RELIgIOUS COPING, FAMILY SUPPORT, AND NEGATIVE AFFECT IN COLLEGE STUDENTS

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Summary.—To understand the influence that religion may have on mental health, the present study examined influences of religious coping and family support on anxiety and depression in 190 college students (women = 67.4%; M age = 21.7 yr., SD = 4.9). Subjects were recruited as volunteers from undergraduate psychology courses and completed the Ways of Religious Coping Scale, the General Functioning subscale of the Family Assessment Device, the Anxiety Scale of the Personality Assessment Inventory, and the Beck Depression Inventory—Second Edition. Analyses indicated greater family support was significantly associated with less anxiety and depression, whereas religious coping was not significantly correlated with anxiety and depression. Overall findings suggest that family emotional support may provide a stronger source of support for college students than religious coping.

As noted by Boudreaux, Catz, Amaral-Melendez, and Brantley (1995), the equivocal findings on effect of religiosity on mental health may be due to much previous research on religious coping and mental health utilizing noncomprehensive measures of religiosity. Thus, the present study examined the influence of religious coping on anxiety and depressive symptoms in a sample of 190 (women = 67.4%) college students (M age = 21.7 yr., SD = 4.9) from one institution. Subjects were volunteers from undergraduate psychology courses and were not compensated for participation. They completed the General Functioning subscale of the Family Assessment Device (α = .92; Epstein, Baldwin, & Bishop, 1983) which assesses emotional relationships and functioning within the family, the Anxiety subscale of the Personality Assessment Inventory (α = .90; Morey, 1991), the Beck Depression Inventory—Second Edition (α = .90; Beck, Steer, & Brown, 1996), and the Ways of Religious Coping Scale (α = .92; Boudreaux, et al., 1995), which assesses the magnitude and type of internal and external religious behaviors and cognitions individuals may use to cope. This scale has been found to have excellent internal reliability and construct validity with college students.

The mean scores and standard deviations were for overall Religious Coping 58.6 (SD = 31.9), for the Internal Religious Coping subscale 27.7 (SD = 26.9), for the External Religious Coping subscale 6.0 (SD = 7.7), for Anxiety 54.5 (SD = 11.1), and for Depression 9.7 (SD = 8.1). There were no significant sex differences on these measures.

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Pearson correlations indicated that overall scores on Religious Coping were not significantly associated with those on Anxiety ($r = .03$) or Depression ($r = -.10$); Internal Religious Coping was not significantly related to Anxiety ($r = .04$) or Depression ($r = -.04$); and External Religious Coping was not significantly related to Anxiety ($r = -.02$) but was significantly associated with Depression ($r = -.16$, $p < .05$). On the other hand, Family Functioning scores were significantly associated with both Anxiety ($r = .22$, $p < .05$) and Depression ($r = .27$, $p < .01$). One may note, on the Family Assessment Device lower scores indicate greater family support.

Scores on Internal Religious Coping, External Religious Coping, and Family Functioning were then simultaneously entered into multiple regression analyses for Anxiety and Depression wherein sex, ethnicity, age, marital status, and income were controlled. Internal Religious Coping was not a significant independent predictor of Anxiety or Depression; External Religious Coping was not a significant independent predictor of Anxiety but was a significant independent predictor for Depression ($B = -.196$, $t = -2.04$, $p = .04$). Family Functioning was a significant independent predictor for both Anxiety ($B = .24$, $t = 3.1$, $p = .002$) and Depression ($B = .25$, $t = 3.2$, $p = .002$).

College may indeed be a time of stress for many students (Largo-Wright, Peterson, & Chen, 2005), including many in the present sample, as suggested by their relatively high mean scores on Anxiety and Depression. The present findings suggest, however, that family may provide a stronger source of support for students than does religious coping, which appeared to have a negligible affect on the psychological functioning of these college students.

REFERENCES


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