



The Association between Religious Participation and Depression and Anxiety

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Introduction

- Since 1990, religious affiliation has plummeted in the US, by around 15% (Downey, 2017).
- Meanwhile, depression diagnoses have increased substantially in the US during the same time period (Brueck, 2019).
- Social participation is widely understood to be associated with a lower prevalence of depression, of which religious participation provides. (Shor, E. & Roelfs., 2013)
- Literature has produced positive results of religious participation as a treatment for depression, primarily in older adults. (Cruz, M., et al., 2013)
- However, no literature focused on the association between religious participation and the prevalence of depression, and none focused on the possible association with anxiety.
- No literature focuses on if the level of participation affects the prevalence of depression and anxiety

Research Questions

- Is there an association between religious participation and the prevalence of depression and anxiety?
- Is there an association between the level of religious participation and the prevalence of depression and anxiety?

Methods

Sample

- Respondents (n=15,071) were drawn from the **National Longitudinal Study of Adolescent to Adult Health (ADDHEALTH)**, a representative in-home survey of primarily English-speaking adolescents from grades 7 to 12 in the United States in 1994 and are asked survey questions at various points in their life until the conclusion of the study in 2008.
- Have access to 2 data points, Wave 1 (adolescents) and Wave 4 (young adult), use Wave 4

Measures

- The level of **religious participation** was measured by a sum of 3 questions about various religious activities including frequency of primary religious activities, secondary religious activities, and prayer.
- If the respondent answered, “once a week or more” or some more frequent amount, they received a 1, and if not a 0.
- Range from 0 to 3
- **Depression and anxiety** was measured by a combination of 2 questions about officially diagnosed anxiety and depression. If either answer was yes, the respondent received a 1.
- Range 0 (no diagnosis) to 1 (diagnosis of anxiety or depression)

Results

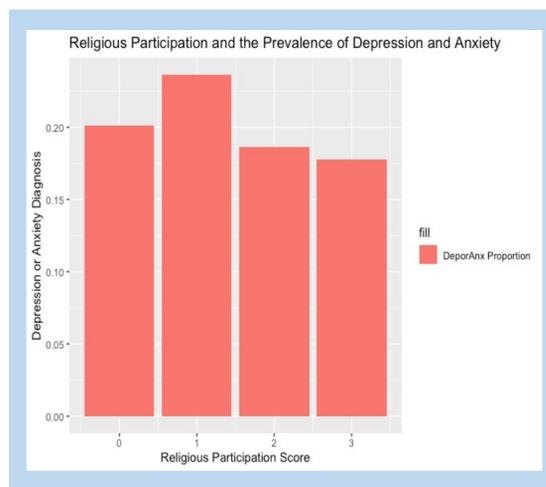
Univariate

- 81.12% of respondents are religious.
- 24.14% of respondents who are religious have a religious participation score of 0, 38.21% have a score of 1, 25.73% have a score of 2, and 11.93% have a score of 3
- 20.77% of respondents have officially been diagnosed with depression or anxiety

Bivariate

- A chi square test showed that there is a significant negative association between **being a member of a religious group** and the **prevalence of depression and anxiety** ($\chi^2 = 4.3881$, $p = .03619$)
- Another chi square test shows that there is a significant negative association between the **level of religious participation** and the **prevalence of depression and anxiety** ($\chi^2 = 16.996$, $p = 0.0007081$)

Figure 1.

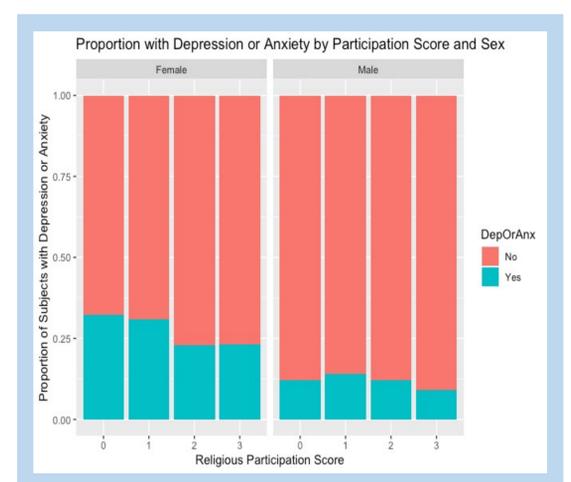


- While there is a significant negative association between the level of religious participation and the prevalence of depression and anxiety, there was an increase in the number of respondents with depression and anxiety from the 0 to 1 levels of religious participation (Figure 1).

Multivariate

- The respondent’s sex does appear to moderate the relationship between the level of religious participation and the prevalence of depression and anxiety, as while the relationship holds true for both males and females, the relationship appears to be much stronger amongst the female sex (Figure 2).
- After controlling for sex, the prevalence of depression and anxiety is significantly negatively associated with the level of religious participation ($B = -0.16137$, $p < .0001$).

Figure 2.



Discussion

- The prevalence of depression and anxiety is significantly negatively associated with the level of religious participation; however the relationship is stronger amongst females.
- Being active in religious practices may affect someone’s likelihood of depression and anxiety
- Religious groups could use such results to advocate for increased participation within its existing ranks and to possibly attract more followers
- Pro-religion lawmakers and lobbyists could use such results to justify their argument for the inclusion of religious practices in public schools
- Further research is needed to determine if the results determined here are significantly different to participating in social non-religious groups such as clubs, sports teams, and other general social activities offered in society.