Religion and mental health among Hindu young people in England

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Abstract

The aim of this study was to explore the relationship between mental health and attitude toward their religious tradition among a sample of 330 young people attending the Hindu Youth Festival in London. The participants completed the Santosh-Francis Scale of Attitude toward Hinduism together with the abbreviated form of the Revised Eysenck Personality Questionnaire which provides measures of neuroticism and psychoticism. The data indicated that a more positive attitude toward Hinduism was associated with lower psychoticism scores but unrelated to neuroticism scores. There is no evidence, therefore, to associate higher levels of religiosity with poorer mental health among young people within the Hindu community.
The psychology of religion has long been concerned with establishing and discussing the relationship between religiosity and mental health. Some psychological traditions, broadly speaking, posit a negative association between religion and mental health (see, for example, Freud, 1950), while other psychological traditions, broadly speaking, posit a negative association between religion and mental health (see, for example, Jung, 1938). Empirical research designed to test these competing theories has been frustrated by two major problems: the problem of defining and operationalising mental health, and the problem of defining and operationalising religiosity.

One attempt to address these problems has been proposed by Francis and his colleagues in a series of studies which has examined the relationship between Eysenck’s dimensional model of personality and attitude toward Christianity. There are two main strengths and one significant weakness to this series of studies. The first strength is that Eysenck’s dimensional model of personality (Eysenck & Eysenck, 1985) provides an appropriate way in which to test these two conflicting theories regarding the relationship between psychological health and attitude toward Christianity. Eysenck’s dimensional model of personality maintains that abnormal personality is not discrete from, but continuous with normal personality. Accordingly neurotic disorders lie at one extreme of a dimension of normal personality, ranging from emotional stability, through emotional lability, to neurotic disorder. Similarly, psychotic disorders lie at one extreme of another dimension of normal personality, ranging from tendermindedness, through toughmindedness, to psychotic disorder. Therefore it is possible to define and operationalize the dimensions of neuroticism and psychoticism so that they appear to be orthogonal and independent of each other.

The second strength is that assessment of the attitudinal dimension of religiosity
accesses an aspect of religion which may get closer to the heart of an individual’s religiosity than can be achieved by measures of behaviour or belief. Behaviours (like attendance at worship services) may be subject to so many external and contextual constraints. Beliefs may be held in a purely cognitive or cerebral manner. Attitudes, on the other hand, are concerned with deep-seated affective predispositions to respond. As underlying covert predispositions, attitudes are able to exercise both conscious and unconscious influences.

The significant weakness to this series of studies is that it has been conducted largely in a Christian or post-Christian context. The attitudinal dimension of religiosity accessed has been explicitly that of attitude toward Christianity. The aim of the present study is to review the evidence so far available from this body of research conducted in a Christian context and then to extend this research tradition among the Hindu community in England.

Eysenck and Eysenck (1975) defined high neuroticism scorers as being anxious, worrying, moody, and frequently depressed individuals who are likely to sleep badly and to suffer from various psychosomatic disorders. They are seen as overly emotional, reacting too strongly to all sorts of stimuli, and finding it difficult to get back on an even keel after emotionally arousing experiences. Strong reactions interfere with their proper adjustment, making them react in irrational, sometimes rigid ways. Highly neurotic individuals are worriers whose main characteristic is a constant preoccupation with things that might go wrong, and a strong anxiety reaction to these thoughts. A series of studies reported by Francis, Pearson, Carter, and Kay (1981), Francis, Pearson, and Kay (1983), and Francis and Pearson (1991) examined the relationship between Eysenck’s neuroticism scales and the Francis Scale of Attitude toward Christianity. After controlling for the expected sex differences, according to which females score more highly than males on both indices of religiosity (Argyle & Beit-Hallahmi, 1975) and neuroticism (Jorm, 1987), these studies found no significant relationship between neuroticism scores and a positive attitude toward
Eysenck and Eysenck (1976) defined high psychoticism scorers as being cold, impersonal, hostile, lacking in sympathy, unfriendly, untrustful, odd, unemotional, unhelpful, lacking in insight, and strange, with paranoid ideas that people are against them. They also use the following descriptors: egocentric, self-centred, impersonal, lacking in empathy, solitary, troublesome, cruel, glacial, inhumane, insensitive, sensation-seeking, aggressive, foolhardy, making fools of others and liking odd and unusual things. Eysenck and Eysenck (1975) also maintained that emotions such as empathy and guilt are characteristically absent in people who score high on measures of psychoticism. In spite of recognized theoretical and empirical difficulties associated with the earlier editions of both the adult (Eysenck, Eysenck, & Barrett, 1985) and the junior psychoticism scales (Corulla, 1990), repeated analyses demonstrate a significant negative relationship between psychoticism scores and a positive attitude toward Christianity (Francis & Pearson, 1985; Kay, 1981, Francis, 1982). This finding lends support to the theory that Christianity is associated with higher levels of psychological health and contradicts the theory that Christianity is associated with lower levels of psychological health.

The consensus of these focused analyses is given further support by studies conducted among other samples of school pupils in the UK, using the Francis Scale of Attitude toward Christianity, including 8-11 year olds (Robbins, Francis, & Gibbs, 1995), 11 year olds (Francis, Lankshear, & Pearson, 1989), 11-16 year olds (Francis & Montgomery, 1992), 15-16 year olds (Francis & Pearson, 1988) and 16-18 year olds (Wilcox & Francis, 1997; Francis & Fearn, 1999). The findings have also been replicated among secondary school pupils in Germany (Francis & Kwiran, 1999) and in Hong Kong (Francis, Lewis, & Ng, 2003). Another set of studies has employed the Francis Scale of Attitude toward Christianity alongside the Eysenck measures of personality among students and adults, including studies...
Religion and mental health among Hindu young people in the UK (Francis, 1991, 1993, 1999; Francis & Bennett, 1992; Carter, Kay, & Francis, 1996; Bourke & Francis, 2000; Shuter-Dyson, 2000), Australia and Canada (Francis, Lewis, Brown, Philipchalk, & Lester, 1995), Northern Ireland (Lewis & Joseph, 1994; Lewis, 1999, 2000), Republic of Ireland (Maltby, 1997; Maltby & Lewis, 1997), the USA (Lewis & Maltby, 1995; Roman & Lester, 1999), France (Lewis & Francis, 2000), and Greece (Youtika, Jospeh, & Diduca, 1999). The basic pattern was confirmed that attitude toward Christianity was negatively correlated with psychoticism, but unrelated to either extraversion or neuroticism.

The opportunity to extend this research to the Hindu community has been afforded by the development of the Santosh-Francis Scale of Attitude toward Hinduism (Francis, Santosh, Robbins, & Bhanot, 2007) which has operationalised the attitudinal construct employed in Francis’ original research in a way appropriate within the Hindu community.

Method

Sample

A sample of 330 young people, between the ages of 12 and 35, attending the Hindu Youth Festival 2001 in London and self-identifying as Hindu affiliates, completed the questionnaire. The sample comprised 172 males and 158 females: 54% were under the age of twenty, 40% were in their twenties, and 6% were in their thirties (mean = 19.8, sd = 5.1).

Instruments

Psychoticism and neuroticism were assessed by two six-item scales proposed by the abbreviated form of the Revised Eysenck Personality Questionnaire (Francis, Brown, & Philipchalk, 1992). This instrument also contained a six-item measure of extraversion and a six-item lie scale. Each item is assessed on a dichotomous scale: yes and no.
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Attitude toward Hinduism was assessed by the 19-item Santosh-Francis Scale of Attitude toward Hinduism (Francis, Santosh, Robbins, & Bhanot, 2007). The items are concerned with affective responses toward Hindu beliefs, rituals, and scriptures. Each item is assessed on a five-point scale: agree strongly, agree, not certain, disagree, and disagree strongly.

**Results**

The Santosh-Francis Scale of Attitude toward Hinduism recorded an alpha coefficient of 0.87. The four scales of the abbreviated form of the Revised Eysenck personality Questionnaire recorded the following alpha coefficients: neuroticism, 0.67; extraversion, 0.72; psychoticism, 0.47; and lie scale, 0.58. The lower alpha coefficient reported by the psychoticism scale is consistent with the known difficulties in operationalising this dimension of personality and with the performance recorded in other studies (Francis, Philipchalk, & Brown, 1991).

Table one presents the correlation matrix between attitude toward Hinduism, the four Eysenckian scales, and sex. Table two presents the partial correlations between attitude toward Hinduism and the four Eysenckian scales, controlling for sex differences.

**Conclusion**

The correlation matrix and the partial correlations demonstrate that the same pattern of relationship exists between the four Eysenckian scales and attitude toward Hinduism as have been reported in earlier studies between the four Eysenckian scales and attitude toward Christianity. Among Hindu young people higher scores on the scale of attitude toward Hinduism are associated with lower psychoticism scores, but unrelated to both neuroticism...
scores and extraversion scores. In other words, young people within the Hindu community in England who take their religion seriously (in the sense of holding a positive attitude toward Hinduism) show no signs of experiencing poorer mental health and some signs of experiencing better mental health (in terms of lower psychoticism scores), when compared with their peers within the Hindu community who take their religion less seriously (in the sense of holding a less positive attitude toward Hinduism).

The present study has been the first to explore the relationship between attitude toward Hinduism and Eysenck’s dimensional model of personality. The generalisability of the findings are restricted by the self-selected nature of the sample and by the poor psychometric performance of the edition of the psychoticism scale employed. Replication studies should attempt to access more representative samples of the Hindu community and employ a longer and more reliable form of the Eysenck psychoticism scale.
References


### Table 1 Correlation matrix

<table>
<thead>
<tr>
<th></th>
<th>Sex</th>
<th>L</th>
<th>E</th>
<th>P</th>
<th>N</th>
</tr>
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<tbody>
<tr>
<td>Attitude</td>
<td>-0.0171</td>
<td>+0.0185</td>
<td>-0.0136</td>
<td>-0.1958</td>
<td>-0.0927</td>
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<tr>
<td>NS</td>
<td>NS</td>
<td>NS</td>
<td>.001</td>
<td>.001</td>
<td>.001</td>
</tr>
<tr>
<td>Neuroticism (N)</td>
<td>+0.2191</td>
<td>-0.1962</td>
<td>-0.2669</td>
<td>+0.1218</td>
<td></td>
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<tr>
<td>.001</td>
<td>.001</td>
<td>.001</td>
<td>.05</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychoticism (P)</td>
<td>-0.0410</td>
<td>-0.2948</td>
<td>+0.0220</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NS</td>
<td>.001</td>
<td>NS</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Extraversion (E)</td>
<td>+0.0405</td>
<td>-0.0034</td>
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<tr>
<td>NS</td>
<td>NS</td>
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<td></td>
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<tr>
<td>Lie scale (L)</td>
<td>+0.0433</td>
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NS: Not Significant
Table 2  Partial correlations controlling for sex differences

<table>
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<th>E</th>
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<tr>
<td>Attitude</td>
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<td>-0.0152</td>
<td>-0.2031</td>
<td>-0.0763</td>
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<tr>
<td></td>
<td>NS</td>
<td>NS</td>
<td>.001</td>
<td>NS</td>
</tr>
<tr>
<td>Neuroticism (N)</td>
<td>-0.2133</td>
<td>-0.2878</td>
<td>+0.1313</td>
<td>.05</td>
</tr>
<tr>
<td></td>
<td>.001</td>
<td>.001</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychoticism (P)</td>
<td>-0.3009</td>
<td>-0.0441</td>
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<tr>
<td></td>
<td>.001</td>
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<tr>
<td>Extraversion (E)</td>
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