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Courtney Kinneard

Brigham Young University, courtney.kinneard@gmail.com

Mark Ogletree

Brigham Young University, mark_ogletree@byu.edu

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Depression, Religiosity, and Parenting Styles among Young LDS Adolescents



By: Courtney Kinneard Faculty Members: Mark Ogletree, Justin Dyer, Michael Goodman Department: Church History



Background

Our purpose is to examine depression among Latter-day Saint teens, and particularly, how religiosity and the parent-child relationship are associated with depressive symptomatology. Although there is an abundance of research on adolescent depression and on adolescent religiosity, there are fewer studies focused on Latter-day Saint adolescents, and specifically how religiosity and parental warmth affect depression in this group—a group that researcher Kenda Creasy Dean called the “spiritual athletes” of their generation, because of their spiritual sacrifices, devotion, and energy towards their faith (Dean, 2010).

This study focuses on the following specific research questions:

- Does religiosity among Latter-day Saint teens reduce their rates of depression?
- What aspects of religiosity affect depression most significantly?
- How does the parent-child relationship affect depression rates among Latter-day Saint teens?



Methods

Using random sampling, 493 adolescents participated in this study—500 more adolescents will participate by June of 2017. The subjects were primarily from two populous counties in Northern Utah. The average age of the participants was 13.12 years, with a minimum age of 11 years, and a maximum age of 15 years. Forty-five percent of the sample were male, and 55 percent were female. Regarding religion, 88 percent of the subjects were Latter-day Saints; 3 percent identified as Catholic; 1 percent reported as Protestant; and 4 percent reported “other” on religious affiliation. Four percent did not select a religious affiliation.

Adolescent Depression

Adolescent depression was assessed using the 20-item CES-DC (Center for Epidemiological Studies Depression Scale for Children (Weissman, Orvaschel, & Padian, 1980) and strength of adolescent religiosity was determined using the Strength of Religious Faith questionnaire (Plante & Boccaccini, 1997).

Adolescent Religiosity

To assess daily spiritual experiences, we utilized the NIA/Fetzer Religion and Spirituality Scales (see Idler et. al, 2003).

Questions to measure daily spiritual experiences:

Participants ranked each experience as: 1 - Many times a day, 2 - Every day, 3 - Most days, 4 - Some days, 5 - Once in a while, 6 - Never or almost never

1. I feel God’s presence.
2. I find strength and comfort in my religion.
3. I feel deep inner peace or harmony.
4. I desire to be closer to or in union with God.
5. I feel God’s love for me, directly or through others.
6. I am spiritually touched by the beauty of creation.

To evaluate more than just behavioristic or observable religious practices, the Intrinsic Spirituality Scale (Hodge, 2003) was administered to the participants. The Religious Coping Scale (Pargment, Feuille, & Burdzy, 2011) was used to assess positive and negative religious coping methods.

Parenting Styles

Finally, to determine how parenting styles could influence adolescent depression, we incorporated the Parenting Styles and Dimensions Questionnaire—Short Version (PSDQ) into our measures (Robinson, Mandlco, Olsen, & Hart, 2001). Ordinary least squares regression modeling was used to determine the relationships among variables such as religious strength, daily spiritual experiences, intrinsic spirituality, religious coping, and parental parenting styles.

Preliminary Results

Although more subjects are being recruited for this study, with a sample size close to 500, we have been able to compute some preliminary findings. Using OLS regression, we entered all the above religion and family variables in the model to predict depression. Daily religious experiences were negatively associated with depression ($b = -.21$; $p = .001$).

Another significant finding was that negative religious coping was positively associated with depression ($b = .32$; $p = .00$).

Parental warmth was not associated with boys depression, but, was negatively associated for girls depression ($b = -.41$; $p = .04$).

It should also be reported that there was no significant relationship between depression and religious strength ($b = .07$; $p = .12$), nor was there a relationship between depression and intrinsic spirituality ($b = .00$; $p = .90$). Moreover, there was also no association with depression and positive religious coping ($b = .01$; $p = .83$).



Conclusion

- Participants who acknowledged that they feel God’s presence in their lives and that they find strength and comfort in their religion were less likely to be depressed.
- Interestingly, being actively involved in Church participation (Religious Strength) was not significant in this study. Therefore, simply attending religious services is not related to adolescent depression.
- Boys do not appear to be as affected by their parent’s warmth as girls are. On the other hand, girls who have a strong connection (warmth) with their mothers are less likely to experience depressive symptoms.
- Finally, boys’ depression was unrelated to parental warmth whereas girl’s depression was.
- Girls who have a strong connection (warmth) with their mothers are less likely to experience depressive symptoms. Perhaps attachment theory can best explain this phenomenon. Girls securely attached to their mothers feel more certain and sure about their environment, gain more positive and self-efficacious image, and thus experience less depression.

More research focused on this area could help explain the “why” to these questions. However, these preliminary findings will be helpful to family scholars, mental health practitioners, and parents to help teenagers better manage depression in their lives.

Family Foundations of Youth