
Religiousness, Race, and Psychological Well-Being: Exploring Social Psychological Mediators

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Research and theory combine to suggest that the relationship between religious belief and psychological well-being should be more positive among Black than among White individuals. Further, this relationship should be mediated by social psychological aspects of religion that have positive implications for well-being, such as self-enhancing religious attributions and a positive social identity associated with one's religious affiliation. These predictions were examined in a sample of 66 Black and 59 White university students. Religious belief salience and psychological well-being were moderately positively correlated, but only among Black subjects. The relationship between religious belief and well-being was partially mediated by attributions to God that enhance life meaning and positive social identification resulting from one's religious affiliation, again only among Black subjects. Implications of these results for the self-maintenance of Black college students are discussed.

The relationship between religiousness and adaptive psychological functioning has received wide currency as an intuitive notion in our society. It is expressed in such adages as "There are no foxhole atheists," which describes situations in which religion is appropriated to cope with immediate negative or uncontrollable circumstances, and "She must be living right," when an individual's avoidance of an imminent negative outcome is attributed to moral uprightness. Considerable research has addressed the relationship between religiousness and psychological functioning and is reviewed elsewhere (Bergin, 1991; Paloma & Pendleton, 1988; Payne, Bergin, Bielema, & Jenkins, 1991). This research generally indicates that a small, positive correlation (typically about .10) exists between religiousness and psychological well-being (Bergin, 1983). However, these reviews collapse across studies employing disparate measures of

religiousness, thereby obscuring significant relationships between specific aspects of religiousness and psychological adjustment indicators. Indeed, studies that measure intrinsic religiousness, which refers to the extent to which individuals internalize and express commitment to religious beliefs, find much stronger relationships with indicators of psychological well-being. For example, intrinsic religiousness is associated moderately (.30-.40) with decreased anxiety and depression and with increased well-being, self-esteem, tolerance, and self-control (Baker & Gorsuch, 1984; Bergin, Masters, & Richards, 1987; Nelson, 1989; Smith, Weigert, & Thomas, 1979; Watson, Morris, & Hood, 1987).

Two issues are examined in this article that follow from the foregoing research. First, does the relationship between religiousness and psychological well-being differ between Black and White individuals; second, what are the social psychological mediators of this relationship?

RACIAL DIFFERENCES IN RELIGION

Research suggests that Blacks are generally more religious than Whites. For example, Blacks regard religion as more personally important and are more likely to be church/synagogue members than Whites (Gallup, 1984). Blacks engage in more public and private religious behavior (Johnson, Matre, & Armbricht, 1991; Neff & Hoppe, 1993) and rate religious values higher than Whites do (Malpass & Symonds, 1974). Finally,

Authors' Note: Thanks to Wayne Bylsma, Riia Luhtanen, and two anonymous reviewers for their helpful comments on a previous version of this article. Address correspondence to Bruce Blaine, Department of Psychology, Hofstra University, Hempstead, NY 11550-1090.

PSPB, Vol. 21 No. 10, October 1995 1031-1041

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Blacks are more intrinsically religious (Nelson, 1989), attend religious services more frequently (Beeghley, Van Velsor, & Bock, 1981), and base their global self-evaluations more on religious beliefs than Whites (Blaine, Crocker, & Tomaka, 1992). Furthermore, these differences remain even when key demographic variables, such as socioeconomic status and educational level, are controlled.

These findings imply that the general relationship between religion and psychological well-being may be more positive among Blacks than Whites, an idea that has received surprisingly little research attention. St. George and McNamara (1984) analyzed National Opinion Research Center data that included measures of strength of religious affiliation, religious participation, and global happiness. Their results indicated that, among adult White respondents, strength of religious affiliation did not explain variance in global happiness beyond that explained by a set of demographic variables. Among Black respondents, however, strength of religious affiliation appreciably increased the explained variance in global happiness beyond that accounted for by demographic controls, and this effect was most pronounced among Black males. Although significance tests for these changes in R^2 were not reported, regression coefficients support the conclusion that religious commitment is more strongly associated with global happiness among Blacks than Whites. St. George and McNamara's analysis also indicated that church attendance was more strongly related to global happiness (when demographic variables were controlled) among Black than White respondents.

Although this research suggests that religion is associated with greater psychological adjustment in Black than White individuals, it does not address why this is so. That is, whereas St. George and McNamara found that both religious commitment and participation in religious services were related to higher levels of happiness and that this was most true for Black subjects, these researchers only speculated about the underlying processes operating in religious commitment and participation to enhance psychological well-being. Indeed, other researchers have noted the need to identify specific mechanisms by which religion influences psychological adjustment (Hathaway & Pargament, 1990).

MEDIATORS OF THE RELIGIOUSNESS/WELL-BEING RELATIONSHIP

The positive relationship between measures of intrinsic, committed religiousness and psychological well-being is explained most convincingly by conceptualizing religion as a coping mechanism (see Hathaway & Pargament, 1991, for an overview). As a complex, multidimensional phenomenon, religion affords the individual

a variety of coping resources and processes by which religiousness may positively influence psychological adjustment. We propose two specific social psychological processes inherent in religious belief systems and institutionalized religion—religious attributions and social identification—mediate the relationship between religiousness and psychological well-being and do so differently for Black than for White individuals.

Religious attributions. Negative situations or outcomes often provoke attributional activity, and virtually all religions provide a system for understanding and explaining events or situations for which natural explanations are unsatisfactory or unavailable (Spilka, Shaver, & Kirkpatrick, 1985). Attributions are thought to be motivated by several factors, including a search for meaning, a desire to predict or control events, and a need for self-esteem (Greenwald, 1980; Shaver, 1975). According to Spilka et al., "Systems of religious concepts offer individuals a variety of meaning-enhancing explanations of events—in terms of God, sin, salvation, etc.—as well as a range of concepts and procedures for enhancing feelings of control and self-esteem" (p. 7). Conceptualized as an attributional framework, religion affords individuals the means to preserve and enhance the meaning and controllability of essentially random events and also allows one to feel valued and unique. The meaning associated with random or uncontrollable events can be enhanced, for example, by attributing them to God's overall plan. Furthermore, the meaningfulness of events can be increased through the reappraisal of negative outcomes, such as "God allowed this to happen to strengthen my character." Increasing one's perceived control over future events can be accomplished, for example, by believing that God will provide direction and wisdom sufficient to meet any hardship. Finally, self-perceptions can be both protected and enhanced by recognizing God's love and unconditional acceptance.

Research demonstrates that cognitive strategies, such as those explained above that enhance meaning, perceived control, and self-esteem, are predictors of successful coping and mental health (Taylor, 1983; Taylor & Brown, 1988; Thompson, 1981). Moreover, religious coping strategies are a common response to negative or threatening events (Carver, Scheier, & Weintraub, 1989). In one study, severe accident victims were asked to explain why they had been victimized (Janoff-Bulman & Wortman, 1977). The most common responses were essentially meaning-enhancing attributions to God—victims thought God had a purpose or plan in allowing the accident. Analyses revealed that although religious attributions did not predict successful coping any better than other strategies mentioned by accident victims, attributions to God did predict successful adjustment

better than no strategy at all. Thus, this study provides evidence that people do use religious attributions to cope with threatening circumstances and that religious attributional strategies are at least as effective in promoting successful adjustment as other, nonreligious strategies.

It remains an empirical question whether Blacks make more religious attributions than Whites and whether such attributions are more effective in promoting psychological well-being among Blacks than Whites. However, evidence indicates that Blacks face objectively worse life circumstances than Whites (Dovidio & Gaertner, 1986). Given that these circumstances are often enduring and intractable, religious attributions may be a more adaptive coping strategy for Blacks than for Whites.

Social identification. A second function of religion in promoting psychological well-being is through social identification. As an established social institution, the church engenders perceptions of belonging and connectedness among its adherents and members, and individuals' perception that their groups are positive and valued contribute to a positive social identity. The relationship between religion and social identification is perhaps most evident in racial and ethnic minority communities, where social and religious agendas often overlap (Hammond, 1988; Stout, 1975). In Black communities, the church is the primary social institution and is marked by considerable racial and cultural homogeneity (Taylor, 1988). Furthermore, Black individuals regard their religious institutions as playing an important role in the development and maintenance of racial solidarity and pride (Taylor, Thornton, & Chatters, 1987). The interdependence of religious belief and social identification was documented by Ellison (1991) using data from the 1979-80 National Survey of Black Americans. Ellison analyzed the influence of public and private religious devotion on two aspects of Black social identification: racial identification, which refers to perceptions of psychological closeness and similarity among Blacks, and racial separatism, which refers to racial purity and the exclusion of White influences from Black lifestyle and culture. The results showed that, after controlling for important demographic variables, private religious devotion was significantly (positively) related to racial identification. Religious participation (public devotion) also predicted greater racial identification, but its influence was sharply reduced by the inclusion of private religiousness. Neither form of religiousness was related to racial separatism. Although these data were not compared with those for White individuals, they do establish the interdependence of religiousness and social identity among Blacks.

Other research indicates that a positive social, or collective, identity is predictive of psychological well-

being beyond that explained by personal identity (Crocker, Luhtanen, Blaine, & Broadnax, 1994). Crocker et al. measured collective and personal self-esteem as well as several indicators of psychological well-being in Black and White subjects. Collective self-esteem refers to the self-evaluation of one's social identity (Luhtanen & Crocker, 1992). Crocker et al. found that, after controlling for personal self-esteem, collective self-esteem was significantly related to greater life satisfaction and less hopelessness among Black, but not White, subjects. Thus, the contributions of religious belief and affiliation to one's social identity, particularly among Black individuals, should enhance psychological well-being.

In summary, although research has established a moderate, positive relationship between religiousness and psychological well-being, little is understood about why this relationship exists. Theory and research suggest that several social psychological aspects of religion may account for the relationship between religiousness and psychological well-being. We propose that religious attributions and social identification operate as mediators of the effect of religiousness on well-being. Although we make no prediction about the relative strength of the mediating variables, we predict that the relationship between religiousness and psychological well-being will be significantly reduced or eliminated when religious attributions and social identification are statistically controlled. We also expect that these two social psychological constructs will be stronger mediators of the relationship between religiousness and well-being among Black than White subjects.

METHOD

Subjects

Subjects were 144 undergraduate students recruited from the psychology department subject pool at the State University of New York at Buffalo and given course credit for their participation. Fifty-nine (41%) of the subjects were White, 66 (46%) were Black, and the remaining 19 described themselves as Hispanic, Asian American, or Native American. Sixty-two (43%) of the subjects were Protestant, 48 (33%) were Catholic, 16 (11%) were Jewish, and 18 (13%) described themselves as "other" or having no religious affiliation. Ninety-six (67%) of the subjects were either freshmen or sophomores, and 48 (33%) were juniors or seniors. Analyses reported below that were performed on the whole sample are based on the sample described above ($N = 144$). Inclusion of the 19 subjects who were neither White nor Black did not significantly alter the results obtained with the sample composed only of Black and White subjects. Of the White (26 male, 33 female) subjects, 13 (22%) were Protestant, 31 (53%) were Catholic, 6 (10%) were

Jewish, and 9 subjects listed their religious affiliation as "other." Of the Black (27 male, 39 female) subjects, 39 (59%) were Protestant, 11 (17%) were Catholic, 10 (15%) were Jewish, and 6 subjects listed "other."

Measures

As part of a larger study on race and psychological well-being, subjects completed a booklet of questionnaires that included a questionnaire requesting background and demographic information, summarized above, and the following measures. (See Crocker, Luhtanen, Blaine, & Broadnax, 1993a, 1993b, for other results based on this sample.)

Religious belief salience. A measure of religiousness was adapted from King and Hunt's (1975) Religiosity Salience-Cognition scale, which assesses the prominence of religion in everyday thought and feelings. Of King and Hunt's eight original items, three were omitted because they contained references that were sectarian or reflective of specific belief content. The resulting scale was composed of five items to which subjects responded on a 1 (*strongly disagree*) to 7 (*strongly agree*) scale: "My religious beliefs are what lie behind my whole approach to life," "My religious beliefs provide meaning and purpose to life," "I am frequently aware of God in a personal way," "I allow my religious beliefs to influence other areas of my life," and "Being a religious person is important to me." These items correspond very closely in wording and meaning to five of the eight items on the Intrinsic subscale of the Religious Orientation Scale (Allport & Ross, 1967) and thus form a face-valid measure of religious belief strength. Cronbach's alpha for the religiousness scale in this study was .94.

Religious attributions. Three scales were created by the first author for the present study to measure the extent to which religious attributions—primarily attributions to God—enhanced self-esteem, life meaning, and perceptions of control. Subjects responded to each item on a 1 (*strongly disagree*) to 7 (*strongly agree*) scale. The self-esteem-enhancing attributions scale consisted of four items, "In God's eyes I am a worthwhile person," "God loves me," "God views me as special and unique," and "God is generally unconcerned about individual people" (reverse-scored), and had high internal consistency (Cronbach's alpha = .90) in this study. The control-enhancing attributions scale items, "God's will determines most things that happen to people," "Negative things that happen in my life are ultimately controlled by God," "God oversees all the events in a person's life," and "God is totally uninvolved in my day-to-day life" (reverse-scored), had an alpha coefficient of .77 in this study. The meaning-enhancing attributions, "God has a purpose for the negative things that happen in life," "With God, dark

clouds often have a silver lining," "Everything in life happens for a reason in God's eyes," and "Nothing in life makes much sense without God," also had high internal consistency (Cronbach's alpha = .85).

Religious participation. As a measure of religious participation, subjects estimated the average number of times they attended religious services each month; responses ranged from 0 to 22. This variable was used as a behavioral index of religiousness.

Collective self-esteem. The Collective Self-Esteem Scale (CSES; Luhtanen & Crocker, 1992) measures individuals' self-evaluations of their social identity. It asks respondents to think of a variety of ascribed group memberships (such as race, ethnicity, or religion) when completing the scale. The CSES consists of four 4-item subscales: Membership Collective Self-Esteem (CSE) measures respondents' self-evaluations as members of social groups (e.g., "I am a worthy member of the social groups I belong to"); Private CSE assesses the positivity with which respondents evaluate their own groups (e.g., "I feel good about the social groups I belong to"); Public CSE assesses the positivity with which respondents think others evaluate their social groups (e.g., "Overall, my social groups are considered good by others"); and Identity CSE measures the importance of social groups to the respondent's self-concept (e.g., "The social groups I belong to are an important reflection of who I am"). Subjects responded to these 16 items on a 7-point (*strongly agree* to *strongly disagree*) Likert-type scale. In this study, the CSES subscales were internally consistent, with alphas of .56, .76, .87, and .83 for the Membership, Private, Public, and Identity subscales, respectively; alpha for the whole scale was .79. Luhtanen and Crocker (1992) report small to moderate correlations (.20-.40) between the CSES and measures of personal self-esteem such as the Rosenberg (1965) Self-Esteem Scale.

Psychological well-being. Four indicators of psychological well-being were assessed in this study: personal self-esteem, depression, life satisfaction, and hopelessness. Self-esteem was measured with the Rosenberg (1965) Self-Esteem Scale, a 10-item scale that measures global, personal self-evaluations, to which subjects responded on a 1 (*strongly agree*) to 4 (*strongly disagree*) scale. Rosenberg (1965) reports high test-retest reliabilities for this scale. Coefficient alpha for this study was .87.

Depression was measured using the short form of the Beck Depression Inventory (BDI; Beck & Beck, 1972), a measure of depressive mood and symptomatology. The short form consists of 13 of the original 21 BDI items and correlates .96 with the original scale. Coefficient alpha in this study was .83.

The Satisfaction With Life Scale (SWLS; Diener, Emmons, Larsen, & Griffin, 1985) was used to assess global

life satisfaction. Subjects responded to the five-item scale on a 7-point (*strongly agree* to *strongly disagree*) Likert-type scale. Coefficient alpha in this study was .79.

Hopelessness was measured with the Hopelessness Scale (Beck, Weissman, Lester, & Trexler, 1974), which assesses respondents' endorsements (*true-false*) of 20 pessimistic statements. Beck et al. report relatively high correlations with clinical ratings and other measure of hopelessness. Coefficient alpha in this study was .87.

Procedure

Subjects arrived at the laboratory and were told that the study concerned their self- and social perceptions and that they would complete a booklet of questionnaires. The anonymity of responses was assured, and subjects were urged to answer the questionnaires as honestly as possible. Subjects signed a consent form that promised confidentiality and informed them of their rights to not answer any question and to withdraw from the study at any time without penalty. The instruments described above were interposed into a large booklet of questionnaires to minimize the extent to which subjects thought about theoretically related constructs at the same time. Subjects who desired further information were debriefed after the study.

RESULTS

Racial Differences in Religion and Well-Being

Mean scores on religiousness, religious attributions, and well-being variables, calculated for all subjects and separately for Black and White subjects, are displayed in Table 1. To control for the inflated Type I error associated with repeated tests of the same theoretical relationship, means for Black and White subjects were analyzed by multivariate analysis of variance (MANOVA), with race (White/Black) as a grouping variable and religious belief salience, religious participation, and religious attributions that enhanced self-esteem, perceived control, and life meaning as dependent variables. The MANOVA revealed a significant multivariate effect of race, $F(5, 113) = 5.21, p < .01$. Univariate tests showed that Black subjects reported greater religious belief salience, $F(1, 117) = 23.17, p < .01$, and more frequent participation in religious services, $F(1, 117) = 6.38, p < .01$, than Whites. Not only were Black subjects more religious than Whites, but they also used religion to explain life events to a greater extent than Whites did. That is, Black subjects made more meaning-enhancing, $F(1, 117) = 24.15, p < .01$, control-enhancing, $F(1, 117) = 12.86, p < .01$, and self-esteem-enhancing, $F(1, 117) = 8.73, p < .01$, attributions to God than White subjects.

To test for well-being differences between White and Black subjects, self-esteem, depression, life satisfaction,

TABLE 1: Means and Standard Deviations (in Parentheses) for All Subjects and Separately for White and Black Subjects on Religion and Psychological Well-Being Variables

	All Subjects (N = 146)	White Subjects (n = 59)	Black Subjects (n = 66)
Religion variables			
Religiousness			
Religious belief salience	4.70 (1.74)	3.90 _a (1.61)	5.35 _b (1.65)
Religious participation	2.87 (4.08)	1.85 _a (2.37)	3.71 _b (4.95)
Religious attributions			
Self-enhancing	5.93 (1.32)	5.55 _a (1.34)	6.25 _b (1.23)
Control-enhancing	4.95 (1.54)	4.42 _a (1.49)	5.39 _b (1.44)
Meaning-enhancing	5.13 (1.62)	4.40 _a (1.52)	5.74 _b (1.44)
Psychological well-being variables			
Self-esteem	32.76 (4.65)	32.19 (4.34)	33.27 (4.88)
Satisfaction with life	22.36 (5.64)	23.08 (5.30)	21.71 (5.90)
Depression	4.66 (4.35)	3.81 _a (3.49)	5.42 _b (4.90)
Hopelessness	2.76 (3.42)	2.74 (2.97)	2.78 (3.81)
Composite well-being	.05 (.79)	.15 (.62)	.06 (.82)

NOTE: Means within rows bearing different subscripts differ at $p < .01$.

and hopelessness scores were analyzed by MANOVA. A significant multivariate effect of race also emerged from this analysis, $F(4, 107) = 3.78, p < .01$. Univariate tests showed that White subjects were less depressed than Blacks, $F(1, 110) = 3.94, p < .01$. However, White and Black subjects did not differ in their self-esteem, life satisfaction, or hopelessness, F 's $< 2.0, p$'s $> .2$. Although Blacks were more depressed than Whites, these results suggest that White and Black subjects did not differ in overall psychological well-being. To examine this question, a composite well-being variable was created by combining standardized self-esteem, depression, life satisfaction, and hopelessness scores for each subject. Because this variable was collinear with specific well-being indicators, composite well-being means (see Table 1) were subjected to a t test, which confirmed that White and Black subjects did not differ in their overall level of well-being ($t < 1.0$).

Relationship Between Religiousness and Well-Being

Zero-order correlations between religion and well-being measures, calculated for all subjects and separately

TABLE 2: Correlations of Religious Belief Salience and Religious Participation With Psychological Well-Being Variables for All Subjects and Separately for White and Black Subjects

	<i>Self-Esteem</i>	<i>Satisfaction With Life</i>	<i>Depression</i>	<i>Hopelessness</i>	<i>Composite Well-Being</i>
All subjects (<i>N</i> = 146)					
Religious belief salience	.15	.09	-.06	-.16	.15
Religious participation	.11	.14	-.05	-.12	.13
Whites (<i>n</i> = 59)					
Religious belief salience	.09	-.02	-.07	-.15	.10
Religious participation	.02	-.11	.03	.01	-.06
Blacks (<i>n</i> = 66)					
Religious belief salience	.22 [†]	.33**	-.27*	-.24*	.40**
Religious participation	.15	.29*	-.15	-.15	.23

[†]*p* < .07; **p* < .05; ***p* < .01.

for Black and White subjects, are displayed in Table 2. Among White subjects, both indicators of religiousness (belief salience and participation) were unrelated to all well-being measures. Among Black subjects, however, a consistent relationship emerged between religious belief salience and well-being. Religious belief salience in Blacks was associated with greater life satisfaction, less depression, and less hopelessness. Religious belief among Blacks was also marginally predictive of higher self-esteem. Although religious participation was predictive of greater life satisfaction in Blacks, this relationship should be interpreted with caution, as this index of religiousness was not consistently related to well-being among Black subjects. These correlations suggest that the relationship between religious belief salience and psychological well-being is greater among Black than among White subjects. This relationship was further examined by entering religious belief salience and race, followed by a cross-product term representing the interaction of religiousness and race, in a regression equation as predictors of overall (composite) well-being. After controlling for the main effects of religious belief salience and race, the interaction term accounted for significant additional variance in well-being, $F(3, 108) = 4.47$, $p < .05$. Demographic variables (sex, parents' income, and parents' educational level) were unrelated both to religious belief salience and to well-being in both Black and White subjects; consequently, they did not change the result of the regression analysis reported above.

In sum, these results indicate that not only were Black college students more religious than Whites, but religious belief was more predictive of psychological well-being among Black than White subjects. These findings extend earlier research (St. George & McNamara, 1984) by establishing that the greater positive relationship between religiousness and well-being among Blacks than among Whites was consistent across several indicators of adjustment and was observed among university students.

Mediators of the Religiousness/Well-Being Relationship

The relationship between religiousness and psychological well-being was examined further by evaluating the extent to which it was mediated by religious attributions and social identification. Mediation is subject to certain conditions (James & Brett, 1984; Judd & Kenny, 1981). In terms specific to this study, the conditions are as follows: (a) Religious belief salience must be significantly related to well-being, (b) religious belief must be significantly related to the hypothesized mediator(s), (c) the mediator(s) must be significantly related to well-being controlling for the effects of religious belief, and (d) the significant relationship between religious belief salience and well-being must be appreciably reduced or eliminated by controlling for the intervening effects of the mediator(s).

The first of these conditions was satisfied, but only among Black subjects (see Table 2). The second mediation condition was examined by calculating zero-order correlations between religious belief salience and measures of religious attributions and social identification for all subjects and separately for White and Black subjects. The correlations in Table 3 show that religious belief is strongly positively related to religious attributions that enhance self-esteem, perceived control, and life meaning in both White and Black subjects. The correlations between religious belief salience and the subscales of the Collective Self-Esteem Scale (Table 3) reveal that religious belief was not related to any measure of social identity in White subjects. Among Black subjects, religious belief was significantly related to private CSE. That is, religious belief salience was associated with Black subjects' positive evaluation of their (religious and other ascribed) social groups. These results satisfied the second mediation condition for religious attributions for all subjects, as well as private CSE as an indicator of positive social identity among Black subjects.

TABLE 3: Correlations of Religious Belief Salience With Religious Attributions and Social Identification Measures for All Subjects and Separately for White and Black Subjects

	All Subjects (N = 144)	White Subjects (n = 59)	Black Subjects (n = 66)
Religious attributions			
Self-enhancing	.60**	.63**	.64**
Control-enhancing	.74**	.76**	.67**
Meaning-enhancing	.86**	.82**	.90**
Social identification			
Private CSE ^a	.26**	-.04	.37*
Public CSE	-.15	.09	-.05
Identity CSE	.32**	.16	.20
Membership CSE	.13	-.10	.20

a. CSE = collective self-esteem.

* $p < .05$; ** $p < .01$.

Partial correlations were calculated for White and Black subjects to determine whether religious attributions and social identification were positively related to psychological well-being beyond the effect attributable to religious belief salience (the third mediation condition) and appear in Table 4. These correlations show that, of the four potential mediators identified above, only meaning-enhancing attributions to God and private CSE were significantly related to well-being after controlling for religious belief salience, and only among Black subjects. These results confirm our expectation that religious belief is associated with specific social psychological mechanisms that have positive implications for psychological well-being and that are stronger in Black than in White subjects.

Finally, to determine the extent to which meaning-enhancing religious attributions and private CSE reduced the religiousness/well-being relationship among Black subjects (the fourth mediation condition), the zero-order correlation of religious belief salience and composite well-being was compared with higher-order partial correlations, controlling for meaning-enhancing religious attributions and private CSE. A hierarchical multiple regression equation was estimated for Black subjects with religious belief salience entered first as a zero-order predictor of well-being, followed by meaning-enhancing religious attributions and private CSE on the same step. Mediation is evidenced if the relationship between religious belief and well-being is substantially or completely attenuated by controlling the effects of the hypothesized mediators. The regression analysis revealed that, after controlling the effects of religiousness, the mediators explained a significant portion of variance in psychological well-being, $R^2 = .33$, $F(5, 52) = 3.44$, $p < .05$, and the relationship between religious belief salience and well-being was reduced from .40 to $-.15$. The size of this effect suggests that the mediators not only fully accounted for

TABLE 4: Partial Correlations of Composite Well-Being With Religious Attributions and Social Identification, Controlling for Religious Belief Salience, for All Subjects and Separately for White and Black Subjects

	All Subjects (N = 144)	White Subjects (n = 59)	Black Subjects (n = 66)
Religious attributions			
Self-enhancing	.32*	.09	.14
Control-enhancing	-.03	-.16	.07
Meaning-enhancing	.14	-.06	.22*
Social identification			
Private CSE ^a	.34*	.19	.27*
Public CSE	.14	.34*	-.03
Identity CSE	.06	-.07	.22*
Membership CSE	.39*	.25*	.37*

a. CSE = collective self-esteem.

* $p < .05$.

the relationship between religious belief and well-being, they suppressed a small (nonsignificant) negative effect of religiousness on well-being. Individual beta weights were examined to assess the independent effects of the mediating variables and showed that both meaning-enhancing attributions to God, $F(5, 52) = 5.03$, $p < .05$, and private CSE, $F(5, 52) = 3.42$, $p < .05$, were significant mediators when controlling for the other.

The results indicate that religious belief promotes psychological well-being among Black, but not White, individuals. The results further indicate that the influence of religious belief on well-being is mediated by the extent to which religious belief provides individuals with attributions that enhance the meaning of life events, as well as the extent to which people positively evaluate their religious group or affiliation. The results also suggest that without the intervening influence of attributions to God and positive identification with one's religious affiliation, religious belief would be somewhat (nonsignificantly) predictive of *less* well-being among Black subjects. Thus, religious belief appears to be psychologically beneficial in part because it provides a framework of coping strategies, and these strategies appear to be more functional for Black than White individuals.

Alternative Explanations

The foregoing findings indicate that the greater positive impact of religious belief on the psychological well-being of Black (relative to White) individuals has substantial indirect effects through specific social psychological aspects of religion—namely, meaning-enhancing attributions to God and positive social identification based on one's religious affiliation. Several counterarguments to this conclusion should be addressed. First, the race difference in the relationship between religious belief salience and well-being might be attributed to

TABLE 5: Zero-Order Correlations Between Religious Belief Salience and Well-Being, and Partial Correlations Between Mediators and Well-Being With Religious Belief Salience Controlled, for White and Black Subjects Grouped by Denominational Affiliation

Subjects	n	<i>r</i> of Belief Salience and Well-Being	<i>pr</i> of Well-Being With:	
			Meaning-Enhancing Religious Attributions	Private Collective Self-Esteem
White				
Protestant	13	.12	.03	-.09
Catholic	31	-.03	-.12	.01
Black				
Protestant	39	.36*	.25	.31
Catholic	11	.42	.33	.33

* $p < .05$.

differences in actual religious beliefs. It could be argued that the content of Blacks' religious beliefs is different from, and more promotive of well-being than, the belief content of Whites. This alternative explanation is strengthened by the fact that more than half the White subjects (53%) identified themselves as Catholic whereas a similar proportion of Black subjects (60%) were Protestant. This distribution of religious affiliation suggests that differences in the content of Protestant and Catholic religious beliefs may account for the effect attributed to race. Although the religious belief salience scale measured the cognitive salience, rather than the content, of religious beliefs, this alternative explanation was examined further. Subjects were divided on the basis of their affiliation with the Protestant ($n = 59$) or Catholic ($n = 44$) faith. Significance tests revealed that Protestant subjects had more salient religious beliefs ($M = 5.58$) and attended church more frequently ($M = 3.96$) than Catholic subjects ($M_s = 4.24, 2.38$), $t(101) = 4.74, p < .01$, $t(97) = 2.15, p < .05$, respectively. However, there were no differences in the psychological well-being of Protestant and Catholic subjects, $t(100) < 1.0$, and the correlation of religious belief salience and well-being was similarly nonsignificant in Protestant ($r[99] = .13$) and Catholic ($r[98] = .10$) subjects.

Further analysis examined the relationship among religious belief salience, mediating variables, and well-being for White and Black subjects who were separated by their denominational affiliation (see Table 5). Among White Protestant subjects, the (zero-order) relationship between religiousness and well-being was much more similar to that for White Catholic than for Black Protestant subjects. Likewise, the religiousness/well-being relationship among Black Catholics was more similar to that for Black Protestant than for White Catholic subjects. A similar pattern of results was observed in the partial correlations of meaning-enhancing attributions and private CSE, respectively, with well-being—White (and Black) Protestant subjects were more similar to White (and Black) Catholics than to other-race Protes-

tants. In summary, these results do not support the alternative explanation that differences in the belief content of Black and White subjects (suggested by their church affiliation) accounted for the significant interaction of race and belief salience on psychological well-being.

Second, it could be argued that the mediational role of religious attributions that enhance life meaning is tempered by their high correlation with religious belief salience (see Table 6). This high intercorrelation was unchanged when one item that referred to meaning was omitted from the religious belief salience scale, suggesting that the two measures tap the same construct. However, social psychologists have conceptualized religion as a meaning system with positive implications for psychological functioning (Solomon, Greenberg, & Pyszczynski, 1991); the high intercorrelation, therefore, is theoretically justified. Moreover, although religious attributions that enhance life meaning may be conceptually similar to religious belief, they have significant effects on well-being even when religious belief is statistically controlled.

The third and most crucial counterargument to the results above concerns the assumption that religious belief is causally prior to well-being, an assumption that is fundamental to the conceptual model tested in this research. It is possible that increases in psychological well-being spur greater religious belief. The assumption that religiousness causes enhanced psychological functioning is difficult to test experimentally, given the obvious problems with manipulating genuine religious belief or experience. However, this assumption may be evaluated against a body of research documenting the psychological antecedents and consequences of religious conversion, an experience that, among other things, enhances the salience of religious belief.

In one study of 2,500 American women, subjects who had experienced religious conversion reported less childhood happiness and greater loneliness as children than nonconvert women (Shaver, Lenauer, & Sadd, 1980). Similar reports were obtained in a study of reli-

TABLE 6: Zero-Order Correlations Between Religious Variables for All Subjects and Separately for White and Black Subjects

Subjects	2	3	4	5
All subjects (<i>N</i> = 144)				
1 Religious belief salience	.52**	.60**	.86**	.74**
2 Religious participation		.39**	.47**	.39**
3 Self-enhancing RA ^a			.74**	.61**
4 Meaning-enhancing RA				.81**
5 Control-enhancing RA				
Whites (<i>n</i> = 59)				
1 Religious belief salience	.37**	.63**	.82**	.76**
2 Religious participation		.35**	.31*	.25
3 Self-enhancing RA			.69**	.63**
4 Meaning-enhancing RA				.89**
5 Control-enhancing RA				
Blacks (<i>n</i> = 66)				
1 Religious belief salience	.54**	.64**	.90**	.67**
2 Religious participation		.37**	.49**	.37**
3 Self-enhancing RA			.80**	.61**
4 Meaning-enhancing RA				.71**
5 Control-enhancing RA				

a. RA = religious attributions.

* $p < .05$; ** $p < .01$.

gious affiliates, half of whom had experienced conversion. Converts described their parents in more negative terms and their childhood and adolescent experiences as less happy and more traumatic than nonconverted religious individuals (Ullman, 1982). Other evidence that the experience of religious conversion is associated with poor childhood/adolescent adjustment is provided by Kirkpatrick and Shaver (1990), who found that 44% of their avoidantly attached subjects reported experiencing a sudden religious conversion, compared with 9% of the securely attached subjects. Finally, in an important natural experiment, Paloutzian (1980) measured the well-being of religious individuals before, and at several points after, experiencing religious conversion. Psychological well-being increased sharply following conversion and remained significantly higher than among nonconvert control subjects after 6 months had elapsed.

These studies characterize the person who experiences religious conversion as having poor preconversion, and improved postconversion, adjustment. If conversion enhances the salience or importance of religious belief, then the studies provide a reasonably solid basis for the assumption in question—that religious belief salience is causally prior to well-being. Granted, this research does not rule out the possibility that psychologically well-adjusted people may adopt religious beliefs without experiencing conversion. But, taken together, the weight of the foregoing research provides much more convincing support for the assumption that, indeed, religious belief salience causes well-being rather than the converse.

DISCUSSION

This study provides evidence that religiousness is more predictive of psychological well-being among Black than White individuals. The salience of religious belief was related to increased self-esteem and life satisfaction, and decreased depression and hopelessness, in Black subjects only. This extends previous research with adult subjects (St. George & McNamara, 1984) by observing the positive relationship between religious belief and adjustment in a sample of college students. Furthermore, this study suggests that the relationship between religious belief salience and well-being is not entirely a direct association but is mediated by aspects of religion that have positive coping implications for religious individuals. Both religious attributions and positive social identity influenced the relationship between religious belief and well-being, but also only among Black subjects. Thus, these findings address the important general question of how religion influences mental health by showing that religious belief systems provide a framework for self-enhancing attributions and positive social identification, which, in turn, promote psychological well-being.

Several explanations for why this effect is greater for Black than for White students should be addressed. One possibility is that the use of these strategies is more motivated in Black students—that lower levels of psychological adjustment among Blacks promote the greater use and effectiveness of religious attributions and religion-based social identification. This, however, is contradicted by research showing that self-esteem in Black and White individuals is equivalent (Crocker & Major, 1989). Moreover, this study found that, except for Black subjects' greater depression, Black and White students had equivalent levels of psychological adjustment. A second possible explanation is that Black students are objectively disadvantaged relative to White students and that religious belief provides a way to cope with real, immediate disadvantages. Again, research suggests otherwise: Black and White students are equally qualified for college admission and achievement (Steele, 1992), and interestingly, Black students report experiencing *fewer* negative life events than their White peers (Crocker et al., 1993a).

A third possible explanation for the greater use of religious belief and its greater impact on well-being among Blacks concerns the stigma facing Black students in predominantly White colleges and universities. According to Steele, and White-majority college or university is a potentially unfriendly place for Black students. It is a place where they are seen at academic risk and expected to underachieve because of their race and where Black culture, scholarship, and history are pervasively devalued. Research shows that Black students perceive more disadvantage and discrimination, on both a

personal and a group level, than White students (Crocker et al., 1993a). According to Steele, Black students buffer the threat of racial stigma to their well-being by disidentifying with achievement values and process. This study suggests that the coping value of religious belief may afford Black college students another way to manage the negative implications of the stigma they face on predominantly White college campuses. As an attributional framework, religious belief may allow Black students to reframe their educational experience in more controllable and meaningful terms. Salient religious belief may also prompt greater identification with a community of believers, which would lend encouragement and support to Black students in their educational efforts. These properties of religious belief are—like the strategy of disidentification—protective of psychological well-being. However, many self-protective strategies are a double-edged sword for minority group members in that they can enhance psychological vulnerability. For example, Black individuals who attribute feedback from others to prejudice against their racial group buffer the threat of negative outcomes but also undermine the potential intrapsychic benefit of positive outcomes (see Crocker, Voelkl, Testa, & Major, 1991). Religious belief may provide self-protective benefits while minimizing some of the disadvantages associated with other strategies, and this should be particularly important for members of minority groups. Further research is necessary to explore the possible negative implications of religious belief as a self-maintenance or coping framework.

Another observation about the foregoing data regards the lack of sex differences in religiousness or in the relationship between religious belief and well-being. This is inconsistent with prior research that has documented greater religiousness among females in adult samples (Paloma & Pendleton, 1988; St. George & McNamara, 1984). Null findings should be interpreted with great caution, but it is interesting that no sex differences were found in a college student sample consisting primarily of single adolescents. This may suggest that the greater religiousness of female than of male adults develops concurrently with social roles in the family and home—such as those related to child rearing and values instruction—that are assumed to a greater extent by women.

Finally, the failure to find a relationship between religiousness and well-being among White subjects is also inconsistent with research reviewed earlier on adult samples. For college students, religious belief may be de-emphasized or devalued in part because of its connection to parental values. This speculation, however, augments the significance of the findings among Black students. Some insight into the relationship between religious belief and well-being in White subjects is pro-

vided by the partial correlations in Table 4. After controlling for the influence of religious belief, public CSE was predictive of well-being in White but not Black subjects. That is, psychological well-being among White individuals was correlated with the extent to which White individuals thought *others* positively evaluated their religious groups, but not the extent to which they themselves positively evaluated or identified with their religious groups. This finding seems to reflect a more extrinsic or utilitarian approach to religion (Allport & Ross, 1967) among White than Black individuals. Indeed, the self-presentational value of religious affiliation or belief is another, and as yet largely unexplored, aspect of religion that seems to have positive implications for psychological adjustment.

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Received September 15, 1993

Revision received April 5, 1994

Accepted April 5, 1994