

ASSOCIATIONS OF SELF-ESTEEM WITH DIFFERENT ASPECTS OF RELIGIOSITY AND SPIRITUALITY

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ABSTRACT

Objectives. Religiosity and spirituality (R/S) are associated with many dimensions of human life and could contribute to one's self-esteem; however, there is no certainty that this is also applicable to non-religious countries. Therefore, the aim of the study was to explore the association of different aspects of R/S with self-esteem in a secular environment.

Participants and setting. An online sample of 464 Czech respondents aged 15 and over (mean age 30.7; SD=12.63; 27.2% men) participated in the survey. Self-esteem, religiosity, religious attendance, frequency of prayer, negative religious coping, image of God and spirituality were measured.

Results. Regular prayer, spirituality (per standard deviation, SD), a low level of religious struggles (per SD) and a positive God image (per SD) were associated with higher self-esteem, with odds ratios ranging from 1.28 to 2.16 ($p < 0.05$ to $p < 0.001$). In contrast, compared to non-religious respondents, religious respondents had an approximately 60% lower chance of having a high level of self-esteem ($p < 0.05$). However, a combination of R and S showed that while religious/spiritual respondents did not differ significantly from non-religious respondents, religious/non-spiritual respondents had approximately 79% lower chance of having good self-esteem ($p < 0.001$).

Study limitations. The main limitation of this study is that it did not reach a representative sample, which limits the generalizability of the findings to the whole population. This is also the first study using this kind of research approach, which, however, limits the interpretation of results. Moreover, it is a cross-sectional study, so any conclusions on causality cannot be made, and the questionnaire used only self-report measures, which could be influenced by a social desirability bias.

key words:

self-esteem,
religiosity,
spirituality,
religious attendance,
God image,
prayer,
religious struggle

klíčová slova:

sebeúcta,
religiozita,
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náboženská účast,
obraz Boha,
modlitba,
náboženský zápas

ISSUE

Research has revealed that level of self-esteem has a significant effect on an individual's life. A positive association exists between self-esteem and future success in life, and a high level of self-esteem prospectively predicts well-being in multiple life domains, such as relationships, work and health (Orth & Robins, 2014). Level of self-esteem affects occupational achievements (Magnusson & Neremo, 2018) as well as physical and mental health (Lu, Li et al., 2018; Orth et al., 2014; Orth et al., 2016). Therefore, exploring aspects that determine an individual's self-esteem has considerable social significance.

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Among possible factors associated with self-esteem are religiosity and spirituality (R/S). A growing body of research shows that various aspects of R/S are, like self-esteem, associated with better physical and mental health in general and depression more specifically (Cheadle & Schetter, 2017). Recent research shows that self-esteem mediates the relationship between spirituality and subjective well-being (Joshani & Daemi, 2015).

Until recently, scientific literature provided few insights into the relation between self-esteem and R/S. Studies have aimed rather to link self-esteem to religiosity in general, but the results have been inconclusive. The reason may be that both religiosity and spirituality are multidimensional constructs (Hooker et al., 2014), and various dimensions may affect self-esteem differently (Francis et al., 2001). These dimensions could include external behaviour, such as church attendance, but also more internal aspects, such as R/S struggles, attachment, and God representations (Tung et al., 2018). Perceptions of self differ in how religion is experienced by the particular person. Therefore, R/S should be explored from a broader sense, using multiple dimensions.

Prior research has focused on studying R/S in the context of religious countries. Studies conducted in religious countries have shown that religious affiliation is associated with increased self-esteem (Smith & Crosby, 2017). Our previous studies (Malinakova et al., 2018; Malinakova, Kopcakova et al., 2019; Malinakova et al., 2020) have shown the benefits of studying R/S also in the context of secular country, as it can add more information to our current knowledge. The Czech Republic is one of the most secular societies in the world (Strielkowski & Cabelkova, 2015), and Czech religious reality has been influenced by a long history of secularization (Fiala, 2009; Spousta, 2002); it thus represents a unique research area.

Therefore, the purpose of our study is to assess the association between self-esteem and different aspects of R/S, such as religious coping, the image of God and prayer, in the context of a secular country. Most authors describe spirituality as a concept independent of religiosity (Rican & Janosova, 2010) and prior research has revealed that better health (King et al., 2013) and higher life satisfaction is associated rather with spirituality than religiosity (Veselska et al., 2018). Moreover, life satisfaction of religiously affiliated individuals is connected to the fact that they belong to a religious congregation with a shared culture (ten Kate et al., 2017). The feeling of belonging, sharing the same worldview and group identity can form a harmonious, collective self-esteem which is interlinked with personal self-esteem. The cultural environment deeply affects how people evaluate themselves (Markus & Kitayama, 1991). Given the fact that in the Czech Republic most people could be defined as religious sceptics who tend to fulfil their spirituality needs outside of the traditional religion (Furstova et al., 2020), we could expect that spirituality will be better accepted than religiosity. Thus, our hypothesis is that the associations of self-esteem with R/S will differ for various aspects of R/S and that spirituality will be more strongly associated with self-esteem than religiosity.

METHODS

Participants

As a part of a broader online survey focusing on spirituality and health, we obtained data on an online sample of 533 Czech respondents aged 15 years and over (April 2017 – November 2017) using the snowball technique. However, 11 respondents were excluded from the online survey because of the extremely short time they spent filling

in the survey (i.e. less than 15 minutes), which presumably did not allow them to fill in the survey thoughtfully. This led to a final sample of 522 respondents. However, the participation in the online survey was fully voluntary and the participants could finish answering the survey at any time. Consequently, some of them dropped out before or during completing the self-esteem questionnaire. These participants were excluded from the survey, which led to a final sample of 464 respondents (mean age 30.7, SD=12.63; 27.2% men). For other variables, the missing values are listed below the corresponding tables. Of these 464 respondents, 437 (83.7%) were religious respondents. This proportion does not correspond to the situation in the Czech Republic, where studies based on national representative samples usually report no more than 8% of religiously attending respondents (Malinakova et al., 2018). However, as the aim of the study was to focus more closely on different aspects of R/S and their associations with self-esteem, a sample of a few hundred respondents with an adequate percentage of religious respondents corresponding to the situation in the Czech Republic would not be sufficient for the analyses. Therefore, the online survey was spread mainly to religious respondents (via e-mail, Facebook and advertisement among the students of the St Cyril and Methodius Theological Faculty in Olomouc).

Participation in the survey was anonymous and voluntary. The study design was approved by the Ethics Committee of the Olomouc University Social Health Institute, Palacký University Olomouc (No. 2016/4).

Measures

Self-esteem was measured using the Czech version (Blatny & Osecka, 1994) of the RSES scale (Rosenberg, 1965), a widely used 10-item self-report instrument for evaluating individual self-esteem on a four-point Likert scale, with answers ranging from 1 (“Strongly agree”) to 4 (“Strongly disagree”). The scoring of the positively worded items was consequently reverted and a total RSES calculated, in which the higher scores indicate higher levels of self-esteem. For the purpose of dichotomisation for the analysis, we assumed participants reaching less than 25 points as having low self-esteem, while those with 25 or above as having high self-esteem. Cronbach’s alpha was 0.86 in our sample.

Religiosity was measured with the question: “At present, would you call yourself a believer?”, with possible answers: “yes, I am a member of a church or religious society”; “yes, but I am not a member of a church or religious society”; “no”; “no, I am a convinced atheist”. For the purpose of a further analysis, respondents who answered “yes”, regardless of their affiliation to a church, were considered as *religious*, while the rest as *non-religious*.

Religious attendance was measured only in religious respondents and was assessed by the question: “How often do you go to church or to religious sessions?”, with possible answers: “several times a week”; “approximately once a week”; “approximately once a month”; “a few times a year”; “exceptionally”; “never”. Sunday attendance is a matter of obligation in most Christian churches/denominations; therefore, the participants who reported attending religious sessions at least once a week were dichotomized as *attending*.

Time for prayer was measured only in religious respondents and was assessed using the question: “How much time do you spend in individual/private praying? (excluding religious meetings)”, with possible answers: “at least half an hour every day”; “about 10 minutes every day”; “about 10 minutes a week”; “I pray only occasionally”; “I do not pray”. Participants who reported praying 10 minutes a day or more were dichotomized as *praying regularly*, the rest as *not praying regularly*.

Negative religious coping was measured only in religious respondents and was assessed using the negative religious coping subscale (NRC) of the Brief RCOPE (Pargament et al., 2011), validated for the Czech environment (Janu et al., 2019). It is composed of 7 items rated on a seven-point scale, with possible answers ranging from “not at all” (1) to “a great deal” (4), with the total score ranging from 7 to 28. NRC items reflect religious tensions and struggles which grow with a less-secure relationship with the divine, for example “I wondered if God had abandoned me.”

For the purpose of our analysis we used the total score on the scale as a continuous variable, where a high score indicated low religious struggles. Cronbach’s alpha was 0.63 in our sample.

Image of God was measured both in religious and non-religious respondents and was assessed with the question “How well do you feel that each of the following words describes God?”, followed by 12 adjectives, 9 of which (critical, distant, ever-present, forgiving, friendly, kind, loving, punishing, wrathful) were taken from the Baylor Religion Survey (2005) and 3 (generous, unpredictable, demanding) were formulated in a similar way on a basis of another of our pilot research. Participants chose from four possible answers: “very well” (1); “somewhat well” (2); “not very well” (3); or “not at all” (4) to mark how well the adjectives describe God (version for religious respondents) or how well these adjectives could describe the God image of a religious person (version for non-religious respondents). The score for the items expressing a positive image of God was reverted, and a total Positive God image score was calculated, with a higher score corresponding to a more positive God image.

Spirituality was measured only in religious respondents and was assessed using the Daily Spiritual Experience Scale (DSES), which measures the frequency of ordinary experiences of connection with the transcendent in daily life (Underwood, 2006). The questions are focused on frequency of spiritual feelings and experiences for example “I feel God’s presence” or “I experience a connection to all of life” with possible answers “many times a day”, “every day”, “most days”, “some days”, “once in a while” and “never”. An adapted, 15-item version (Malinakova et al., 2018) of the scale was used in this study. For the purpose of a larger part of our analyses we used the total score of the scale as a continuous variable. Only for the last analysis the DSES score was dichotomised in the middle, so the respondents with 51 or less points were classified as *non-spiritual*, with the rest as *spiritual*. Cronbach’s alpha was 0.92 in our sample.

Religiosity and spirituality (dichotomised DSES) were finally combined into one composite variable with three categories of respondents: non-religious; religious/spiritual; religious/non-spiritual.

Statistical analysis

First, the background characteristics of the sample were described. The distribution of the score of the RSES questionnaire was evaluated by histograms, and its normality was verified by Shapiro-Wilk’s normality test. Since the data did not meet the assumption of a normal distribution, non-parametric methods were used for the statistical analyses. In order to evaluate the differences in mean RSES score in different sociodemographic groups, the Mann-Whitney U test or the Kruskal-Wallis test was performed. For p values from multiple group comparisons Bonferroni correction was used. The sociodemographic differences between religious and non-religious respondents were assessed using a chi-square test and a Test of Proportions (Z-test). In the second step, the mutual relationship between all the independent variables of this study was assessed with the Spearman’s rank order correlation (r_s) using binary variables or, where available, scale

Table 1 Description of the study population

	Total sample		RSES score		p-value	Religious ^a		Non-religious		p-value
	n	%	Mean	SD		n	%	n	%	
Gender										
1. Female	338	72.8	29.31	5.01	p<0.05	289	74.7	49	63.6	p<0.05
2. Male	126	27.2	28.00	5.49		98	25.3	28	36.4	
Age										
1. 15-29 years old	279	60.1	27.54	5.52	p<0.01 (1-2* 1-3*)	223	57.6	56	72.7	
2. 30-44 years old	109	23.5	29.50	5.14		98	25.3	11	14.3	
3. 45-59 years old	68	14.7	29.79	4.63		59	15.2	9	11.7	
4. 60-90 years old	8	1.7	29.00	5.81		7	1.8	1	1.3	
Marital status										
1. Single/Divorced/Widow-widower	333	71.8	28.01	5.55	p<0.05	269	69,5	64	83.1	p<0.05
2. Married	131	28.2	29.24	4.87		118	30,5	13	16.9	
Highest education achieved										
1. Elementary school	46	9.9	27.28	5.54	p<0.05	37	9.6	9	11.7	
2. Secondary vocational school	16	3.4	27.56	6.00		13	3.4	3	3.9	
3. Secondary school with graduation	222	47.8	27.84	5.65		176	45.5	46	59.7	
4. Institute of Higher Education	180	38.8	29.34	4.84		161	41.6	19	24.7	
Religious attendance^b										
1. Attending			27.90	6.11	n.s.	275	59.3			
2. Non-attending			28.24	5.09		112	24.1			
Prayer^b										
1. Praying at least 10 mins a day			27.58	6.05	n.s.	249	53.7			
2. Praying less than 10 mins a day			28.45	4.99		138	29.7			
Total	464	100	28.36	5.39		387	83.4	77	16.6	

Note: ^aIndependently from church attendance, ^bOnly for religious respondents, n.s. = non-significant; *p < 0.05; **p < 0.01
Missing cases per variable: Religious attendance = 77; Prayer = 77

variables. In the third step, the associations of self-esteem with 6 aspects of religiosity/spirituality were assessed using a binary logistic regression model, first crude and then, based on the comparison of the sociodemographic groups, adjusted for gender, age, marital status and educational level. Logistic regression was chosen because of the non-normal distribution of the RSES scores, which was a contraindication for the use of a classical regression analysis. Each of the independent variables was assessed in a separate model. Finally, the associations of a composite R/S variable were assessed using the logistic regression, both crude and adjusted. All analyses were performed using the statistical software package IBM SPSS version 21.

RESULTS

The background characteristics of the sample are presented in Table 1. The average spirituality (DSES) score was 56.4 (SD=12.96); the average N-RCOPE score was 24.4±2.93, and the mean Positive God image score was 38.6±5.26. The groups of religious and non-religious respondents differed significantly in gender, marital status and education ($p < 0.05$). The respondents in the non-religious group were also significantly younger (mean age 27.9; SD=11.72) than the respondents in the religious group (mean age 31.3; SD=12.81; $p < 0.05$).

The results of the comparison of the mean scores of the RSES scale between sociodemographic groups showed significantly higher levels of self-esteem among men ($p < 0.05$), the age categories ($p < 0.05$), married participants ($p < 0.05$) and groups that differed in education ($p < 0.05$). Religious respondents did not differ significantly from non-religious respondents in their mean RSES scores. Similarly, there were no significant differences in RSES scores when we assessed the frequency of religious attendance and the frequency of prayer.

Table 2 shows correlations between the independent variables of the study (with the exception of religiosity, which was used as the criterion for asking other R/S questions). The strongest correlations were observed for the DSES. In contrast, the N-RCOPE showed only weak or non-significant correlations.

Table 2 Correlations between the independent variables of the study
(includes only religious respondents)

	Religious attendance	Prayer	Positive God image	DSES
Prayer	.52***			
Positive God image	.23***	.22***		
DSES ^a	.12*	.33***	.37***	
N-RCOPE ^b	-.09	-.01	.21***	.10

Notes: ^aDaily Spiritual Experience Scale, ^bNegative Religious Coping;

Missing cases per variable: Religious attendance = 77; Prayer = 77, N-RCOPE = 77, DSES = 161.

* $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$

Table 3 shows the associations of dichotomized self-esteem with six aspects of R/S. In general, the results were similar both for the crude and adjusted assessment of these associations. There were no significant results for the association with religious attendance. Religious respondents had an approximately 60% lower chance of having good self-esteem; however, the other aspects of R/S showed associations in the other direction. Regular prayer, spirituality, a low level of religious struggles and a positive image of God were associated with higher self-esteem, with odds ratios (ORs) ranging from 1.28 to 2.16.

Table 3 Associations of self-esteem with six aspects of R/S: results of binary logistic regression, both crude and adjusted for age, gender, marital status and education level, leading to odds ratios (ORs) with 95% confidence intervals (95% CI)

	Self-esteem			
	Crude		Adjusted	
	OR	95% CI	OR	95% CI
Religiosity (yes vs. no)	0.46*	0.23-0.93	0.40*	0.20-0.83
Religious attendance (yes vs. no)	1.44	0.88-2.35	1.23	0.73-2.07
Prayer (yes vs. no)	1.93**	1.20-3.09	1.76*	1.07-2.91
DSES (per SD) ^a	1.78**	1.28-2.48	1.83**	1.29-2.59
N-RCOPE (per SD) ^b	2.16***	1.67-2.78	2.16***	1.66-2.80
Positive God image (per SD)	1.27*	1.03-1.56	1.28*	1.03-1.59

Notes: ^aDaily Spiritual Experience Scale, ^bNegative religious coping;
p* < 0.05; *p* < 0.01; ****p* < 0.001

Missing cases per variable: Religious attendance = 77; Prayer = 77, N-RCOPE = 77, DSES = 161.

Table 4 offers additional information to Table 3 by presenting associations of three combinations of R and S with self-esteem. Compared to non-religious respondents, the religious/spiritual respondents did not differ significantly, while religious non-spiritual respondents had approximately 79% lower chance of having good self-esteem.

Table 4 Associations of self-esteem with a combined R/S: results of binary logistic regression, both crude and adjusted for age, gender and education level, leading to odds ratios (ORs) with 95% confidence intervals (95% CI)

	n	%	Self-esteem			
			Crude		Adjusted	
			OR	95% CI	OR	95% CI
Non-religious	77	20.3	1		1	
Religious/spiritual	191	50.3	0.62	0.29-1.32	0.57	0.26-1.25
Religious/non-spiritual	112	29.5	0.27**	0.13-0.58	0.21***	0.10-0.48

Notes: ***p* < 0.01; ****p* < 0.001

DISCUSSION

The purpose of our study was to examine the associations of different aspects of R/S with self-esteem. Results showed significantly higher levels of self-esteem among certain sociodemographic groups, such as men, age categories between 30 and 59 years, married respondents and participants with higher education. The main findings of our study correspond to our research hypotheses, i.e., that the associations of self-esteem with R/S will differ in various aspects of R/S and that spirituality will be more strongly associated with self-esteem than religiosity. Our study also showed that regular prayer, high spirituality, a low level of religious struggles and a positive image of God were positively associated with self-esteem. In contrast, participants who declared themselves to be religious were more likely to have lower self-esteem and we found no significant associations among religious attendance and self-esteem. However, a combination of religiosity and spirituality showed that while religious/spiritual respondents did not differ significantly from non-religious respondents, reli-

gious/non-spiritual respondents had approximately 79% lower chance of having good self-esteem.

Our findings that men have better chance of having high self-esteem agree with previous studies (Kling et al., 1999; Magee & Upenieks, 2019). Bleirdon (2016) conducted a cross-cultural study across 48 nations and found that across the studied nations, men had higher levels of self-esteem than women. Only a few studies did not observe a significantly higher level of self-esteem among men (Josephs et al., 1992). Sociocultural factors (stereotypes and socially learned gender roles) are the common explanation of men's higher self-esteem (Bleidorn et al., 2016). Some studies have also examined biological sources (hormonal influences) (Williams & Currie, 2000).

Bleirdon (2016) also revealed that self-esteem increases from late adolescence to middle adulthood, as in the case of this study. He ascribes this to biological and socioeconomic factors (health, mastery of social challenges, job). Our other finding, that marital status is also associated with self-esteem, is also consistent with prior research (Macdonald et al., 1987) and can possibly be explained by the perceived success in social roles. Our study affirmed the association of higher levels of self-esteem to higher education. There are two possible explanations for this finding. First, people with higher self-esteem may be more successful in school and later in their profession than people with lower self-esteem (Magnusson & Nermo, 2018). Second, people with higher education may be more successful in their job and thus may often be treated with more respect and consequently also feel higher self-esteem (Twenge & Campbell, 2002).

We found that spirituality was associated with higher self-esteem, which is consistent with the findings of other studies (Cheadle & Schetter, 2018; e.g. Hayman et al., 2007). Spirituality supports a positive worldview and attitudes (Kress et al., 2015) and contributes to better mental health (Dein, 2018). Furthermore, spirituality can provide coping resources (Larson & Larson, 2003) and reduce the negative effect of stress (Yadav et al., 2017). These positive factors lead to more optimistic perception of the world and of the self. However, as in the case of negative religious coping, the causality can also be the inverse. People with higher self-esteem could experience a more intense connection to the self, to others and feelings of happiness, which may lead to a more intense experiencing of spirituality. Further research is needed in this area.

We found that self-esteem is also associated with the God image. This finding is also consistent with prior research on self-esteem and spirituality. A good image of God can be a significant source of high self-esteem (Sherkat & Ellison, 1999), suggesting that perceiving God as loving and empathetic provides emotional support, thus improving the level of self-esteem (Smith & Crosby, 2017). By contrast, perceiving God as critical and distant is related to personal uncertainty, insecurity and doubts.

We found that results on religiosity are not analogous with the results on spirituality, as people declaring themselves as religious had more than a 50% lower chances of having high self-esteem. This discrepancy between findings on spirituality and religiosity has also occurred in some previous studies (Veselska et al., 2018). The explanation of this discrepancy could be a specific environment of the Czech Republic, which is one of the most secular countries in the world (Strielkowski & Cabelkova, 2015). The cultural environment deeply affects how people evaluate themselves (Markus & Kitayama, 1991) and more studies have shown that religious people had a higher level of well-being (Diener et al., 2011), life satisfaction (Okulicz-Kozaryn, 2010), physical health (Stavrova, 2015) and mental health (Van de Velde et al., 2017) only in religious

countries and not in nonreligious ones. On the other hand, spirituality represents a concept that is often presented separately from any organised religion and could thus be more acceptable in non-religious countries. Thus, if this presumption is correct, we can expect that religiosity and spirituality may in a secular country also differ in their relationship with self-esteem. Consequently, cohesion to the shared culture has an enhancing effect on self-esteem in general. We can generalize that people living in a culture where being religious does not represent a common framework possibly do not experience the same feeling of sharing key norms and values with their environment and therefore do not benefit from this enhancing effect on self-esteem. Similarly, these reasons could also explain why we failed to find a significant association of self-esteem with religious attendance. This may be also due to the diversity and heterogeneity of the reasons why people attend church (VanderWeele, 2017).

We also found a positive association between frequency of prayer and self-esteem, similarly as some other authors. Recent research has reported two conflicting theories, both supported by research studies. One theory assumes a positive correlation between self-esteem and prayer, concluding on the evidence that self-esteem is enhanced by positive relationships (Cameron & Granger, 2019) and that prayer reinforces one's relationship with God (Baesler, 2002). Prayer is a form of interaction and communication that provides support and increases self-esteem (Sharp, 2010). The explication could also be that meditation promotes harmony between implicit and explicit self-esteem (Koole et al., 2009). A second theory anticipates a negative correlation, considering prayer as an opportunity to express personal dissatisfaction and disappointment (Francis & Gibbs, 1996). Our findings support the first theory.

Our findings showed that negative religious coping was associated with lower levels of self-esteem. These results are consistent with previous research, which reported that religious struggles correlate with a low level of self-esteem (Ghorbani et al., 2017). The explanation could be that negative religious coping promotes feelings of spiritual unworthiness, which deteriorates individual perception of the self (Latzer et al., 2015) and thus lowers one's self-esteem. However, another explanation could be linked to the fact that low self-esteem can lead to the occurrence of personal religious struggles (Grubbs et al., 2016). As the majority of studies are cross-sectional, we cannot conclude on causality, and longitudinal studies or other types of research are needed to further clarify its direction.

Our results suggest that the distinction of different subgroups in R/S can be a clue to a better understanding of the relationship between self-esteem and R/S. The association of self-esteem with three combinations of religiosity and spirituality has led to different results for each subgroup. Compared to non-religious respondents, the religious/spiritual respondents did not differ significantly, while religious/non-spiritual respondents had significantly lower chances of having good self-esteem. Recent research has reported similar heterogeneity in multiple domains. Religious but non-spiritual adolescents are more likely to show a higher occurrence of a health-risk behaviour than other groups (Malinakova, Kopcakova et al., 2019) and may have more difficult family communication (Malinakova, Trnka et al., 2019). Prior research has also revealed that respondents who were inconsistent in their religiosity and spirituality have more adverse health outcomes (King et al., 2013), especially in the domain of mental health (Malinakova et al., 2020). The explanation could be that disharmony of external religiosity (church attendance) and daily lived spirituality may lead to disharmony in other domains of life. This research proves the need to study R/S not as one construct, but as a multidimensional concept.

STRENGTHS AND LIMITATIONS

The biggest strength of this study is that it provides a unique insight into the relation between self-esteem and R/S in a secular environment. Moreover, it is not limited only to religiosity or spirituality in general, but it takes into consideration the multidimensionality of R/S and therefore includes different aspects of R/S.

Several limitations should also be noted. First, the secular conditions of the Czech Republic make the use of representative samples in research difficult due to the very low prevalence of religious respondents and often reluctance among non-religious respondents to answer questions on R/S. Therefore, our sample is not representative, but was gathered as an online sample using the snowball method, which means that in sociodemographic aspects it differs significantly from the Czech population. Second, the participants could finish answering the survey at any time, which led a relatively high number of missing values for some variables. Third, this study used only self-report measures, which are, when measuring self-esteem, occasionally called into question (Baumeister & Vohs, 2018) and could be influenced by a social desirability bias. Fourth, due to a lack of studies with the same research approach, it is difficult to compare our findings with that of other studies, which consequently limits the interpretations. A last limitation of our study is that it is a cross-sectional study and so we cannot come to any conclusions on causality.

IMPLICATIONS

Our findings provide better understanding of the relation between self-esteem and R/S, which are both beneficiary to an individual's life. Understanding these associations might therefore be important for mental health outcomes. Our study contributes to other studies that prove that religiosity and spirituality are multidimensional concepts and need to be assessed in this way. The results of research on R/S are also strongly influenced by the instrument used.

It is important to distinguish between spirituality and religiosity, especially in secular countries, such as the Czech Republic, where people often declare themselves spiritual but not religious (Malinakova, Kopcakova et al., 2019; Zwingmann et al., 2011).

As our study was cross-sectional, further longitudinal research could lead to a better understanding of the causality and mechanisms of the formation of high self-esteem.

CONCLUSION

Our findings suggest that different dimension of R/S are associated with higher levels of self-esteem, with the exception of religiosity and religious attendance and with exception of respondents, who were religious, but not spiritual. The results of our study resonate with previous research in this area, but they identify more precisely the relationship between self-esteem and different aspects of R/S in the context of a secular country. They also point out to a risk of simplification of a research design, as they show that different aspects of R/S lead to different findings, in some cases even contradictory.

REFERENCES

- Baesler, E. J. (2002). Prayer and relationship with God II: Replication and extension of the relational prayer model. *Review of Religious Research, 44*(1), 58-67.
- Baumeister, R. F., & Vohs, K. D. (2018). Revisiting our reappraisal of the (surprisingly few) benefits of high self-esteem. *Perspectives on Psychological Science, 13*(2), 137-140.
- Blatný, M., & Osecká, L. (1994). Rosenberg Scale of self-esteem - structure of the global relation towards the self. *Československá psychologie, 38*(6), 481-488.

- Bleidorn, W., Arslan, R. C., Denissen, J. J. A., Rentfrow, P. J., Gebauer, J. E., Potter, J., & Gosling, S. D. (2016). Age and gender differences in self-esteem—a cross-cultural window. *Journal of Personality and Social Psychology, 111*(3), 396-410.
- Cameron, J. J., & Granger, S. (2019). Does self-esteem have an interpersonal imprint beyond self-reports? A meta-analysis of self-esteem and objective interpersonal indicators. *Personality and Social Psychology Review, 23*(1), 73-102.
- Cheadle, A. C. D., & Schetter, C. D. (2017). Untangling the mechanisms underlying the links between religiousness, spirituality, and better health. *Social and Personality Psychology Compass, 11*(2).
- Cheadle, A. C. D., & Schetter, C. D. (2018). Mastery, self-esteem, and optimism mediate the link between religiousness and spirituality and postpartum depression. *Journal of Behavioral Medicine, 41*(5), 711-721.
- Dein, S. (2018). Against the stream: religion and mental health - the case for the inclusion of religion and spirituality into psychiatric care. *Bjpsych Bulletin, 42*(3), 127-129.
- Diener, E., Tay, L., & Myers, D. G. (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.
- Fiala, P. (2009). Laboratory of secularisation church and religion in the Czech Republic. *Osteuropa, 59*(6), 93-100.
- Francis, L. J., & Gibbs, D. (1996). Prayer and self-esteem among 8- to 11-year-olds in the United Kingdom. *Journal of Social Psychology, 136*(6), 791-793.
- Francis, L. J., Gibson, H. M., & Robbins, M. (2001). God images and self-worth among adolescents in Scotland. *Mental Health, Religion & Culture, 4*(2), 103-108.
- Furstova, J., Malinakova, K., Sigmundova, D., Tavel, P. (2020). Czech out the atheists: A representative study of religiosity in the Czech Republic. *The International Journal for the Psychology of Religion*. Under Review.
- Ghorbani, N., Watson, P. J., Tahbaz, S., & Chen, Z. J. (2017). Religious and psychological implications of positive and negative religious coping in Iran. *Journal of Religion & Health, 56*(2), 477-492.
- Grubbs, J. B., Wilt, J., Stauner, N., Exline, J. J., & Pargament, K. I. (2016). Self, struggle, and soul: Linking personality, self-concept, and religious/spiritual struggle. *Personality and Individual Differences, 101*, 144-152.
- Hayman, J. W., Kurpius, S. R., Befort, C., Nicpon, M. F., Hull-Blanks, E., Sollenberger, S., & Huser, L. (2007). Spirituality among college freshmen: Relationships to self-esteem, body image, and stress. *Counseling and Values, 52*(1), 55-70.
- Hooker, S. A., Masters, K. S., & Carey, K. B. (2014). Multidimensional assessment of religiousness/spirituality and health behaviors in college students. *International Journal for the Psychology of Religion, 24*(3), 228-240.
- Janu, A., Malinakova, K., Kosarkova, A., Furstova, J., & Tavel, P. (2019). Psychometric evaluation of the Negative Religious Coping (NRC) Scale of the Brief RCOPE in the Czech environment. *Mental Health Religion & Culture, 22*(6), 614-625.
- Josephs, R. A., Markus, H. R., & Tafarodi, R. W. (1992). Gender and self-esteem. *Journal of Personality and Social Psychology, 63*(3), 391-402.
- Joshanloo, M., & Daemi, F. (2015). Self-esteem mediates the relationship between spirituality and subjective well-being in Iran. *International Journal of Psychology, 50*(2), 115-120.
- King, M., Marston, L., McManus, S., Brugha, T., Meltzer, H., & Bebbington, P. (2013). Religion, spirituality and mental health: results from a national study of English households. *British Journal of Psychiatry, 202*(1), 68-73.
- Kling, K. C., Hyde, J. S., Showers, C. J., & Buswell, B. N. (1999). Gender differences in self-esteem: A meta-analysis. *Psychological Bulletin, 125*(4), 470-500.
- Koole, S. L., Govorun, O., Cheng, C. M., & Galucci, M. (2009). Pulling yourself together: Meditation promotes congruence between implicit and explicit self-esteem. *Journal of Experimental Social Psychology, 45*(6), 1220-1226.
- Kress, V. E., Newgent, R. A., Whitlock, J., & Mease, L. (2015). Spirituality/religiosity, life satisfaction, and life meaning as protective factors for nonsuicidal self-injury in college students. *Journal of College Counseling, 18*(2), 160-174.
- Larson, D. B., & Larson, S. S. (2003). Spirituality's potential relevance to physical and emotional health: A brief review of quantitative research. *Journal of Psychology and Theology, 31*(1), 37-51.
- Latzer, Y., Weinberger-Litman, S. L., Gerson, B., Rosch, A., Mischel, R., Hinden, T., ... Silver, J. (2015). Negative religious coping predicts disordered eating pathology among orthodox jewish adolescent girls. *Journal of Religion & Health, 54*(5), 1760-1771.
- Lu, H. H., Li, X. T., Wang, Y. A., Song, Y. Y., & Liu, J. (2018). The hippocampus underlies the association between self-esteem and physical health. *Scientific Reports, 8*.

- Macdonald, N. E., Ebert, P. D., & Mason, S. E. (1987). Marital-status and age as related to masculine and feminine personality dimensions and self-esteem. *Journal of Social Psychology, 127*(3), 289-298.
- Magee, W., & Upenieks, L. (2019). Gender differences in self-esteem, unvarnished self-evaluation, future orientation, self-enhancement and self-derogation in a US national sample. *Personality and Individual Differences, 149*, 66-77.
- Magnusson, C., & Nermo, M. (2018). From childhood to young adulthood: the importance of self-esteem during childhood for occupational achievements among young men and women. *Journal of Youth Studies, 21*(10), 1392-1410.
- Malinakova, K., Kopcakova, J., Madarasova Geckova, A., van Dijk, J. P., Furstova, J., Kalman, M., ... Reijneveld, S. A. (2019). "I am spiritual, but not religious": Does one without the other protect against adolescent health-risk behaviour? *International Journal of Public Health, 64*(1), 115-124.
- Malinakova, K., Tavel, P., Meier, Z., van Dijk, J. P. & Reijneveld, S. A. (2020). Religiosity and mental health: A contribution to understanding the heterogeneity of research findings. *International Journal of Environmental Research and Public Health, 17*(2), 494.
- Malinakova, K., Trnka, R., Bartuskova, L., Glogar, P., Kascakova, N., Kalman, M., ... Tavel, P. (2019). Are adolescent religious attendance/spirituality associated with family characteristics? *International Journal of Environmental Research and Public Health, 16*(16), 2947.
- Malinakova, K., Trnka, R., Sarnikova, G., Smeal, V., Furstova, J., & Tavel, P. (2018). Psychometric evaluation of the Daily Spiritual Experience Scale (DSES) in the Czech environment. *Československá psychologie, 62*, 100-113.
- Markus, H. R., & Kitayama, S. (1991). Culture and self-esteem – Implications for cognition, emotion, and motivation. *Psychological Review, 98*(2), 224-253.
- Okulicz-Kozaryn, A. (2010). Religiosity and life satisfaction across nations. *Mental Health, Religion & Culture, 13*(2), 155-169.
- Orth, U., & Robins, R. W. (2014). The development of self-esteem. *Current Directions in Psychological Science, 23*(5), 381-387.
- Orth, U., Robins, R. W., Meier, L. L., & Conger, R. D. (2016). Refining the vulnerability model of low self-esteem and depression: Disentangling the effects of genuine self-esteem and narcissism. *Journal of Personality and Social Psychology, 110*(1), 133-149.
- Orth, U., Robins, R. W., Widaman, K. F., & Conger, R. D. (2014). Is low self-esteem a risk factor for depression? Findings from a longitudinal study of Mexican-origin youth. *Developmental Psychology, 50*(2), 622-633.
- Pargament, K., Feuille, M., & Burdzy, D. (2011). The Brief RCOPE: Current psychometric status of a short measure of religious coping. *Religions, 2*(1), 51-76.
- Rican, P., & Janosova, P. (2010). Spirituality as a basic aspect of personality: A cross-cultural verification of Piedmont's Model. *International Journal for the Psychology of Religion, 20*(1), 2-13.
- Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, N.J.: Princeton University Press.
- Sharp, S. (2010). How does prayer help manage emotions? *Social Psychology Quarterly, 73*(4), 417-437.
- Sherkat, D. E., & Ellison, C. G. (1999). Recent developments and current controversies in the sociology of religion. *Annual Review of Sociology, 25*, 363-394.
- Smith, E. I., & Crosby, R. G. (2017). Unpacking religious affiliation: Exploring associations between Christian children's religious cultural context, God image, and self-esteem across development. *British Journal of Developmental Psychology, 35*(1), 76-90.
- Spousta, J. (2002). Changes in religious values in the Czech Republic. *Sociologický časopis, 38*(3), 345-363.
- Stavrova, O. (2015). Religion, self-rated health, and mortality: Whether religiosity delays death depends on the cultural context. *Social Psychological and Personality Science, 6*(8), 911-922.
- Strielkowski, W., & Cabelkova, I. (2015). Religion, culture, and tax evasion: Evidence from the Czech Republic. *Religions, 6*(2), 657-669.
- ten Kate, J., de Koster, W., & van der Waal, J. (2017). The effect of religiosity on life satisfaction in a secularized context: Assessing the relevance of believing and belonging. *Review of Religious Research, 59*(2), 135-155.
- Tung, E. S., Ruffing, E. G., Paine, D. R., Jankowski, P. J., & Sandage, S. J. (2018). Attachment to God as mediator of the relationship between God representations and mental health. *Journal of Spirituality in Mental Health, 20*(2), 95-113.
- Twenge, J. M., & Campbell, W. K. (2002). Self-esteem and socioeconomic status: A meta-analytic review. *Personality and Social Psychology Review, 6*(1), 59-71.
- Underwood, L. (2006). Ordinary spiritual experience: Qualitative research, interpretive guidelines, and population distribution for the

- Daily Spiritual Experience Scale. *Archive for the Psychology of Religion*, 28(1), 181-218.
- Van de Velde, S., Van der Bracht, K., & Buffel, V. (2017). The relation between religion and depression in Europe: The moderating role of the religious context. *International Journal of Comparative Sociology*, 58(6), 515-532.
- VanderWeele, T. J. (2017). Causal effects of religious service attendance? *Social Psychiatry and Psychiatric Epidemiology*, 52(11), 1331-1336.
- Veselska, Z. D., Jirasek, I., Veselsky, P., Jiraskova, M., Plevova, I., Tavel, P., & Madarasova Geckova, A. (2018). Spirituality but not religiosity is associated with better health and higher life satisfaction among adolescents. *International Journal of Environmental Research and Public Health*, 15(12).
- Williams, J. M., & Currie, C. (2000). Self-esteem and physical development in early adolescence: Pubertal timing and body image. *Journal of Early Adolescence*, 20(2), 129-149.
- Yadav, R., Khanna, A., & Singh, D. (2017). Exploration of relationship between stress and spirituality characteristics of male and female engineering students: A comprehensive study. *Journal of Religion & Health*, 56(2), 388-399.
- Zwingmann, C., Klein, C., & Bussing, A. (2011). Measuring religiosity/spirituality: Theoretical differentiations and categorization of instruments. *Religions*, 2(3), 345-357.

SOUHRN

Vztah mezi sebevědomím a různými aspekty religiozity a spirituality

Cíle. Religiozita a spiritualita (R/S) jsou spojeny s mnoha oblastmi lidského života a mohou

mít pozitivní vliv i na lidskou sebeúctu. Přesto není jisté, zda je větší intenzita náboženského a spirituálního prožívání spojena s vyšší sebeúctou i v ateistických zemích. Cílem studie bylo zkoumat vztahy různých aspektů R/S v sekulárním prostředí.

Soubor. Výzkumný vzorek tvořilo 464 českých respondentů starších 15 let (průměrný věk 30,7 let; SD = 12,63; 27,2 % muži). Prostřednictvím online dotazníku byla měřena sebeúcta, religiozita, náboženská účast, četnost modlitby, míra náboženských zápasů, obraz Boha a spiritualita. *Výsledky.* Pravidelná modlitba, spiritualita (SD), nižší míra náboženských zápasů (SD) a pozitivní obraz Boha (SD) byly spojeny s vyšší sebeúctou, s odds ratio v rozmezí od 1,28 do 2,16 ($p < 0,05$ až $p < 0,001$). Oproti těm nereligiózním měli religiózní respondenti přibližně o 60 % nižší šanci mít vyšší úroveň sebeúcty ($p < 0,05$). Kombinace R a Š ukázala, že zatímco religiózní, ale nespirtuální respondenti se od těch nereligiózních v míře sebeúcty výrazně nelišili, religiózní, ale nespirtuální respondenti měli přibližně o 79 % nižší pravděpodobnost dobré sebeúcty ($p < 0,001$).

Omezení studie. Tato studie nepracuje s reprezentativním vzorkem populace a výsledky se tudíž nedají zobecnit na celkovou populaci. Jedná se o první studii užívající tento přístup, což ztěžuje interpretaci výsledků. Navíc se jedná o průřezovou studii, nelze tedy dělat závěry ohledně kauzality a studie využívala pouze sebehodnotící dotazníky, které mohou být zkresleny tendencí odpovídat sociálně žádoucím způsobem.