Older in North Carolina



# Religion and Mental Health: Research Before Year 2000

1. Well-being, hope, and optimism (91/114)
2. Purpose and meaning in life (15/16)
3. Social support (19/20)
4. Marital satisfaction and stability (35/38)
5. Depression and its recovery (60/93)
6. Suicide (57/68)
7. Anxiety and fear (35/69)
8. Substance abuse (98/120)
9. Delinquency (28/36)
10. Summary: 478/724 quantitative studies

Handbook of Religion and Health (Oxford University Press, 2001)

# Attention Received Since Year 2000

## Religion, Spirituality and Mental Health

### 1. Growing interest – entire journal issues on topic

(J Personality, J Family Psychotherapy, American Behavioral Scientist, Public Policy and Aging Report, Psychiatric Annals, American J of Psychotherapy [partial], Psycho-Oncology, International Review of Psychiatry, Death Studies, Twin Studies, J of Managerial Psychology, J of Adult Development, J of Family Psychology, Advanced Development, Counseling & Values, J of Marital & Family Therapy, J of Individual Psychology, American Psychologist, Mind/Body Medicine, Journal of Social Issues, J of Health Psychology, Health Education & Behavior, J Contemporary Criminal Justice, Journal of Family Practice, Southern Med J )

### 2. Growing amount of research-related articles on topic

Psychlit 2003-2005 = **1798** articles (1023 spirituality, 775 religion) [social support=1865] **96%**  
Psychlit 2000-2002 = **1108** articles (821 spirituality, 410 religion) [social support=1590] **70%**  
Psychlit 1997-1999 = **922** articles (595 spirituality, 397 religion) [social support=1689] **55%**  
Psychlit 1994-1996 = **630** articles (395 spirituality, 296 religion) [social support=1605] **39%**  
Psychlit 1991-1993 = **451** articles (242 spirituality, 216 religion) [social support=1504] **30%**  
Psychlit 1980-1982 = **101** articles ( 0 spirituality, 101 religion) [social support= 406] **25%**

# Summary

1. Religion can have negative effects on mental health and social functioning
2. Religion is commonly used to cope with stress in general, and medical illness in particular
3. There are psychological and social mechanisms to help explain how religion affects coping
4. Religious involvement is associated with greater well-being and less emotional disorder and substance abuse
5. The field is growing rapidly