

Is religion good for your health?

It depends

Kenneth I. Pargament

Department of Psychology

Bowling Green State University

Bowling Green, Ohio 43403

kpargam@bgnet.bgsu.edu

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Introduction

In this talk, I would like to consider a very important question? “Is religion good for your health?” And I would like to respond to this very important question with a very clear response: “It depends.” I know this is not probably what you wanted to hear. We all seek straightforward answers to straightforward questions. So please understand, I am not purposely trying to annoy you or cloud the issue here. Like any good scientist, I am trying to be accurate, and I believe the most accurate conclusion to be drawn from the results of the recent upsurge of interest in studies of religion and health (a body of research created in part by the leaders here today) is that there is no simple relationship between religion and health. In this paper, I will make the point that whether religion is good for your health instead depends on a number of factors: **why** people are religious, **how** people are religious, **when** people are religious, and **who** and **where** the person is.

The “Why’s, How’s, When’s, Who’s and Where’s” of Religion

The Why’s of Religion

Part of the power of religion lies in the fact that it is able to respond to the diverse needs of its members. Since the time of Freud and Durkheim, social scientists have engaged in debates about the most central function of religion, it seems clear that people look to religion to achieve different ends. Empirical studies underscore the roles religion can serve in assuaging anxiety (Friedman & Rholes, 2008), controlling one’s own impulses (e.g., Benson, 1992; Koenig, McCullough, & Larson, 2001), making meaning

of suffering (e.g., Murphy, Johnson, & Lohan, 2003), and creating a sense of community and connectedness (e.g., Ellison & George, 1994; Krause, 2008).

We can find people who turn to their faith in search of comfort and solace from the profound fears and anxieties of life. Listen to the words of one college co-ed. "He just watches over me all the time . . . When something good happens, God's there. But when something bad happens, God's there too . . . Just knowing that there's somebody up there . . . who is paying attention. . . makes me feel more secure" (Pargament, 1997).

We can find people who look for a sense of meaning from their faith; answers to seemingly unanswerable questions about suffering, death, why we were put here on this planet, and how we should best live our lives. Consider the religious motivation of a young man who was the victim of a terrible accident that left him a paraplegic: "Well, I'm put in this situation to learn certain things, 'cause nobody else is in this situation.' It's a learning experience; I see God's trying to put me in situations, help me learn about Him and myself and also how I can help other people" (Bulman & Wortman, 1977, p. 358).

Still other people appear to involve themselves in religion for the sense of community and identity it provides. For example, one priest describes the overriding importance of the sense of family and connectedness he experienced in the funeral for his mother. "The funeral was astounding. . . The whole church, everybody was there. Many, many friends were there. Students from here, and the liturgy was a real experience of the resurrection. It was terrific. My blind niece played the piano. . . And my best friend David gave the homily. . . So there were so many powerful spiritual expressions and family expressions. It is hard to separate one from the other."

I could go on. Some look to their religion to help them control their impulses and human appetites; some seek guidance in the midst of uncertainty; and some grasp on to their faith to strengthen and empower them when they are feeling weak and overwhelmed.

Of course, to the most religiously minded, these psychological and social purposes overlook the most central of all religious motivations – religion itself. As psychologist Paul Johnson (1959) once wrote, “It is the ultimate Thou whom the religiously minded seeks most of all” (p. 70). Those who are most deeply committed to their faith hope to discover, hold on to, and if necessary transform a relationship with that which they hold sacred. It is not hard to find evidence of this motivation, even in children. One nine-year old child captured this spiritual motivation well: “I’d like to find God! But He wouldn’t just be there, waiting for some spaceship to land! He’s not a person, you know! He’s a spirit. He’s like the fog and the mist. . . I should remember that God is God, and we’re us. I guess I’m trying to get from me, from us, to Him with my ideas when I’m looking up at the sky!” (Coles, 1990)

Empirical studies show that religious motivation (i.e., the why’s of religion) makes a difference for health and well-being. For example, one group of researchers distinguished people who felt that their religious involvement was personally chosen from those whose religious practices were motivated by guilt, anxiety, and external pressures (Ryan, Rigby, & King, 1993). They found that those with a more internalized religious motivation showed better mental health and higher self-esteem than those whose religious motivation was based on guilt and social pressure.

The How’s of Religion

Scientific studies often yield contradictory findings. This too can drive people crazy, so let me give you a finding in our field that is pretty clear and straightforward -- religion is multi-dimensional (e.g., Idler, 2004). It involves beliefs, practices, experiences, and relationships. To put it another way, people can express their religion in many different ways or take many different religious pathways to achieve their ends.

We also realize that knowing **how** someone is religious may have more important implications for his/her health than knowing **whether** someone is religious. This may seem like only good common sense, but it's taken a while for researchers to delve more finely into the variety of religious expressions.

And we find that it makes a great deal of difference how people apply their faith to their lives. Is the focus of faith on preparing for the world to come or bringing about the kingdom of God in this life? It makes a great deal of difference how people approach religious rituals. Are rituals practiced in ways that are hollow and devoid of meaning or are they practiced with discipline and understanding? It makes a great deal of difference whether someone's faith is fixed, frozen and final or capable of growth and change over time and circumstances. And it makes a great deal of difference how people manifest their religion in the most stressful times of their lives.

Let me say more about this latter case, since it comes from my own area of research – the psychology of religion and coping. We know that in times of stress, people often look to their faith for help. For example, after the September 11 terrorist attacks on the World Trade Center and Pentagon, a national survey was conducted which indicated that 90% of the sample turned to God to cope with their feelings about the disaster (Schuster et al., 2001).

I like the way philosopher and theologian John E. Smith (1968) put it: “Crisis times . . . direct our thoughts away from the banality of ordinary life to dwell, with awe and proper seriousness, upon the mystery of life itself. . . It is as if the times of crisis were so many openings into the depth of life, into its ground, its purpose, its finite character” (p. 59).

Though many if not most turn to religion in stressful times, people draw on their faith in different ways, and these different ways of religious coping have implications for health and well-being. We have been able to distinguish and measure three ways in which people look to God for help in maintaining a sense of control in traumatic situations (Pargament, 1997). One approach is called Self-Directing. This is a John Wayne approach to religious coping. It says God gave you a brain, use it. Control occurs through the self. (Sample item: “When faced with trouble, I deal with my feelings without God’s help”). Another approach is called Deferring. This approach says when you have a problem, turn it over to God and let God solve it for you. Control occurs through God. (Sample item: “Rather than trying to come up with the right solution to a problem myself, I let God decide how to deal with it”). A third approach is called Collaborative. In this approach, the relationship between the individual and God is seen as a partnership. Control occurs through the relationship between the person and God. (Sample item: (“When it comes to deciding how to solve a problem, God and I work together as partners”).

Which approach is more common in the U. S.? Collaborative. Now we have found that some people who are quite religious make more use of the deferring style and some people who are quite religious make more use of the collaborative style. But do the

deferring and collaborative styles of religious coping have similar effects on health and well-being? The answer is they don't. As can be seen in Figure 1, people who are more religious can express their religion in a deferring manner or in a collaborative manner. But the deferring style is associated with poorer mental health, while the collaborative style is associated with better mental health. Studies have shown that feeling that you have a partner in God seems to be more helpful to people than believing you can defer the responsibility for your problems to God (e.g., Yangarber-Hicks, 2004).

Let me reiterate the point I am making here. It is not enough to know **whether** someone is religious. It is important to know **how** they are religious.

The When's of Religion

Actually, even here, I oversimplified some of the findings on our work on these three styles of religious coping because, in fact, there are times when a deferring style may make a great deal of sense. When are those times? When the individual is facing situations that are truly out of control, such as a terminal illness. In situations such as these, the wisest course of action may be to surrender control over to something beyond oneself. On the other hand, to take a deferring approach in response to controllable situations is potentially dangerous, as we find in cases of people with treatable medical illnesses who refuse treatment for religious reasons. But a self-directing approach can be every bit as problematic as a response to truly uncontrollable life situations. This is the equivalent of beating your head against the wall.

I am suggesting here that it is not enough to know **whether** someone is religious, **why** someone is religious, or **how** someone is religious. We have to consider **when** someone is religious. In particular, we have to consider whether the individual is

religiously discerning, applying the appropriate religious resource in the right time and place.

Paul Johnson (1959) captures this kind of situational discernment in his comments about prayer: “Prayer does not work as a substitute for a steel chisel or the wing of an airplane. It does not replace muscular action in walking or faithful study in meeting an examination. These are not the proper uses of prayer. But prayer may help to calm the nerves when one is using a chisel in bone surgery or bringing an airplane to a landing. Prayer may guide one in choosing a destination to walk toward, and strengthen one’s purpose to prepare thoroughly for an examination” (pp. 142-143).

The importance of religious discernment (or knowing the right place and time to access one’s faith) is also a central ingredient of the Serenity Prayer: “God grant me the serenity. To accept things I cannot change, Courage to change things I can, and wisdom to know the difference.”

The Who’s and Where’s of Religion

Finally, when we try to answer the question whether religion is good for your health, we have to consider who and where the person is. For instance, it seems that when it comes to religion we reap what we sow. People who invest more in their religious lives (i.e., those who are more religious and have a longer and deeper religious history) appear to gain more health benefits from their religion (e.g., Hays, Meador, Branch, & George, 2001).

Perhaps this also explains another fairly consistent finding in the literature – that religiousness among Black adults, particularly older black adults, is linked to greater health benefits than religiousness among their White counterparts. Studies have shown

that older Black adults are generally more religious than older White adults (Levin, Taylor, & Chatters, 1994). And remember, we reap what we sow.

Yet, there may be something more going on here. In this vein, Krause (2003) was interested in studying the links between having a sense of religious meaning in life and psychological well-being in a national sample of older Black and White adults. He found that, even after controlling for basic levels of religiousness, African American adults who reported greater religious meaning in their lives experienced greater life satisfaction, self-esteem, and optimism than did White American adults. Krause goes on to suggest that there may be something about the social context of African-American religion that is particularly beneficial. Nested in the Black church, African-Americans may be better equipped to understand the sufferings tied to slavery, racial prejudice and discrimination, Krause maintains. Furthermore, the Black church may be especially capable of offering its members spiritual support, religious meaning, and I might add, powerful uplifting spiritual emotions. Thus, it matters not only who the person is, but where the person is.

Conclusions

In the past, researchers came to religious study as distant observers of religious life. I could pick on clinical psychologists in the U. S. because I am one of them. Only 26% of psychologists here believe in God; this figure contrasts with over 90% of the population in the U. S. that reportedly believe in God (Shafranske, 2001). Social scientists are also relatively uneducated about religion. Even with our advanced degrees, many of us are functionally religiously illiterate, ending our religious education around the age of 12 or 13. The fact that the modal number of courses social scientists take on

religion in graduate school is zero doesn't help matters (Brawer, Handal, Fabricatore, Roberts, & Wajda-Johnston, 2002).

Perhaps for these reasons, researchers have kept their distance from religion, underestimating its depth and complexity. We have tended to assess religion through only a few items, such as self-ratings of religiousness/spirituality, frequency of church attendance, frequency of prayer, and denomination (e.g., Mahoney et al., 1999). These items provide only the thinnest sampling of religious life. And we have tended to ask simple questions, such as whether religion is good for your health?

In this presentation, I have suggested that there is no simple answer to this question. The most accurate answer is instead, "It depends." It depends on the why's, how's, when's, who's and where's of religion. As a field we are recognizing that to understand religion and its relationships to health and well-being, we need to get closer to religious life, assess it with more refinement and skill, and ask more specific question (Hill & Pargament, 2003). The question whether religion is good for your health is giving way to a tougher but more appropriate question: "How helpful or harmful are particular kinds of religious expressions for particular people dealing with particular situations in particular social contexts according to particular criteria of helpfulness and harmfulness" (Pargament, 2002, p. 178).

We're making progress toward answering this more complicated question, and these advances are beginning to shed light on what we might call a healthy, mature, or well-integrated religion (see Pargament, 2007 for summary). So let me conclude with what appear to be a few of the ingredients of a well-integrated faith.

- A well-integrated religion provides people with a significant transcendent vision, one that encompasses all of humanity within the sacred umbrella and one that offers direction and guidance in life.
- A well-integrated religion has breadth and depth; it consists of beliefs, practices, experiences, and relationships capable of dealing with the full range of life experiences.
- A well-integrated religion is discerning. It is tailored to the demands and challenges raised by specific life situations.
- A well-integrated religion is balanced. It applies means that are proportional and appropriate to its ends.
- A well-integrated religion is marked by commitment to a faith without sacrificing flexibility, the capacity to change and grow.
- A well-integrated religion brings out the best rather than the worst in people.

This is an exciting time to be involved in the scientific study of religion. It is hard to keep up with the knowledge that is being generated in our field. As scientists learn more about religious life, we are discovering that religion is every bit as rich and complex as other dimensions of life. But this kind of research is vital, for in learning more about religious life we are learning about a dimension that may make us most uniquely human. And with this knowledge in hand, we are poised to take the next step, moving from research to practice to promote not only the psychological, social, and physical health of people but their spiritual health as well.

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