# Chapter 19 The Scientific Study of Life Satisfaction and Religion/Spirituality



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In his classic book Man's Search for Meaning, Viktor Frankl (1946/2006) asserted: "Happiness...cannot be pursued; it must ensue, and it only does so as the unintended side-effect of one's dedication to a cause greater than oneself or as the byproduct of one's surrender to a person other than oneself" (pp. xiv-xv). His seminal thoughts make clear that people cannot pursue happiness directly; instead, happiness results from people dedicating their lives to someone or something beyond themselves. Religion and spirituality (R/S) provide an avenue by which billions of people find something worth dedicating their lives to. In a 1990 television interview, Frankl described that religious individuals are not satisfied with just finding a meaningful task to complete; religious individuals go a step further by including an awareness of a task giver (i.e., Divinity). As such, R/S allow people to strive for what Frankl referred to as *ultimate meaning*. Positive psychology provides an excellent context for gaining and applying knowledge about how R/S might contribute in such ways to the good life and to individual and communal thriving (Miller-Perrin & Krumrei-Mancuso, 2015). One aspect of this endeavor involves advancing an understanding of how and why R/S relate to life satisfaction (LS).

LS is a key topic of interest in positive psychology. Consistent with Frankl's thinking, many religions emphasize that when people surrender themselves to a self-transcendent purpose, they are able to experience meaningful living. For instance, Buddhists pursue Nirvana, the extinguishing of personal desire, which can end their suffering. Christianity emphasizes that whoever loses their life for the sake of Christ will find abundant life. These examples illustrate that people draw on their religious/spiritual frameworks to achieve rich and deep LS.

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The scientific study of LS falls into the arena of subjective well-being, which is typically conceptualized as including affective and cognitive components (Diener et al., 2009; Lindert et al., 2015). The affective component involves the experience of pleasant/unpleasant emotions (see Van Cappellen et al., Chap. 20, this volume) and the cognitive component involves mental judgments of LS (this chapter). LS can be defined as a person's subjective perceptions of contentment, satisfaction, or happiness in life. LS can be assessed as a global synopsis of life or as an aggregate of satisfaction with major life domains (e.g., work, study, relationships, leisure, health). LS has been considered an important outcome in its own right and has been associated with a wide variety of positive social, physical, and mental health outcomes (Pavot & Diener, 2008). Although the extent to which people experience pleasant and unpleasant emotions likely contributes to LS (Diener et al., 2006), this cognitive form of subjective well-being is distinct from affective well-being. For example, Lyubomirsky and Lepper (1999) noted that perceptions of whether someone has a happy life are powerfully driven by cultural expectations of what characterizes a happy life. As a result, whether people appraise themselves as being happy people is somewhat independent of the extent to which they view their lives as satisfactory. Furthermore, LS is empirically distinct from the experience of positive and negative emotions, in that these factors relate differently to age and other outcomes (see Diener et al., 2009 for review).

This chapter explores LS in relation to R/S. The literature includes fairly broad conceptualizations of spirituality, encompassing morality, well-being, meaning, or purpose, which all could overlap with LS. Therefore, we focused on research that tethers spirituality (and thereby religion) to what people hold sacred. This approach is consistent with the conceptualization offered by Davis et al. (Chap. 18, this volume). Davis and colleagues define *spirituality* as people's search for meaning and connection within whatever they perceive as sacred and *religiousness* as spirituality that takes place within culturally sanctioned codifications. This chapter includes many forms of R/S, such as the extent to which people view R/S as important or engage in public/private religious/spiritual practices, religious/spiritual coping, and so forth. We acknowledge that distinct forms of R/S can relate differently to LS. Out of an extensive empirical literature examining links between R/S and LS, this chapter discusses highlights about how, why, and in what contexts R/S relate to LS. We will note how researchers can advance the science of R/S and LS and what some key implications are for clinicians and religious/spiritual leaders.

#### Religion and Spirituality Relate to Life Satisfaction, But Context Matters

Thorough systematic reviews have suggested that R/S typically relate to higher LS (Koenig & Larson, 2001; Koenig et al., 2012). The size of this relationship was quantified as small (r = 0.12), based on an early meta-analysis of 142 effect sizes

from studies that used a broad definition of LS (Hackney & Sanders, 2003). The aspect of R/S most strongly related to LS was personal devotion, followed by ideological religion, and then institutional religion. However, it is possible the nature and strength of this relationship can differ based on particular characteristics of individuals, communities, and countries.

At the level of the individual person, life circumstances and religiosity are important for understanding the relationship between R/S and LS. With representative global data from the Gallup World Poll (collected from 2005 to 2011), a comparison between religious and nonreligious individuals found that religious individuals were lower in LS than nonreligious individuals (Geerling & Diener, 2020). However, it could be that people with more difficult living conditions tend to be more religious. When controlling the difficulty of individuals' life circumstances (e.g., lower income, less education, and worse health statuses), the same global data collected from 2005 to 2009 indicated religiosity was associated with slightly more LS (Diener et al., 2011). Additionally, as might be expected, longitudinal studies have found evidence that R/S predict increased LS to a greater extent for people who are stronger in their religious identities (Bradshaw & Kent, 2018; Kent et al., 2018; Lim & Putnam, 2010).

Beyond individual characteristics, community-level R/S can impact the relationship between R/S and LS, both for individuals and communities. R/S can be associated with LS in some regions of a country but not others, as has been observed in longitudinal research in Germany (Sinnewe et al., 2015). Furthermore, because standard of living factors can relate to levels of R/S in communities and geographic areas, these factors must be taken into account when examining links between R/S and LS on a community or similarly large-scale level. In the United States, the more religious a state is, the higher the LS is in that state, when accounting for the difficulty of societal circumstances (Diener et al., 2011). These findings, along with others that have examined the interplay of community and individual R/S in relation to individual well-being (e.g., Gebauer et al., 2017), encourage more research on how dynamics within families, neighborhoods, religious communities, cities, states, or regions affect the relationship between R/S and LS.

Similar themes can be observed on a global level. R/S are associated with LS in some countries but not others (Snoep, 2008), suggesting country-level characteristics impact the relationship between R/S and LS. When taking into account the difficulty of societal circumstances, world data from the Gallup Poll has indicated no overall relationship between country-level religiosity and country-level LS (Diener et al., 2011). However, cultural religiosity can affect individual people's experiences (see Gebauer & Sedikides, 2021). The literature suggests that the positive relationship between personal R/S and LS is stronger in more religious countries, whereas personal R/S can be unrelated or even negatively related to LS among people living in less religious countries (Diener et al., 2011; Eichhorn, 2012; Lun & Bond, 2013; Okulicz-Kozaryn, 2010; Stavrova et al., 2013). The social value hypothesis (Gebauer et al., 2012; Gebauer et al., 2017) could help explain some of these seemingly contradictory findings in multination comparisons. Religiosity may

foster more well-being in cultures where religiosity is socially valued, but not in cultures where religiosity possesses little to no social value.

To summarize, on average, the existing evidence suggests there is a small, positive relationship between R/S and LS. However, this average is made up of individuals, communities, and countries among whom the strength of this relationship can vary greatly. Furthermore, a mismatch between people's individual R/S and their community and cultural contexts can even result in negative links between R/S and LS. Thus, clinicians and religious leaders should be aware of the nuances of R/S within the communities where they work, in order to have an accurate understanding of how R/S may relate to LS. In addition, they should attend to whether the social climate of R/S supports or undermines the R/S of the individuals they work with, which could thereby affect LS.

Of note, the vast majority of research on this topic has examined individuals within a given country. More work is needed to examine links between R/S and LS at community, regional, and global levels. As new methods emerge for using big data to examine links between economic and sociopolitical factors and subjective well-being (e.g., Diener & Seligman, 2018), it would be valuable to include an examination of R/S in these endeavors.

# Are the Links Between Religion/Spirituality and Life Satisfaction Causal?

Although it is difficult to say whether R/S and LS directly impact each other, longitudinal research shows whether changes in R/S are associated with subsequent changes in LS and vice versa. A challenge is that both R/S and LS tend to be fairly stable across time, which can make it difficult to observe their effects on each other. Despite this challenge, most longitudinal research suggests R/S are associated with subsequently higher levels of LS. A recent meta-analysis of nine independent samples observed a small, positive effect of R/S on LS (r = 0.10). The meta-analysis only included studies examining whether positive aspects of R/S (e.g., importance of religion to the person, public and private religious participation, and positive religious coping) predicted future levels of LS while controlling preexisting levels of LS (Garssen et al., 2021). In essence, the existing research suggests R/S are associated with modestly increased LS over time.

Furthermore, some research has examined how change in R/S relates to change in LS. A 16-year study of the general population in Germany indicated that people who became more involved in religious activities experienced long-term gains in LS, whereas those who became less religious experienced long-term losses in LS (Headey et al., 2010). Similarly, among samples of adolescents and adults in the United States, religious service attendance (Chen & VanderWeele, 2018; Crosby et al., 2020), prayer or meditation (Chen & VanderWeele, 2018), and listening to religious music (Bradshaw et al., 2015) have been associated with higher

subsequent LS. Among inter-city U.S. adults recovering from substance abuse, spirituality—but not religiosity—was predictive of higher subsequent LS (Laudet & White, 2008).

Together, these studies suggest R/S may enhance people's LS. Additionally, long-term research from Germany has shown that R/S can buffer individuals from the negative consequences of stressors. Attending religious services once a week mitigated the negative impact of becoming unemployed on LS (Lechner & Leopold, 2015). Interestingly, joining a new religious movement (sometimes referred to colloquially as a "cult") helped people who had previously experienced a dip in LS recover to a stable level of LS comparable to the general population (Namini & Murken, 2009).

Research on developmental changes across the lifespan is also useful for considering the question of causality. On average, R/S decline during adolescence, but young people experience unique patterns of religious/spiritual change. Research from the United States and the Middle East has found that youth who remain high in R/S over time tend to experience more LS than youth who either are low in R/S or decline in R/S over time (Kor et al., 2019; Wright et al., 2018).

Highlighting the importance of cultural context, spirituality—but not religious service attendance—was associated with higher subsequent LS within a sample of adolescents in Portugal (Marques et al., 2013). In addition, research from Canada has shown that youth with higher levels of spirituality are more likely to experience trajectories of high and stable LS than trajectories of moderate or low LS (McDougall et al., 2016). Interestingly, research in Hong Kong has found that adolescents who are higher in spirituality tend to experience sharper declines in LS than less spiritual adolescents (Shek & Liang, 2018). These researchers theorized that perhaps youth with higher spirituality have greater expectations about life, resulting in relatively stronger drops in LS. Yet even with these sharper declines in LS, more spiritual adolescents still exhibited higher LS than their less spiritual counterparts (Shek & Liang, 2018).

Although the majority of developmental research on this topic has focused on adolescents, longitudinal studies have also examined older adults. The trends among older adults are similar to those found among adolescents in that various forms of R/S are associated with greater LS over time (e.g., Cowlishaw et al., 2013; Hu et al., 2018; Krause & Hayward, 2013).

Taken together, research from numerous countries and developmental periods suggests that R/S benefit LS. R/S can also serve as protective factors when stressors might otherwise negatively impact LS. Large-scale, prospective studies provide strong support for the question of causality. Yet, in the absence of experimental research designs, it remains difficult to tease apart direct from indirect effects. The literature suggests increases in R/S and LS are associated with positive changes in other domains as well. For example, Cotton et al. (2006) observed that, among patients with HIV/AIDS, increases in LS were associated not only with increases in R/S but also with improvements in housing conditions, social support, self-esteem, and optimism.

Based on the longitudinal research conducted to date, religious leaders and clinicians might bolster people's LS by supporting them in their religious/spiritual pursuits. Interestingly, almost all extant research is framed in terms of the influence of R/S on LS. This is understandable, given that the field of positive psychology has historically focused on uncovering potential contributors to LS (Garssen et al., 2021). At the same time, there is evidence that increases in LS are associated with increases in R/S. For example, Cotton et al. (2006) observed among patients with HIV/AIDS that increases in LS over a 12- to 18-month period were associated with increases in spirituality during the same period. Consistent with a broaden-andbuild theory of positive emotions (Fredrickson, 2001), it is plausible that the relationship between R/S and LS is bidirectional. That is, the relationship between R/S and LS may involve a bidirectional causal pathway resulting in an upward spiral of positivity (see also Van Cappellen et al., Chap. 20, this volume; Davis et al., Chap. 18, this volume). More work is needed to address the relatively neglected side of this cycle involving how LS impacts religious/spiritual behaviors, experiences, and beliefs. It is possible that people who are more satisfied in life may be more likely to choose to become or stay religious (Lim & Putnam, 2010). LS may also keep spirituality from becoming unfulfilling (Büssing et al., 2018). Future research can further elucidate if, when, and how changes in LS might result in changes in R/S. For example, increases in LS may result in people engaging more with their religious communities, deriving greater satisfaction from their belief systems, or being more resilient to spiritual struggles. Implications from such research would be particularly helpful to clinicians and religious leaders in their work with religious/spiritual individuals.

# How and Why Religion and Spirituality Predict Greater Life Satisfaction

As reviewed, the most common finding in the literature is that R/S are associated with higher LS. Here, we discuss theories about how R/S might contribute to LS.

#### Social Resources

Researchers commonly offer social explanations for the link between R/S and LS, because religious/spiritual individuals tend to participate in religious communities that afford them social interaction and support. The most convincing support for this idea comes from national panel studies that follow representative samples of people over time and thereby can account for stable characteristics of the study participants (e.g., their personalities). Such research suggests a key factor in the link between religious service attendance and LS is the friendships that people form in their

religious communities (Lim & Putnam, 2010). At the same time, studies from numerous countries suggest a strong influence of religious service attendance on LS remains even after accounting for the importance of social resources (Kortt et al., 2015; Sinnewe et al., 2015). Moreover, dozens of cross-sectional studies have found that R/S are associated with higher LS, even after accounting for the important influence of social factors. This research has been conducted predominantly among Christian samples from North America and Europe but also among Jews from Israel (Lazar & Bjorck, 2016), Muslims from Pakistan (Suhail & Chaudhry, 2004), and religiously diverse people from Ghana (Addai et al., 2014).

Taken together, this literature suggests that R/S afford people more opportunities for giving and receiving social interaction and support, which has positive implications for LS. However, the relationship between R/S and LS does not seem to be explained fully by social factors. Social relationships and interactions grounded in R/S impact LS uniquely from people's general degree of social activity and the size of their social networks. Religious/spiritual social networks may be particularly effective at providing a sense of identity and belonging, because they draw on shared beliefs, core values, and perceived divine relationships. For example, praying to a higher power with others is more closely aligned with LS than spending social time with others or praying alone (Lim & Putnam, 2010). R/S may also strengthen social bonds via theistic mediation, whereby individuals draw on a higher power as a neutral party to help resolve interpersonal conflict. Theistic mediation is particularly helpful when individuals believe the higher power wants what is best for everyone involved and is present to strengthen and help each person. Thus, to impact religious believers' LS positively, clinicians and religious leaders might encourage interpersonal relationships in religious communities, communal religious rituals, and relational religious/spiritual activities. Helping religious/spiritual individuals capitalize on relationship skills that draw on their religious/spiritual beliefs can also be a meaningful way to bolster their LS.

## Thought Processes

R/S can offer ways of thinking about life and events that promote LS. R/S are unique in that they can go beyond naturalistic explanations in addressing life's big questions. When faced with existential mysteries, R/S can offer individuals a sense of a meaningful world and their purpose, identity, or worth in it (see Park & Van Tongeren, Chap. 6, this volume). Longitudinal research has indicated that R/S are associated with more LS precisely because they can offer a sense of meaningfulness (Cowlishaw et al., 2013). Furthermore, religious meaning may predict LS beyond a general sense that the world is meaningful, manageable, and orderly (Dezutter et al., 2010). Additionally, R/S can offer positive perceptions of one's self, self-efficacy, and future. Deriving a sense of control in life through collaboration with God is

associated with higher LS (Krause, 2005). As such, R/S may promote LS by offering people a sense of security, hope, or terror management because they trust in God and/or an afterlife.

R/S also offer distinctive resources for coping with distress and creating meaning out of adversity (Pargament, 1997). If individuals believe in the protection of a higher power or that their suffering is part of a larger spiritual plan, they may experience greater LS during hard times. Clinicians can draw on these beliefs therapeutically. Frankl (1946/2006) illustrated this in his work with a rabbi who had lost his wife and children at Auschwitz. Frankl suggested perhaps the rabbi survived his children so he could be purified through his suffering to become worthy of joining his children in heaven. The rabbi experienced great relief from this new perspective; his suffering was not in vain but had a deep religious purpose and offered hope for reuniting him with his children. Empirical literature supports that interpreting suffering through a religious lens results in greater LS. For instance, when older Blacks in the United States believe that religion sustains Black people in the face of racial injustice, they experience more LS (Krause, 2004). Therapeutic or religious community settings are ideal venues for helping individuals explore how their R/S contribute to—or perhaps undermine—their sense of meaning, purpose, identity, self-efficacy, and hope. Such discussions offer opportunities for exploring the deep themes underlying LS.

#### Physical Health

R/S can promote people's LS by impacting their physical health. Many religions encourage their adherents to treat their bodies as sacred, practice moderation in food and alcohol, and take periodic rest (e.g., Sabbath). Thus, R/S could promote LS through behavioral and lifestyle choices that positively impact physical health (see Masters et al., Chap. 21, this volume). Clinicians and religious leaders can encourage religious/spiritual individuals to practice such behaviors in authentic ways that promote spiritual growth, physical health, and LS.

Parallel to the themes discussed, longitudinal research has supported that R/S relate to LS even after accounting for the influence of physical health (Bradshaw et al., 2015; Koenig & Vaillant, 2009). This theme is further supported by a substantial body of cross-sectional research indicating the same. Much of this research has been conducted in the United States, although these findings have also been confirmed in other countries such as Israel (Lifshitz et al., 2019), Ghana (Addai et al., 2014), and Greece (Chliaoutakis et al., 2002). These findings suggest that, similar to social resources and cognitive appraisals, physical health is one of the avenues through which R/S contribute to LS, but that it does not tell the full story.

#### **Analysis**

As reviewed, literature from various nations offers explanations for the positive link between R/S and LS based on social resources, thought processes, and physical health. Another theme is that R/S promote LS by offering opportunities for people to experience positive emotions (see Van Cappellen et al., Chap. 20, this volume). In addition, as posited in Davis et al.'s (Chap. 18, this volume) positive religious/spiritual development theory, people's psychological needs may drive their R/S and thereby their well-being. For instance, religious/spiritual social resources can fulfill psychological needs for acceptance, trust, and self-esteem/status and thereby account for increases in LS. Religious/spiritual thought processes can fulfill psychological needs for predictability and control, also accounting for increases in LS.

Of note is that some theories in the literature address R/S in reductionistic ways, suggesting R/S merely represent more basic cognitive, social, physical, or emotional processes. Reductionism devalues R/S by shifting the emphasis to these other factors. If underlying psychological or physical processes are considered the crux of the matter, R/S are rendered irrelevant. However, the literature reviewed in this section suggests that in addition to working through non-R/S avenues, R/S can promote LS in substantive ways that are unique and not redundant with the effects of non--R/S aspects of life. Such a nonreductionistic approach recognizes R/S as distinctive aspects of life that are motives in their own right. If people are considered spiritual beings, then R/S experiences contribute to LS by fulfilling basic needs and desires within individuals, not only by reflecting underlying non-R/S needs and desires. Clinicians and religious leaders may benefit from exploring their conceptualization of how R/S fit into the human experience. Some conceptualizations that give R/S a position of primacy alongside biopsychosocial experiences include Pargament's (2007) biopsychosociospiritual model and Piedmont's (1999) theory of spirituality as a dimension of personality.

## A Darker Side to Religion and Spirituality

Although most research indicates positive links between R/S and LS, some forms of R/S involve struggle and strain. Individuals can experience the loss or violation of something they consider sacred, can feel abandoned by God, or can experience religious guilt and shame (Pargament, 1997). Surprisingly, there is not much research evidence to support that these strenuous forms of R/S are associated with lower LS. Although some studies have found spiritual struggles are associated with less LS cross-sectionally or at a later date (e.g., Hebert et al., 2009), this link does not seem to persist when taking into account people's preexisting levels of LS (Park et al., 2011; Wortmann et al., 2012). A recent meta-analysis of longitudinal research indicated higher levels of spiritual struggles are coupled with increases in negative psychological adjustment, but they are not associated with change in positive

psychological adjustment, including LS (Bockrath et al., 2021). Further, cross-sectional research suggests LS is higher when spiritual struggles or doubts prompt spiritual growth or meaning-making (Zarzycka & Zietek, 2019). Although more research is needed to confirm this, it is possible LS may increase when spiritual struggles provide an opportunity for people to reexamine their faith or worldview in a constructive way.

#### **Future Research Directions**

Throughout this chapter, we have noted areas where more research would be helpful. Here we mention a few additional points. First, although in-depth measures of R/S and LS have been used, large-scale studies—particularly multicountry, nationally representative, and panel studies—more commonly depend on few-item or single-item measures. Because people may factor the domain of R/S into their global judgments of LS, the use of superficial assessments may lead to overestimation of the R/S–LS relationship. What complicates this issue further is that people differ cross-culturally in how they weigh the domain of R/S in their global judgments of LS (Theuns et al., 2012), which obfuscates an understanding of how the R/S–LS link differs between countries and cultures. Therefore, multicountry and longitudinal studies that use in-depth and nuanced measures of R/S would be ideal.

Ongoing research can continue to parse out the aspects of R/S that are most influential to LS and how they relate to appropriate secular comparisons. Further, evaluating nonlinear relationships between R/S and LS could be enlightening, given there is some indication that religious individuals tend to be either very satisfied or dissatisfied with life (Okulicz-Kozaryn, 2010). Previous research has uncovered nonlinear links between R/S and mental health outcomes (e.g., nondepressed people with high *or* low church attendance were less likely to show depression at follow-up relative to moderate church attenders; Ronneberg et al., 2016). Similar work should be conducted in the examination of LS.

## **Conclusions and Implications**

This chapter has offered highlights from the substantial literature base connecting R/S to LS. The findings underscore one way in which R/S contribute to human flourishing. Meta-analyses indicate the overall relationship between R/S and LS is small (Garssen et al., 2021; Hackney & Sanders, 2003) but comparable to the size of the effect of other factors meaningfully related to LS, such as socioeconomic status, social support, and competence (Pinquart & Sörensen, 2000). However, the nature and size of the relationship between R/S and LS can differ based on the unique characteristics of individuals, communities, regions, cultures, and countries.

This literature is relevant to clinicians who aspire to treat religious/spiritual clients as whole persons. With most of the research having been conducted in the general population, there is a need to assess clinical populations more closely. The positive impact of R/S on mental health may be even more robust among those facing stressful circumstances (Moreira-Almeida et al., 2006), and there is a strong base of clinical writings on the importance of R/S as sources of strength and support for psychotherapy clients (Pargament, 2007). At the same time, some groups, including sexual minorities, may see less strong or more nuanced relationships between R/S and health outcomes, due to stigma or minority stress (Lefevor et al., 2021). Although more research is needed to understand the links between R/S and LS among specialized populations, the current literature offers initial support for clinicians to affirm their clients' R/S as potential sources of LS. Importantly, clinicians should be aware of the potential individual differences and contextual factors highlighted earlier in this chapter, which may influence how R/S relate to LS.

Religious leaders may also benefit from this literature by encouraging religious beliefs, worldviews, theological interpretations, and practices that promote LS. Given that R/S also work through avenues such as relationships, hope, meaning, and health behaviors, religious leaders are encouraged to foster holistic approaches to R/S that nurture these LS-promoting aspects of life.

R/S represent a critical aspect of many people's lives around the world. As subjective well-being (which encompasses LS) becomes an increasingly important measure of societal flourishing (Diener & Seligman, 2018), positive psychologists can continue to examine the relationship between R/S and LS. This domain of study can promote insight that furthers the fundamentally intertwined goals of religious/spiritual leaders and clinicians who take holistic approaches to working with religious/spiritual individuals and communities.

#### References

Addai, I., Opoku-Agyeman, C., & Amanfu, S. (2014). Exploring predictors of subjective well-being in Ghana. *Journal of Happiness Studies*, 15(4), 869–890. https://doi.org/frb4

Bockrath, M. F., Pargament, K. I., Wong, S., Harriott, V. A., Pomerleau, J. M., Homolka, S. J., Chaudhary, Z. B., & Exline, J. J. (2021). Religious and spiritual struggles and their links to psychological adjustment: A meta-analysis of longitudinal studies. *Psychology of Religion and Spirituality*. https://doi.org/10/gk5z

Bradshaw, M., & Kent, B. V. (2018). Prayer, attachment to God, and changes in psychological well-being in later life. *Journal of Aging and Health*, 30(5), 667–691. https://doi.org/frb5

Bradshaw, M., Ellison, C. G., Fang, Q., & Mueller, C. (2015). Listening to religious music and mental health in later life. *The Gerontologist*, 55(6), 961–971. https://doi.org/gg9mh7

Büssing, A., Baiocco, F., & Baumann, K. (2018). Spiritual dryness in Catholic laypersons working as volunteers is related to reduced life satisfaction rather than to indicators of spirituality. *Pastoral Psychology*, 67(1), 1–15. https://doi.org/frb6

Chen, Y., & VanderWeele, T. J. (2018). Associations of religious upbringing with subsequent health and well-being from adolescence to young adulthood. *American Journal of Epidemiology*, 187(11), 2355–2364. https://doi.org/10.1093/aje/kwy142

- Chliaoutakis, J. E., Drakou, I., Gnardellis, C., Galariotou, S., Carra, H., & Chliaoutaki, M. (2002). Greek Christian Orthodox ecclesiastical lifestyle: Could it become a pattern of health-related behavior? *Preventive Medicine*, 34(4), 428–435. https://doi.org/fhh9t3
- Cotton, S., Puchalski, C. M., Sherman, S. N., Mrus, J. M., Peterman, A. H., Feinberg, J., Pargament, K. I., Justice, A. C., Leonard, A. C., & Tsevat, J. (2006). Spirituality and religion in patients with HIV/AIDS. *Journal of General Internal Medicine*, 21(S5), S5–S13. https://doi.org/bkcrfx
- Cowlishaw, S., Niele, S., Teshuva, K., Browning, C., & Kendig, H. (2013). Older adults' spirituality and life satisfaction: A longitudinal test of social support and sense of coherence as mediating mechanisms. *Ageing and Society*, 33(7), 1243–1262.
- Crosby, R. G., III, Ritt, B., & Slunaker, J. (2020). Motives for religious sacrifice: Classification, measurement, and longitudinal association with psychospiritual well-being. *Psychology of Religion and Spirituality*, 12(1), 1–12. https://doi.org/gk52
- Dezutter, J., Robertson, L. A., Luyckx, K., & Hutsebaut, D. (2010). Life satisfaction in chronic pain patients: The stress-buffering role of the centrality of religion. *Journal for the Scientific Study of Religion*, 49(3), 507–516. https://doi.org/dhhr79
- Diener, E., & Seligman, M. E. (2018). Beyond money: Progress on an economy of well-being. *Perspectives on Psychological Science*, 13(2), 171–175. https://doi.org/gdd3gn
- Diener, E., Tamir, M., & Scollon, C. N. (2006). Happiness, life satisfaction, and fulfillment: The social psychology of subjective well-being. In P. A. M. Van Lange (Ed.), *Bridging social psychology: Benefits of transdisciplinary approaches* (pp. 319–324). Lawrence Erlbaum.
- Diener, E., Oishi, S., & Lucas, R. E. (2009). Subjective well-being: The science of happiness and life satisfaction. In S. J. Lopez & C. R. Snyder (Eds.), *Oxford handbook of positive psychology* (2nd ed., pp. 187–194). Oxford University Press.
- Diener, E., Tay, L., & Myers, D. (2011). The religion paradox: If religion makes people happy, why are so many dropping out? *Journal of Personality and Social Psychology, 101*(6), 1278–1290. https://doi.org/b7h9zr
- Eichhorn, J. (2012). Happiness for believers? Contextualizing the effects of religiosity on lifesatisfaction. *European Sociological Review*, 28(5), 583–593. https://doi.org/bzpvpd
- Frankl, V. E. (1946/2006). Man's search for meaning. Beacon Press.
- Fredrickson, B. L. (2001). The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions. *American Psychologist*, *56*, 218–226. https://doi.org/10.1037/0003-066X.56.3.218
- Garssen, B., Visser, A., & Pool, G. (2021). Does spirituality or religion positively affect mental health? Meta-analysis of longitudinal studies. *International Journal for the Psychology of Religion*, 31(1), 4–20. https://doi.org/ghgd2s
- Gebauer, J. E., & Sedikides, C. (2021). Cultural religiosity: A neglected but powerful dimension of culture. *Current Opinion in Psychology*, 40, 73–78. https://doi.org/gjmf
- Gebauer, J. E., Sedikides, C., & Neberich, W. (2012). Religiosity, social self-esteem, and psychological adjustment: On the cross-cultural specificity of the psychological benefits of religiosity. *Psychological Science*, *23*, 158–160. https://doi.org/fznb7m
- Gebauer, J. E., Sedikides, C., Schönbrodt, F. D., Bleidorn, W., Rentfrow, P. J., Potter, J., & Gosling, S. (2017). The religiosity as social value hypothesis: A multi-method replication and extension across 65 countries and three levels of spatial aggregation. *Journal of Personality and Social Psychology*, 113(3), e18–e39. https://doi.org/gbvcpb
- Geerling, D. M., & Diener, E. (2020). Effect size strengths in subjective well-being research. Applied Research in Quality of Life, 15(1), 167–185. https://doi.org/dgxf
- Hackney, C. H., & Sanders, G. (2003). Religiosity and mental health: A meta-analysis of recent studies. *Journal for the Scientific Study of Religion*, 42(1), 43–55. https://doi.org/cchmch
- Headey, B., Schupp, J., Tucci, I., & Wagner, G. G. (2010). Authentic happiness theory supported by impact of religion on life satisfaction: A longitudinal analysis with data for Germany. *The Journal of Positive Psychology*, 5(1), 73–82. https://doi.org/dpbv6r

- Hebert, R., Zdaniuk, B., Schulz, R., & Scheier, M. (2009). Positive and negative religious coping and well-being in women with breast cancer. *Journal of Palliative Medicine*, 12(6), 537–545. https://doi.org/bq64gk
- Hu, Y.-H., Chiu, C.-J., Wong, J. D., Lin, D.-C., & Wray, L. A. (2018). The role of leisure activities in the relationship between marital transition in later midlife and psychological well-being trajectories. *The International Journal of Aging & Human Development*, 86(4), 327–346. https:// doi.org/g4df
- Kent, B. V., Bradshaw, M., & Uecker, J. E. (2018). Forgiveness, attachment to God, and mental health outcomes in older US adults: A longitudinal study. *Research on Aging*, 40(5), 456–479. https://doi.org/ggq3f6
- Koenig, H. G., & Larson, D. B. (2001). Religion and mental health: Evidence for an association. *International Review of Psychiatry, 13*(2), 67–78. https://doi.org/fnd6nn
- Koenig, L. B., & Vaillant, G. E. (2009). A prospective study of church attendance and health over the lifespan. *Health Psychology*, 28(1), 117–124. https://doi.org/d5858r
- Koenig, H., King, D., & Carson, V. (2012). Handbook of religion and health (2nd ed.).
- Kor, A., Pirutinsky, S., Mikulincer, M., Shoshani, A., & Miller, L. (2019). A longitudinal study of spirituality, character strengths, subjective well-being, and prosociality in middle school adolescents. Frontiers in Psychology, 10, 377. https://doi.org/gg5fcf
- Kortt, M. A., Dollery, B., & Grant, B. (2015). Religion and life satisfaction down under. *Journal of Happiness Studies*, 16(2), 277–293. https://doi.org/frch
- Krause, N. (2004). Common facets of religion, unique facets of religion, and life satisfaction among older African Americans. The Journals of Gerontology: Series B: Psychological Sciences and Social Sciences, 59(2), S109–S117. https://doi.org/dcwc7k
- Krause, N. (2005). God-mediated control and psychological well-being in late life. *Research on Aging*, 27(2), 136–164. https://doi.org/c5b7kg
- Krause, N., & Hayward, R. D. (2013). Prayer beliefs and change in life satisfaction over time. *Journal of Religion and Health*, 52(2), 674–694. https://doi.org/f4xb2p
- Laudet, A. B., & White, W. L. (2008). Recovery capital as prospective predictor of sustained recovery, life satisfaction, and stress among former poly-substance users. Substance Use & Misuse, 43(1), 27–54. https://doi.org/cgntx5
- Lazar, A., & Bjorck, J. P. (2016). Religious support and psychological well-being: Gender differences among religious Jewish Israelis. *Mental Health, Religion & Culture*, 19(4), 393–407. https://doi.org/frcm
- Lechner, C. M., & Leopold, T. (2015). Religious attendance buffers the impact of unemployment on life satisfaction: Longitudinal evidence from Germany. *Journal for the Scientific Study of Religion*, 54(1), 166–174. https://doi.org/gdxtvq
- Lefevor, G. T., Davis, E. B., Paiz, J. Y., & Smack, A. C. P. (2021). The relationship between religiousness and health among sexual minorities: A meta-analysis. *Psychological Bulletin*. Advance online publication. https://doi.org/gk53
- Lifshitz, R., Nimrod, G., & Bachner, Y. G. (2019). Spirituality and wellbeing in later life: A multi-dimensional approach. *Aging & Mental Health*, 23(8), 984–991. https://doi.org/gf36mj
- Lim, C., & Putnam, R. D. (2010). Religion, social networks, and life satisfaction. American Sociological Review, 75(6), 914–933. https://doi.org/cdpkq2
- Lindert, J., Bain, P. A., Kubzansky, L. D., & Stein, C. (2015). Well-being measurement and the WHO health policy Health 2010: Systematic review of measurement scales. *European Journal* of Public Health, 25(4), 731–740. https://doi.org/f7m2rj
- Lun, V. M.-C., & Bond, M. H. (2013). Examining the relation of religion and spirituality to subjective well-being across national cultures. *Psychology of Religion and Spirituality*, 5(4), 304–315. https://doi.org/gg9d2p
- Lyubomirsky, S., & Lepper, H. S. (1999). A measure of subjective happiness: Preliminary reliability and construct validation. *Social Indicators Research*, 46(2), 137–155. https://doi.org/bfpfhv

- Marques, S. C., Lopez, S. J., & Mitchell, J. (2013). The role of hope, spirituality, and religious practice in adolescents' life satisfaction: Longitudinal findings. *Journal of Happiness Studies*, 14(1), 251–261. https://doi.org/gg47gh
- McDougall, J., DeWit, D. J., Nichols, M., Miller, L., & Wright, F. V. (2016). Three-year trajectories of global perceived quality of life for youth with chronic health conditions. *Quality of Life Research*, 25(12), 3157–3171. https://doi.org/f93h3v
- Miller-Perrin, C., & Krumrei-Mancuso, E. (2015). Faith from a positive psychology perspective. Springer.
- Moreira-Almeida, A., Neto, F. L., & Koenig, H. G. (2006). Religiousness and mental health: A review. *Revista Brasileira de Psiquiatria*, 28(3), 242–250. https://doi.org/brnctc
- Namini, S., & Murken, S. (2009). Self-chosen involvement in new religious movements (NRMs): Well-being and mental health from a longitudinal perspective. *Mental Health, Religion & Culture, 12*(6), 561–585. https://doi.org/cs9qsd
- Okulicz-Kozaryn, A. (2010). Religiosity and life satisfaction across nations. *Mental Health, Religion & Culture, 13*(2), 155–169. https://doi.org/bbnbdk
- Pargament, K. I. (1997). The psychology of religion and coping. Guilford Press.
- Pargament, K. I. (2007). Spiritually integrated psychotherapy. Guilford Press.
- Park, C. L., Wortmann, J. H., & Edmondson, D. (2011). Religious struggle as a predictor of subsequent mental and physical well-being in advanced heart failure patients. *Journal of Behavioral Medicine*, 34(6), 426–436. https://doi.org/dzg4w7
- Pavot, W., & Diener, E. (2008). The Satisfaction With Life Scale and the emerging construct of life satisfaction. *The Journal of Positive Psychology*, 3(2), 137–152. https://doi.org/dgn5p5
- Piedmont, R. L. (1999). Does spirituality represent the sixth factor of personality? Spiritual transcendence and the Five-Factor Model. *Journal of Personality*, 67(6), 985–1013. https://doi.org/df88hs
- Pinquart, M., & Sörensen, S. (2000). Influences of socioeconomic status, social network, and competence on subjective well-being in later life: A meta-analysis. *Psychology and Aging*, 15(2), 187–224. https://doi.org/dbfzhx
- Ronneberg, C. R., Miller, E. A., Dugan, E., & Porell, F. (2016). The protective effects of religiosity on depression: A 2-year prospective study. *The Gerontologist*, 56(3), 421–431. https://doi.org/f8rj3m
- Shek, D. T. L., & Liang, L.-Y. (2018). Psychosocial factors influencing individual well-being in Chinese adolescents in Hong Kong: A six-year longitudinal study. *Applied Research in Quality of Life*, 13(3), 561–584. https://doi.org/gd67x6
- Sinnewe, E., Kortt, M. A., & Dollery, B. (2015). Religion and life satisfaction: Evidence from Germany. *Social Indicators Research*, 123(3), 837–855. https://doi.org/f7ppvg
- Snoep, L. (2008). Religiousness and happiness in three nations: A research note. *Journal of Happiness Studies*, 9(2), 207–211. https://doi.org/dbzr65
- Stavrova, O., Fetchenhauer, D., & Schlösser, T. (2013). Why are religious people happy? The effect of the social norm of religiosity across countries. *Social Science Research*, 42(1), 90–105. https://doi.org/gdj4wf
- Suhail, K., & Chaudhry, H. R. (2004). Predictors of subjective well-being in an Eastern Muslim culture. *Journal of Social and Clinical Psychology*, 23(3), 359–376.
- Theuns, P., Baran, B., Vaerenbergh, R. V., & Tiliouine, H. (2012). A cross-cultural experimental approach to the contribution of health, religion and personal relations to subjective satisfaction with life as a whole. *Psicológica*, *33*(3), 591–608.
- Wortmann, J. H., Park, C. L., & Edmondson, D. (2012). Spiritual struggle and adjustment to loss in college students: Moderation by denomination. *International Journal for the Psychology of Religion*, 22(4), 303–320. https://doi.org/gk56
- Wright, A. W., Yendork, J. S., & Kliewer, W. (2018). Patterns of spiritual connectedness during adolescence: Links to coping and adjustment in low-income urban youth. *Journal of Youth and Adolescence*, 47(12), 2608–2624. https://doi.org/gfkfvc
- Zarzycka, B., & Zietek, P. (2019). Spiritual growth or decline and meaning-making as mediators of anxiety and satisfaction with life during religious struggle. *Journal of Religion and Health*, 58(4), 1072–1086. https://doi.org/frcs

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