

Research Paper

## Religiosity and its Influence on Mental Health among the Youth in Urban Bengaluru

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### ABSTRACT

**Background:** In the young generation of India, majorly being college students have been exposed to various psychological disturbances due to external factors that could be academic stress, homesickness and social pressure. In this regard religiosity is evident to enhance the mental health of a person, though the association between religiosity and the spectrum of emotional states among the college youth remains underexplored. **Objectives:** This study aimed to examine the relationship between religiosity and mental health exploring how religiosity may influence emotional well-being. **Methods:** The study was conducted as a cross-sectional study with 181 participants from Bengaluru, through convenience sampling. The level of religiosity was determined with the help of The Duke University Religion Index (DUREL), and the level of psychological distress was determined using Depression Anxiety Stress Scale-21 (DASS-21). To compare religiosity and emotional states by gender, the Mann-Whitney U test was used while Spearman correlation test was used to test the relationship between religiosity and emotional states. **Results:** The study comprised 90 male participants (49.7%) and 91 female participants (50.3%) with a mean age of 21.6 (SD = 2.28). There were no statistically significant differences between females and males regarding religiosity ( $p = 0.35$ ), or emotional states ( $p = .064$ ). The results revealed a negative relationship between religiosity and psychological distress (Spearman's  $\rho = -0.222$ ), suggesting that religiousness is inversely related to psychological distress. **Conclusions:** There is growing evidence that religiosity has a positive influence on mental health, and it seems that increased religiosity results in reduced psychological distress in both male and female participants. These results imply that there are positive implications of spiritual practices for mental health among youths.

**Keywords:** Religiosity, Mental health, Psychological distress, College youth, Wellbeing

India has the largest population of youth and college going students who are vulnerable to get affected with emotional issues. In the current scenario psychological distress can be attributed as a major concern in developing countries like India (Laxmi, 2021). In the present fast paced phase of society, the youth face an array of emotional turbulence at different phases of their life.

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As India's ever growing population keeps rising, the risk of young adults and college going student's emotional issues is on the rise. An individual's emotional state goes unnoticed in this present competitive century (TOI, 2022). The movement of free thinking and liberalism has paved numerous ways and unwavering freedom for young individuals to believe in any set of ideas and core beliefs that can influence their emotional states. This situation has raised concerns on the fact can religiosity of an individual affect their emotional states of well-being on a positive, negative or neutral note.

Religiosity is attributed to the central part of an individual's identity in their reconsideration of religious faith and beliefs, commitment, practices and community bonding. It is the extent to which people express and engage their religious beliefs and implications in their daily lives (Villani et al., 2019). A person's social, emotional and psychological well-being can be summarised to the term mental health. A sound mental health involves a person's capabilities to handle stress, being responsible in maintaining a healthy work life, good relationships and to make better decisions. Good mental health leads to healthy coping mechanisms for one's valued contribution to their respective community, and to face life challenges without emotional or psychological distress (Lucchetti et al., 2020).

Among college going students psychological distress is one among the concerns that is influenced by academic workload and homesickness. Depression, anxiety, and substance abuse are among the common problems that students face and most of them do not seek any professional help (Pedrelli et al., 2014). Evidence shows that one among five individuals experienced negative emotional states. Approximately 970 million people struggle with various mental illnesses, wherein 8 million people contribute to the annual deaths (Jain, 2023).

The prevalent rise in mental health issues in India has spread across the vast population of the country irrespective of demographic backgrounds (Math & Srinivasaraju, 2010). Study conducted by Indian Council of Medical Research (ICMR) showed that approximately 12-13 percent of total students in India experienced emotional, psychological and behavioural distress (Dittakavi, 2022).

The aim of this study is to observe and understand gender and the role it has with religiosity. And does the mental health of an individual get influenced by their gender, as well as to understand the interconnection between religiosity and emotional states of the individual.

### **MATERIALS & METHODS**

This study was carried out in Bengaluru, India. This is a cross-sectional study and the respondents are from age 18-35 in Urban Bangalore who are either pursuing their undergraduate or postgraduate courses. In this study convenience sampling technique was used. There have been 181 samples collected in total through google forms, the inclusion criteria for the participants are that they must be in undergraduate or postgraduate programs. The study period for data collection was from November 2022 to February 2023.

For data collection a validated questionnaire was used along with the demographics information such as (gender, age, academic course). In this study two scales were used, The Duke University Religion Index (DUREL) to measure religiosity and Depression Anxiety Stress Scale (DASS21) was used. The DUREL scale has 5 questions in total. The DUREL scale consist of two sections wherein the first section includes two questions on the basis of extrinsic values of individuals - specifically the first question in the five item index scale

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deals with organisational religious activity (ORA) and the second question in the first section of the five item index scale deals with non - organisational religious activity (NORA). The questions in the first section are measured on a 6-point Likert scale ranging from 1 to 6. The second section of the DUREL scale comprises three questions in total which deal with the intrinsic religiosity (IR) of individuals. This particular section is measured on a 5-point Likert scale ranging from 1 to 5.

The DASS21 scale is a set of 3 sections that measures the emotional spectrums of depression, anxiety and stress; which includes 21 questions. These 3 sections are further divided into 7 questions for each emotional spectrum. The questions in the DASS21 scale are measured on a 4-point Likert scale ranging from 0 to 3.

Consent was taken from each and every participant before they took part in the study. After the data collection from the respondents, data was entered into MS Excel and coded according to the scores of the scales. The data interpretation was done with the help of Jamovi 2.3.28. The demographic of the respondents was interpreted with the help of frequency, percentage and standard deviation. MannWhitney U test was used to understand religiosity (DUREL) and gender, as well as DASS21 and gender wherein Spearman correlation was used to understand the connection between DUREL and DASS21.

### RESULTS

In this study, 181 college students were involved as participants. The mean age of the total study population was 21.6, indicating the standard deviation of the ages being 2.28 within the sample. Another one of the characteristics being classified into gender, which comprises both male and female, wherein 90 (49.7%) being male participants, and 91 (50.3%) female respondents in the study. In terms of graduate course classification, the participants were from two different types of programs. From the undergraduate program 87 (48%) respondents, and in the postgraduate program 94 (52%) respondents were included in the study as shown in [Table 1].

**Table 1: Demographics characteristics of the participants N=181**

Characteristics	Classification	Frequency	Percentage	MEAN±SD
Age				21.6±2.28
Gender	Male	90	49.7%	
	Female	91	50.3%	
Course	Undergraduate	87	48%	
	Postgraduate	94	52%	

With respect to religiosity and gender, Mann-Whitney U test was performed, where P value is 0.35 as shown in [Table 2].

**Table 2: Religiosity and Gender Independent Samples T-Test**

		Statistic	P
RELIGIOUS INDEX TOTAL	Mann-Whitney U	3766	0.35

According to the DASS 21 and gender, the P value for Mann-Whitney U test is 0.064 as shown in [Table 3].

**Table 3: Emotional states and Gender**

**Independent Samples T-Test**

			<b>Statistic</b>	<b>P</b>
<b>DASS 21 TOTAL</b>	<b>21</b>	<b>Mann-Whitney U</b>	<b>3443</b>	<b>0.064</b>

Spearman’s correlation between DASS 21 and religious index reflect that the Spearman’s rho is -0.222 as shown in [Table 4].

**Table 4: Correlation between religiosity and emotional state**

**Correlation Matrix**

		<b>DASS 21 TOTAL</b>	<b>RELIGIOUS INDEX TOTAL</b>
<b>DASS 21 TOTAL</b>	<b>Spearman's rho</b>	—	
	<b>p-value</b>	—	
<b>RELIGIOUS INDEX TOTAL</b>	<b>Spearman's rho</b>	<b>-0.222**</b>	—
	<b>p-value</b>	<b>0.003</b>	—

**DISCUSSION**

In the present study both male and female approximately with a strength of 50 percent each participated. This particular study was conducted to understand religiosity and mental health among the youth. A comparable study conducted on the same age group discovered that religiosity may play an essential impact in mental health for people moving into adulthood (Hwang et al., 2022).

In this study it was found that there is no significant difference between religiosity and gender which identifies that the level of religiosity is similar for both males and females. A similar finding in a study was seen where it was highlighted that there are no differences in religiosity among genders as religiosity is not an important effect on gender (Feltey & Poloma, 1991).

In some of the studies, evidence showed contradictions to our findings. It showed that there is a difference between both male and female towards religiosity. This is due to differences in the socio-demographic factors such as education, age, marital status and income (Gobind et al., 2023).

In the current study, it was identified that there is no substantial difference between emotional states and gender, which also proves that gender does not determine mental health score. Studies also support the present findings that there is no significant difference in the stress and anxiety levels with regards to gender among the youths (Vaidya et al., 2021). Some studies have also shown evidence that gender has no effect in context to the emotional states which supports the present study (Grant et al., 2002). The results of the present study are supported by another study that found no gender differences in the depression and stress levels of college students (Gao et al., 2019).

The present study has shown that the Spearman’s rho is -0.222, which shows that there is a negative correlation between DASS 21 and religious index. Thus when the religious index (DUREL) scores increases the DASS 21 (emotional states) decreases. The same result is also supported by numerous studies regarding religiosity and mental health as it was seen. This suggests that as the DASS 21 scores go high it is perceived as poor mental health

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whereas when DASS 21 scores are low it is determined as better mental health. Which means with more religiosity among college going students there is evidence of better mental health. Few studies supported the present findings wherein religiosity and the experiences that an individual receives from their belief and/or religious routines have repeatedly shown to boost mental health in positive manners (Louca, 2020).

### CONCLUSION

Religiosity plays an integral part in the lives of the youth population as was evident in this particular study. In respect to religious practices, males and females score similar and have comparable levels of mental health. Furthermore, there is no difference in the emotional states of genders associated with religiosity; rather, it is positively related to mental health. In previous studies and evidence most of the findings have shown that there is a positive correlation between both mental health and spiritual practices. For centuries this underlying factor of religiosity has powered humanity into unprecedented potential of the mind, body and spirit. Numerous studies indicate that religiosity is associated with better mental well-being, and the findings of this study highlight these conclusions.

Since this study is taken in an urban city in India, the sample population being the nation's youth; their mindset, ideologies, and set of beliefs could shift as they move forward into their later adulthood life, thus contributing to a possibility of changes in their levels of mental health (Moreira-Almeida et al., 2006).

Hence mental health is an important aspect, and it can improve in an individual's life by undertaking in various spiritual activities and through being involved in various socio-cultural settings that the person has interest in which can lead to better mental well-being.

### *Limitations of the study*

The study's findings may not be universal due to a small sample size that may not adequately reflect the larger population. There is a scope to explore mental health in a wider demography.

### REFERENCES

- Dittakavi, S. (2022, March 21). Students' Mental Health in India. BW Health. <https://bwhealthcareworld.com/article/-students-mental-health-in-india-423253#:~:text=Indian%20Council%20of%20Medical%20Research,that%20of%20entering%20a%20college>
- Feltey, K. M., & Poloma, M. M. (1991). From sex differences to gender role beliefs: Exploring effects on six dimensions of religiosity. *Sex Roles, 25*–25(3–4), 181–193. <https://doi.org/10.1007/bf00289853>
- Gao, W., Ping, S., & Liu, X. (2019). Gender differences in depression, anxiety, and stress among college students: A longitudinal study from China. *Journal of Affective Disorders, 263*, 292–300. <https://doi.org/10.1016/j.jad.2019.11.121>
- Gobind, Pinki, Sony, K. K., & Behmani, R. K. (2023). Religious Practices and Gender Differences: A Psychological Review » *The International Journal of Indian Psychology*. *International Journal of Indian Psychology*. <https://doi.org/10.25215/1103.434>
- Grant, K., Marsh, P., Syniar, G., Williams, M., Addlesperger, E., Kinzler, M. H., & Cowman, S. (2002). Gender differences in rates of depression among undergraduates :measurement matters. *Journal of adolescence, 25*(6), 613–617. <https://doi.org/10.1006/jado.2002.0508>

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- Hwang, W., Cheng, K. J., Kim, J. H., Brown, M. T., Vasilenko, S. A., & Silverstein, M. (2022). Religiosity and Mental Health Among Young-Adults in Generation X from Emerging to Established Adulthood. *Journal of Adult Development*, 30(1), 108–117. <https://doi.org/10.1007/s10804-022-09414-7>
- Jain, R. (2023, October 10). World Mental Health Day: 60-70 mn people in India suffer from common mental disorders; stigmatisation & f. *The Economic Times*. <https://economictimes.indiatimes.com/magazines/panache/world-mental-health-day-60-70-mn-people-in-india-suffer-from-common-mental-disorders-stigmatisation-financial-barriers-prevent-timely-treatment/articleshow/104289268.cms>
- Laxmi, V. (2021, January 14). The Kids Aren't All Right: Mental Health and Indian Youth. *Youth Ki Awaaz*. <https://www.youthkiawaaz.com/2021/01/mental-health-needs-of-children-and-young-people-in-india/>
- Louca, E. P.-. (2020). Effects of Religion and Faith on Mental Health. *New Ideas in Psychology*, 60, 100833. <https://doi.org/10.1016/j.newideapsych.2020.100833>
- Lucchetti, G., Góes, L. G., Amaral, S. G., Ganadjian, G. T., Andrade, I., De Araújo Almeida, P. O., Carmo, V. M. D., & Manso, M. E. G. (2020). Spirituality, religiosity and the mental health consequences of social isolation during Covid-19 pandemic. *International Journal of Social Psychiatry*, 67(6), 672–679. <https://doi.org/10.1177/0020764020970996>
- Math, S., & Srinivasaraju, R. (2010). Indian psychiatric epidemiological studies: Learning from the past. *Indian Journal of Psychiatry*, 52(7), 95. <https://doi.org/10.4103/0019-5545.69220>
- Pedrelli, P., Nyer, M., Yeung, A., Zulauf, C., & Wilens, T. (2014). College Students: Mental Health Problems and Treatment Considerations. *Academic Psychiatry*, 39(5), 503–511. <https://doi.org/10.1007/s40596-014-0205-9>
- TOI. (2022, April 29). Mental health deteriorating among college students: Study. *The Times of India*. <https://timesofindia.indiatimes.com/city/mangaluru/mental-health-deteriorating-among-college-students-study/articleshow/91193008.cms>
- Vaidya, R., Kaza, S., Gupta, P., Weine, S., Nooyi, S., & Chaudhury, N. (2021). Depression, Anxiety, and Stress among Indian Youth during the COVID-19 Lockdown - A Cross-Sectional Survey. *Journal of Mental Health and Human Behaviour*, 26(2), 153. [https://doi.org/10.4103/jmhbb.jmhbb\\_65\\_21](https://doi.org/10.4103/jmhbb.jmhbb_65_21)
- Villani, D., Sorgente, A., Iannello, P., & Antonietti, A. (2019). The Role of Spirituality and Religiosity in Subjective Well-Being of Individuals with Different Religious Status. *Frontiers in Psychology*, 10. <https://doi.org/10.3389/fpsyg.2019.01525>

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### **Conflict of Interest**

The author(s) declared no conflict of interest.

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