University of Windsor

Scholarship at UWindsor

UWill Discover Conference

UWill Discover 2022

Islamic Religiosity and Subjective Well-Being in the West: Meta-Analytic Evidence of Consistent Protections across the Diverse Muslim Diasporas

Sara Ghannam Ms. *University of Windsor*, ghannams@uwindsor.ca

Kevin M. Gorey Dr. *University of Windsor*, gorey@uwindsor.ca

Follow this and additional works at: https://scholar.uwindsor.ca/uwilldiscover

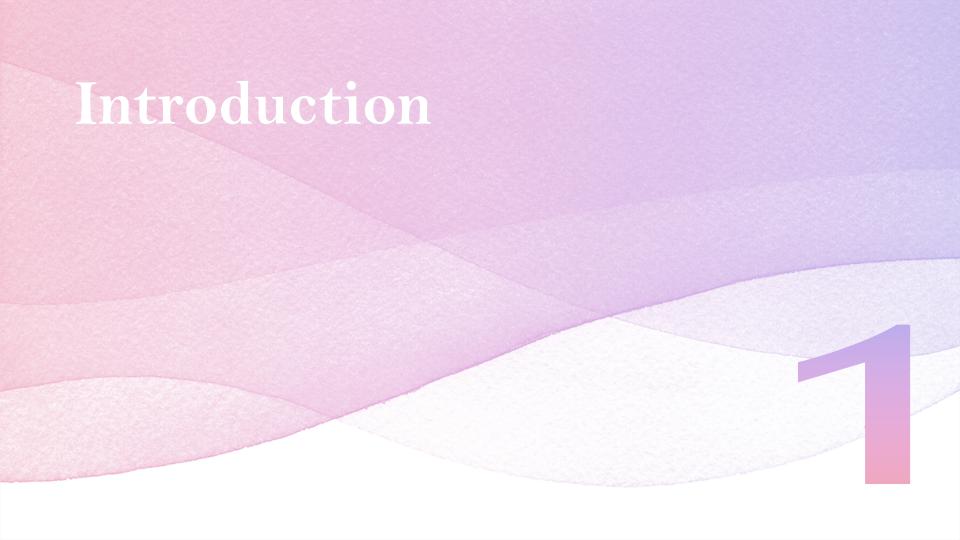
Ghannam, Sara Ms. and Gorey, Kevin M. Dr., "Islamic Religiosity and Subjective Well-Being in the West: Meta-Analytic Evidence of Consistent Protections across the Diverse Muslim Diasporas" (2022). *UWill Discover Conference*. 1.

https://scholar.uwindsor.ca/uwilldiscover/2022/2022Day2/1

This Event is brought to you for free and open access by the Conferences and Conference Proceedings at Scholarship at UWindsor. It has been accepted for inclusion in UWill Discover Conference by an authorized administrator of Scholarship at UWindsor. For more information, please contact scholarship@uwindsor.ca.

Islamic Religiosity and Subjective Well-Being in the West:
Meta-Analytic Evidence of Protections
across Diverse Muslim Diasporas

By: Sara Ghannam (BSW, MSW Student) & Kevin M. Gorey (PhD)



How Many Muslims Are in the West

According to the Pew Research Centre (DeSilver & Masci, 2017)...

43.5 Million

in Europe (6% of the total population)

3.5 Million

in North America (1% of the total population)

650,000

In Australasia (1.6% of the total population)

Introduction

Geopolitical upheaval and armed conflicts have brought
Muslims to the West
Muslims in the West face mistrust, stigmatization and
discrimination
Unique struggles = higher risk of negative mental health
and lower SWB

Unique Struggles

Intersection between discrimination based on religious identity and immigrant/refugee status Acculturative stress linked to status as immigrants/refugees
Islamophobia linked with hate crimes and substantially lower employment rates

Exacerbated amongst Muslim women

Religion as a Protective Factor

> 250 Judeo-Christian studies have identified religion as a protective factor

Few worldwide studies support this for Muslims

Goal: complete a meta-analytic review to discover the link between religiosity and SWB in amongst Muslims in the West

Hypotheses

Main hypothesis: there will be a significant protective Islamic religiosity-subjective well-being association

Secondary hypothesis: there will be a stronger religiosity-subjective well-being association among Muslim women than men

Methods

Study Selection

Systemic search of databases: CINAHL,

Medline/PubMed, PsycINFO, ProQuest Sociology

Collection and Social Work Abstracts

Grey literature was also searched: ProQuest

Dissertations and Theses and Google Scholar

Study Selection Cont'd

Keyword search:

(wellbeing or well-being or well being or quality of life or wellness or positive affect or happiness or mental health or mental illness or mental disorder or psychiatric illness or psychiatric distress or anxiety or anxiety disorder or depression or depressive disorder) and (religiosity or religion or religious or religiousness or spiritual or spirituality or faith) and (Muslim or Islam).

Study Selection Cont'd

Study inclusion criteria:

- 1. Took place in any European country, Canada, the USA, Australia, or New Zealand
- 2. included face valid or standardized measures of religiosity and SWB and assessed their statistical association
- 3. Had a Muslim majority sample
- 4. Published in English

Meta-Analysis

Common size effect metric: Pearson's correlation coefficient (r)

Values from studies were weighted and pooled into one value

Statistical significance: 95% CI

Moderation for gender was tested

Meta-Analysis Cont'd

Practical interpretation statistic: Cohen's U_3

Results

Description of Primary Studies

21 studies selected

Range of years (published): 2000-2021

Sample size range = 50- 2,661 participants

Participants were mainly first or second-generation immigrants

Mainly originated from Arab, Middle-Eastern and African countries

Description of Primary Studies Cont'd

Majority of the sample (n = 7,145) were:

Adults (61.9%)

Women (53.3%)

In the USA (52.4%)

Description of Primary Studies Cont'd

All studies used cross-section surveys

Majority of the study modalities were:

Offline, in-person surveys (66.7%)

Convenience surveys (81.0%)

Meta-Analytic Findings

19 studies supported the main hypothesis

$$r_{\text{pooled}} = 0.20 (95\% \text{ CI } 0.14, 0.25)$$

16 studies p < .05 and 3 studies p < .10

About 2/3 of religious Muslims scored higher on SWB than nonreligious Muslims ($U_3 = 65.8\%$, p < . 05)

Associations were significantly heterogenous

$$(\chi^2(20) = 95.33, p < .001$$

Meta-Analytic Findings

gender such apparent protections were observed to be significantly greater among Muslim women $(r = 0.26 \ [95\% \ CI \ 0.20, \ 0.37], \ U_3 = 72.8\%)$ than men $(r = 0.14 \ [95\% \ CI \ 0.09, \ 0.20], \ U_3 = 64.3\%); \ \chi^2(1) = 4.37, \ p < .05.$ Other potential moderators:

religiosity was found to be significantly larger among postsecondary students (r = 0.36 [95% CI 0.26, 0.45] $U_3 = 78.0\%$) than among the other immigrants (r = 0.18 [95% CI 0.12, 0.23] $U_3 = 63.3\%$), χ^2 (1) = 9.71, p < .01.

Meta-Analytic Findings

Other potential moderators:

the protective effect of Islamic religiosity was significantly smaller in the 15 published journal articles (r=0.14 [95% CI 0.09, 0.20] $U_3=61.1\%$) vs. 6 unpublished, grey dissertations (r=0.29 [95% CI 0.21, 0.37] $U_3=72.8\%$), $\chi^2(1)=8.75, p<.01$

Discussion

Practical Implications

Religiosity was proven to be a protective factor for Muslims in the West

Protection in women > men

Utilization in social services

Policy makers should work to eradicate Islamic (all) religious discrimination in Western social structures

Limitations

Sample may not accurately represent entire population Potential response biases Difference in scales

Future Research Needs

Studies comparing Muslims and non-Muslims in the West Studies with other modalities (ex. longitudinal studies)
Studies applying the use of Islamic religiosity as a protective factor (ex. the effectiveness of Islamic-based counselling)



Thank You Listening

Any questions?

AbdAleati, N. S., Zaharim, N. M., & Mydin, Y. O. (2014). Religiousness and mental health: Systematic review study. Journal of Religion and Health, 55(6), 1929-1937.

Abdel-Khalek A.M. (2019) Religiosity and well-being. In V. Zeigler-Hill, & T. Shackelford (eds.), Encyclopedia of Personality and Individual Differences. Springer. https://doi.org/10.1007/978-3-319-28099-8_2335-1

Adam, Z., & Ward, C. (2016). Stress, religious coping and wellbeing in acculturating. Muslims. Journal of Muslim Mental Health, 10(2), 3-26.

Ahmed, S., & Gorey, K. M. (2021) Employment discrimination faced by Muslim women wearing the hijab: Exploratory meta-analysis. Advanced access published. *Journal of Ethnic & Cultural Diversity in Social Work*.

Ali, M. (2006). Impact of acculturation, ethnic identity, religiosity, and individual difference variables on the subjective well-being of Pakistani Muslims in the United States (Order No. 3229824). Available from ProQuest Dissertations & Theses Global. (304980145).

Aly, H. A. (2010). Spirituality and psychological well-being in the muslim community: An xploratory study (Order No. 3430240). Available from ProQuest Dissertations & Theses Global. (815241237).

Amer, M. M., & Hovey, J. D. (2007). Socio-demographic differences in acculturation and mental health for a sample of 2nd generation/early immigrant Arab Americans. *Journal of Immigrant & Minority Health*, 9, 335.

American Psychiatry Association. (2018). What is mental illness? https://www.psychiatry.org/patients-families/what-is-mental-illness

Areba, E. M. (2014). Religious coping, symptoms of depression and anxiety, and well-being among Somali college students (Order No. 10185597). Available from ProQuest Dissertations & Theses. Global. (1845883559).

Borenstein, M., Hedges, L., Higgins, J., & Rothstein, H. (2013). Comprehensive meta-analysis, version 3 (Computer software). Englewood, NJ: Biostat.

Cohen, J. (1988). Statistical power analysis for the behavioral sciences (2nd ed.). Hillsdale, NJ: Lawrence Erlbaum Associates.

Cooper, H. M. (2017). Research synthesis and meta-analysis: A step-by-step approach (5th ed.). Los Angeles: Sage.

Croucher, S. M. (2013). Integrated threat theory and acceptance of immigrant assimilation: An analysis of Muslim immigration in Western Europe. Communication Monographs, 80(1), 46-62.

de Smidt, G. A., & Gorey, K. M. (1997). Unpublished social work research: Systematic replication of a recent meta-analysis of published intervention effectiveness research. Social Work Research, 21(1), 58-62.

DeSilver, D., & Masci, D. (2020). World Muslim population more widespread than you might think. Pew Research Center. Retrieved from https://www.pewresearch.org/fact-tank/2017/01/31/worlds-muslim-population-more-widespread-than-you-might-think/

Doré, I., & Caron, J. (2017). Santé mentale: Concepts, mesures et déterminants [Mental health: Concepts, mesures, determinants]. Sante Mentale au Quebec, 42(1):125-145.

Fleiss, J. L., Levin, B., & Paik, M. C. (2003). Statistical methods for rates and proportions (3rd ed.). Hoboken, NJ: Wiley.

Friedman, M., & Saroglou, V. (2010) Religiosity, psychological acculturation to the host culture, self-esteem and depressive symptoms among stigmatized and nonstigmatized religious immigrant groups in western Europe. Basic and Applied Social Psychology2(2), 185-195.

Galderisi, S., Heinz, A., Kastrup, M., Beezhold, J., & Sartorius, N. (2015). Toward a new definition of mental health. World Psychiatry, 14(2), 231-233.

Ganann, R., Ciliska, D., & Thomas, H. (2010). Expediting systematic reviews: Methods and implications of rapid reviews. Implementation Science, 5(1), 56.

Gardner, T. M., Krägeloh, C. U., & Henning, M. A. (2014) Religious coping, stress, and quality of life of Muslim university students in New Zealand. Mental Health, Religion & Culture, 17(4), 327-338.

Goforth, A. N., Oka, E. R., Leong, F. T. L., & Denis, D. J. (2014). Acculturation, acculturative stress, religiosity and psychological adjustment among Muslim Arab American adolescents. Journal of Muslim Mental Health, 8(2), 3-19.

Goforth, A. N., Pham, A. V., Chun, H., Castro-Olivo, S. M., & Yosai, E. R. (2016). Association of acculturative stress, Islamic practices, and internalizing symptoms among Arab American adolescents. School Psychology Quarterly, 31(2), 198-212.

Greenland, S. (1987). Quantitative methods in the review of epidemiologic literature. Epidemiologic Reviews, 9, 1-30.

Grenier, A. M., & Gorey, K. M. (1998). Effectiveness of social work with older people and their families: A meta-analysis of conference proceedings. Social Work Research, 22(1), 60-64.

Giuliani, C., Tagliabue, S., & Regalia, C. (2018). Psychological well-being, multiple identities, and discrimination among first and second generation immigrant Muslims. Europe's Journal of Psychology, 14(1), 66-87.

Gulamhussein, Q.-u.-a., & Eaton, N. R. (2015). Hijab, religiosity, and psychological wellbeing of Muslim women in the United States. Journal of Muslim Mental Health, 9(2), 25-40.

Hamdani, K. A. (2015). Canadian Muslims: A statistical review. Canadian Dawn Foundation.

Haque, A. (2004). Religion and mental health: The case of American Muslims. Journal of Religion and Health, 43(1), 45-58.

Harrison, K. A. (2016). Hiding under the veil of "dress policy:" Muslim women, hijab, and employment discrimination in the United States. Georgetown Journal of Gender and the Law, 17(3), 831-857.

Hodge, D. R., Zidan, T., & Husain, A. (2016). Depression among Muslims in the United States: Examining the role of discrimination and spirituality as risk and protective factors. Social Work, 61(1), 45-52.

Ishaq, B, Østby, L, & Johannessen A. (2021). Muslim religiosity and health outcomes: A cross-sectional study among Muslims in Norway. SSM Population Health, 11(15), 100843.

Jasperse, M., Ward, C., & Jose, P. E. (2012). Identity, perceived religious discrimination, and psychological well-being in Muslim immigrant women. Applied Psychology: An International Review, 61(2), 250-271.

Jisrawi, A. N., & Arnold, C. (2018). Cultural humility and mental health care in Canadian Muslim communities. Canadian Journal of Counselling and Psychotherapy, 52(1), 43-64.

Kira, I. A., Lewandowski, L., Ashby, J. S., Templin, T., Ramaswamy, V., & Mohanesh, J. (2014). The Traumatogenic dynamics of internalized stigma of mental illness among Arab American, Muslim, and refugee clients. Journal of the American Psychiatric Nurses Association, 20(4), 250-266.

Kovacs, E., Piko, B. F., & Fitzpatrick, K. M. (2011). Religiosity as a protective factor against substance use among Hungarian high school students. Substance Use and Misuse, 46(10), 1346-1357.

Liebert, S., Siddiqui, M. H., & Goerzig, C. (2020). Integration of Muslim immigrants in Europe and North America: A transatlantic comparison. Journal of Muslim Minority Affairs, 40(2), 196-216.

Litalien, M., Atari, D. O., & Obasi, I. (2022). The influence of religiosity and spirituality on health in Canada: A systematic literature review. Journal of Religion and Health, 61(1), 373-414.

Love, E. (2017). Islamophobia and racism in America. New York University Press.

Mölsä, M., Kuittinen, S., Tiilikainen, M., Honkasalo, M. L., & Punamäki, R. L. (2017). Mental health among older refugees: the role of trauma, discrimination, and religiousness. Aging & Mental Health, 21(8), 829-837.

Perry, B. (2014). Gendered islamophobia: Hate crime against Muslim women. Social Identities, 20(1), 74-89.

Pew Research Center (2017). The growth of Germany's Muslim population. https://www.pewforum.org/essay/the-growth-of-germanys-muslim-population/8 S.

Pew Research Center (2018). A new estimate of the U.S. Muslim population. https://www.pewresearch.org/fact-tank/2016/01/06/a-new-estimate-of-the-u-s-muslim-population/

Rizvi, M. A. K., & Hossain, M. Z. (2017). Relationship between religious belief and happiness: A systematic literature review. Journal of Religion and Health, 56(5), 1561-1582.

Samari, G., Alcalá, H. E., & Sharif, M. Z. (2018). Islamophobia, health, and public health: A systematic literature review. American Journal of Public Health, 108(6), e1-e9.

Shawahin, L. N. 2016). Psychosocial factors and mental health of Muslims living in the United States (Order No. 10179944). Available from ProQuest Dissertations & Theses Global. (1850448805).

Snider, A., & McPhedran, S. (2014). Religiosity, spirituality, mental health, and mental health treatment outcomes in Australia: A systematic literature review. Mental Health, Religion & Culture, 17(6), 568-581.

Stuart, J., & Ward, C. (2018). The relationships between religiosity, stress, and mental health for Muslim immigrant youth. Mental Health, Religion & Culture, 21(3), 246-261.

Stroup, D. F., Berlin, J. A., Morton, S. C., Olkin, I., Williamson, G. D., Rennie, D.,... Thacker, S. B. (2000). Meta-analysis of observational studies in epidemiology: a proposal for reporting. Meta-analysis Of Observational Studies in Epidemiology (MOOSE) group. Journal of the American Medical Association, 283(15), 2008-2012.

Tirmazi, M. T. (2008). The impact of acculturation on psychosocial well-being among immigrant Muslim youth (Order No. 3307125). Available from ProQuest Dissertations & Theses Global. (193985838).

Tricco, A. C., Antony, J., Zarin, W., Strifler, L., Ghassemi, M., Ivory, J., . . . Straus, S. E. (2015). A scoping review of rapid review methods. BMC Medicine, 13(1), 224.

Vakil, S. K. (2016). Predictors of quality of life for Pakistani American individuals (Order No. 10158141). Available from ProQuest Dissertations & Theses Global. (1839259418).

van der Lans, J., Kemper, F., Nijsten, C., & Rooijackers, M. (2000). Religion, social cohesion and subjective well-being: An empirical study among Muslim youngsters in the Netherlands. Archive for the Psychology of Religion, 23(1), 29-40.

Vang, Z. M., Hou, F., & Elder, K. (2019). Perceived religious discrimination, religiosity, and life satisfaction. Journal of Happiness Studies, 20(6), 1913-1932.

Vernice, N. A., Pereira, N. M., Wang, A., Demetres, M., & Adams, L. V. (2020). The adverse health effects of punitive immigrant policies in the United States: A systematic review. PLoS One, 15(12), e0244054.

World Health Organization. (2004) Promoting mental health: concepts, emerging evidence, practice (summary report) Geneva: World Health Organization. https://www.who.int/mental_health/evidence/en/promoting_mhh.pdf

Yonker, J. E., Schnabelrauch, C. A., & Dehaan, L. G. (2012). The relationship between spirituality and religiosity on psychological outcomes in adolescents and emerging adults: A meta-analytic review.

Journal of Adolescence, 35(2), 299-314.