The Effects of Institution Religious Affiliation on Sexual Minority and Religious Students' Counseling Outcome

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Abstract

Given the dearth of literature addressing therapy outcome for religious and sexual minority individuals, we sought to understand how religious and sexual minority clients fare in therapy, especially considering the religious affiliation status of the school. Data from 29,548 participants on the Standardized Data Set Questionnaire and CCAPS-34 and -62 were analyzed from the 2012-2014 CCMH data set. We use hierarchical linear modeling to examine the differences in rates of change. Results indicate faster rates of change among non-religious individuals but no difference in rates of change between heterosexual and sexual minority clients. Rates of change also did not differ between centers. Future studies should use psychologists' religious affiliation as a predictor of outcome. Importance of spirituality was not significant.

Background

Sexual Minority Status and Psychology
- Past studies have focused heavily on the implications of reparative therapy and the necessity of affirmative therapy.
- College years are coming out period for many (Evans & Broido, 1999).
- Historical inclusion of homosexuality as a disorder in the DSM.
- Mental health providers are often not properly prepared to work with this population (Anhalt, Morris, Scotti, & Cohen, 2003).

Religion and Psychology
- Dearth of literature on comparative studies of religious and non-religious clients.
- 79% of college students report belief in God and even more reported attendance of religious services (81%) (Astin et al., 2003).
- Academics feel unfavorably toward religious students (Tobin & Weinberg, 2007).
- Religious individuals' skepticism toward secular therapists (Mayers, Leavey, Vallianatou, & Barker, 2007).

Research Questions

Client factors related to religious and sexual identity:
- Does rate of change differ between religious and non-religious or between sexual minority and nonsexual minority clients?
- Does rate of change differ between sexual minority clients who endorse being religious and those who do not?
- Does rates of change differ depending on the client's reported importance of religion/spirituality?
- Does the effect of spirituality on rate of change differ between sexual minority and non-sexual minority clients?

Institution factors related to religion:
- Does rates of change in therapy differ between clients at religious and non-religious institutions?
- Do religious clients' and sexual minority clients' rates of change differ between religious and non-religious universities?

Methods

Participants
- 2012-2014 Center for Collegiate Mental Health (CCMH) data set.
- Total of 29, 548 individuals met the inclusion criteria; clients were nested within 74 universities' counseling centers.

Measures
- CCAPS-62 and -34 are multidimensional self-report instrument intended to measure psychological distress in college counseling centers (Locke et al., 2011).
- Standardized Data Set (SDS) to collect demographic, academic, and mental health history.

Procedure
- The distress index (DI) was included from both CCAPS-62 and -34 administrations.
- Client sexual identity (heterosexual and LGBQQ) and religious identity (Eastern, Judeo-Christian, and unaffiliated) variables were included as predictors.
- Schools coded as religiously affiliation or unaffiliated and whether or not the school required one or more religious classes (theology, religion, or scripture courses) for graduation.

Statistical Analysis
- Hierarchical linear modeling with three levels:
- Session level (Level 1): each client's DI score was modeled as a function of the log transformed session number.
- Client level (Level 2): modeled predictors of client initial severity (intercept) and client rate of change (slope).
- Center level (Level 3): modeled predictors of a center's religious affiliation and religious class requirements.

Table 1

Table 2.
Parameters from a Random Intercepts and Slopes Model of Growth in Distress Index Scores

Fixed effect	Coefficient	SE	t
For intercept			
Intercept	1.854	0.018	103.72
Client religion- non-religious vs religious	-0.031	0.005	-6.08
Client religion- Eastern vs Judeo Christian	-0.087	0.013	-6.62
Client sexual identity	0.177	0.013	13.30
Center religious affiliation	-0.118	0.035	-3.39
For slope			
Intercept	-0.181	0.010	-17.46
Client religion- non-religious vs religious	0.005	0.002	2.86
Random effect	Variance component		
Level 1 (Sessions within clients)			
Error	0.096		
Level 2 (clients within centers; $N = 29,548$)			
Intercept	0.610		
Slope	0.056		
Level 3 (between centers; $N = 74$)			
Intercept	0.015		
Slope	0.007		

Note. All parameters significant at $p<.01$.

Conclusion

Question 1
- LGBQQ clients presented with higher initial distress than heterosexual clients ($t = 13.30$, $p < .001$).
- Religious clients presented with less distress than non-religious clients ($t = -6.03$, $p < .001$), with clients belonging to Judeo-Christian religions endorsing less distress than clients belonging to Eastern religions ($t = -6.62$, $p < .001$).
- Non-religious clients exhibited faster rates of change than religious clients ($t = 2.86$, $p = .004$).
- Rate of change didn't significantly differ between clients of Judeo-Christian religions and Eastern religions, or between heterosexual and LGBQQ clients.
- No significant interaction effect of sexual identity and religion.

Question 2
- Centers affiliated with a religion had lower mean distress scores than schools not affiliated with a religion ($t = -3.39$, $p = .001$).
- No additional effect of a school requiring a religious class for graduation.
- Average rates of change did not differ between centers at religious universities and those at non-religious universities or between those requiring religious classes and those that do not.

Implications

- Sexual minority individuals fared as well as majority individuals in therapy which may be attributed to general value of training in working with sexual minority clients.
- The faster rate of change among non-religious sample may simply be indicating a regression towards the mean, although not likely given that the sexual minority group did not show the same result.
- No interaction between sexuality and religion because perhaps the benefits of religious affiliation outweighs the cost.
- No significant difference in regards to religious affiliation of institutions could be because religious affiliation of the institution does not equate to religiosity of psychologist.

References

Evans, N. J., & Broido, E. M. (1999). Coming out in college residence halls: Negotiation,meaning making, challenges, supports. *Journal of College Student Development, 40*(6),658-668.

Anhalt, K., Morris, T. L., Scotti, J. R., & Cohen, S. H. (2003). Student perspective on training ingay, lesbian, and bisexual issues: A survey of behavioral clinical psychology programs.*Cognitive and Behavioral Practice, 10*, 255-263. doi:10.1016/S1077-7229(03)80038-X

Astin, A. W., Astin, H. S., Lindholm, J. A., Bryant, A. N., Calderone, S., & Szelényi, K. (2003).*The spiritual life of college students: A national study of college students' search formeaning and purpose*. Los Angeles, CA: Higher Education Research Institute, UCLA.

Mayers, C., Leavey, G., Vallianatou, C., & Barker, C. (2007). How clients with religious orspiritual beliefs experience psychological help-seeking and therapy: A qualitative study.*Clinical Psychology & Psychotherapy, 14*, 317-327. doi:10.1002/cpp.542