

## **Religion and interpersonal guilt: Variations across ethnicity and spirituality**

ELIZABETH J. ALBERTSEN<sup>1</sup>, LYNN E. O'CONNOR<sup>1</sup>,  
& JACK W. BERRY<sup>2</sup>

<sup>1</sup>*The Wright Institute, Berkeley, CA, USA, and* <sup>2</sup>*Virginia Commonwealth University, Richmond, VA, USA*

### **Abstract**

In 246 college students, we found that ethnicity, religious affiliation, and religious or spiritual emphasis were significantly related to guilt. Ethnicities were compared, without regard to religion, on levels of interpersonal guilt, a construct that has been associated with a variety of psychological problems. There were significant differences found between ethnic groups, with Asian Americans higher in maladaptive interpersonal guilt than were European and Latin Americans. There were significant differences between groups of religious or spiritual affiliation, with Catholics and Protestants having higher levels of maladaptive interpersonal guilt than those with no religious affiliation. Within each ethnic group, we examined differences in guilt between religious groups, and between broader identification as religious (but not spiritual), spiritual (but not religious), spiritual and religious, or neither. There were significant differences between both religious affiliation groups and between broader religious or spiritual emphasis within ethnic groups, in interpersonal guilt. These results suggest that religious affiliation and religious or spiritual emphasis are important variables in the measurement of guilt, and guilt is an important construct in understanding people with religious and spiritual involvement. Clinical implications are discussed.

### **Introduction**

Guilt is an important emotion in human experience, which has been viewed as both a destructive and unnecessary result of religion (Ellis, 1980), and as a normal result of living within a social community (Baumeister, Stillwell & Heatherton, 1994; O'Connor, 2000). Because religious experience and attitudes

---

Correspondence: E. J. Albertsen, Valley Mental Health, 5965 South 900 East Suite 240, Salt Lake City, UT, 84121, USA. E-mail: elizabetha@vmh.com.

about religion vary widely among people, interpersonal guilt levels may vary with factors such as religious affiliation, spirituality, and ethnic background. This study undertakes an examination of the relationship between religion and guilt in the United States, comparing across cultures to also examine whether guilt may vary with cultural variation in beliefs and values. In addition, this study undertakes analysis differentiating between people who categorize themselves as spiritual or religious.

### **Interpersonal guilt**

Guilt is an uncomfortable emotion, occurring when a person believes one has done or considers doing something believed to be wrong. Guilt motivates people to make decisions they judge to be morally right. The tendency to experience guilt has been shown to be a fairly stable trait, to which some people are more sensitive than others (Tangney, Wagner, Fletcher & Gramzow, 1992). The work of Tangney has empirically identified an important difference between guilt and shame, where guilt is defined as a negative affective experience resulting from a negative judgment about one's behavior, and shame is a negative judgment about the self. Research on shame-free guilt, that is guilt separated from shameful self-judgments, has demonstrated that basic guilt is adaptive and not correlated with psychopathology (Tangney, 1990; Tangney et al., 1992).

Increasing emphasis has been placed on the importance of understanding interpersonal guilt (Baumeister, Stillwell & Heatherton, 1994; O'Connor, 2000). Interpersonal guilt results from one's belief that he or she has harmed or may harm another person. It activates natural empathy for others that prompts people to make reparation and avoid harming others in the future. This model of interpersonal guilt stems from developmental psychology (Zahn-Waxler & Robinson, 1995), and a cognitive-relational theory of psychodynamics (Weiss & Sampson, 1986).

Interpersonal guilt, however, can become maladaptive when it is excessive, unrealistic, or based on irrational worry about others (Bush, 1989; O'Connor, Berry & Weiss, 1999; Weiss, 1983; Weiss & Sampson, 1986). This type of guilt inhibits and prevents people from pursuing appropriate developmental goals. The beliefs behind this type of guilt are usually unconscious and affect people's lives without their awareness. A common irrational belief is that if a person receives something good, he or she is directly responsible for another person not having received it. Another example is the belief that a person will harm others if he or she performs better than them or obtains a better job than them. Also, such beliefs include the idea that one can omnipotently change or control things that one cannot realistically affect in other people's lives.

Maladaptive interpersonal guilt correlates significantly with a variety of psychological problems, including somatization, obsessive-compulsive symptoms, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation, psychoticism, addiction, pessimism, low self-esteem, jealousy, introversion, and neuroticism (Meehan, O'Connor, Berry, Weiss, Morrison & Acampora,

1996; O'Connor, Berry, Weiss, Buch & Sampson, 1997; O'Connor et al., 1999; Webster, 1998).

Although interpersonal guilt also has a close relationship with shame, there is evidence that interpersonal guilt has an even stronger relationship with psychopathology, such as depression, than does shame. Unlike basic, shame-free guilt, which does not correlate with psychopathology, maladaptive interpersonal guilt has correlations with psychopathology. These correlations remain significant even after statistically removing the overlap interpersonal guilt has with shame (O'Connor et al., 1997, 1999).

### *Ethnicity and interpersonal guilt*

Guilt is thought to be based in part on culturally transmitted beliefs about interpersonal relationships, social expectations, and moral values. The examination of differences in guilt proneness across cultures has emphasized Hofstede's (1984) theoretical model of collectivistic and individualistic cultures. An extension of this theory is that people from collectivistic cultures will be more sensitive to guilt related to harm to others compared with people from individualistic cultures. Consistent with this model, a higher interpersonal guilt has been measured in Asian Americans, who are categorized as more collectivistic, compared with European Americans, who are categorized as more individualistic (Albertsen, 2002; Asano, 1998; Zane, Sue, Hu & Kwon, 1991). Albani et al. (in press) found a higher interpersonal guilt in East German women, who were categorized as more collectivistic, compared with West German women.

Murphy's (1974) study of depressed Canadians found a higher report of general guilt among the individualistic British Canadians than the collectivistic French Canadians. He proposed the explanation that individualistic groups may be more susceptible to self-blame for failure to occur. Because Murphy was not measuring interpersonal guilt specifically, it is important to note that guilt for one's personal failures may be correlated with individualistic cultures and does not form a contradiction with the generalization that interpersonal guilt seems to be correlated with more collectivistic cultures.

Although there have not been any published studies on levels of interpersonal guilt in Latin American groups, people from Mexico and other Latin American countries have been characterized as collectivistic (Fulgini, Tseng & Lam, 1999; Janoff-Bulman & Leggatt, 2002; Stephan, Stephan & De Vargas, 1996). As such, it would be expected that Latin Americans, like Asian Americans, would score higher than European Americans on interpersonal guilt.

### *Religion and guilt*

Although religion has been shown to be strongly related to a variety of psychological and health variables (Koenig, McCullough & Larson, 2001), few studies have taken religion into account in examination of cross-cultural differences in guilt proneness. Religion influences many aspects of a person's life

(Allport, 1950), including moral beliefs and social expectations that might be related to guilt. A recent Gallup report described the United States population as predominantly religious, with only 5% of the population reporting no religious preference (Gallup Foundation, 1997). It has sometimes been suggested that religion fosters guilt in people (Ellis, 1980), and there has been recognition of a maladaptive, scrupulous, or penitent personality (Ciarrocchi, 1995; Spero, 1980; Van Ornum, 1997) with excessive worry about sin and guilt.

A few empirical studies have examined the relationship between guilt and religious participation, although too rarely has the specific type of guilt been clearly defined. Based on a review of over 200 studies, Gartner, Larson, and Allen (1991) suggested that low levels of religiosity are associated with impulse-control disorders, including drug and alcohol use, suicide, and anti-social behavior, whereas high levels of religiosity are more often associated with disorders of overcontrol, such as excessive guilt. Studies have reported positive correlations between religiosity and general guilt (Luyten, Corveleyn & Fontaine, 1998), religiosity and guilt related to sexual, hostile, or immoral impulses (Fehr & Stamps, 1979), and religiosity and adaptive, shame-free guilt (Albertsen, 2002). However, research has not shown a direct relationship between religiosity and maladaptive interpersonal guilt (Albertsen, 2002).

Research on specific religious beliefs and attitudes has yielded mixed results regarding guilt. Watson, Morris, and Hood (1988) suggested that the perception of grace, or unconditional divine forgiveness, may mitigate individuals' guilt feelings, and found a negative association between such belief and religious guilt, as predicted. However, Ratanasiripong (1996) found a positive correlation between such belief and adaptive, shame-free guilt. Ratanasiripong suggested that the positive relationship may be explained theoretically by the supposition that without a personal concept of guilt or wrong-doing, there is no need for grace. In other words, a strong existence of guilt in an individual may possibly set the stage for needing to believe in grace.

Religious orientation as intrinsic or extrinsic is a concept in religious research that has been shown to have a connection to report of mystical experience. Allport and Ross (1967) defined intrinsic orientation as motivation for religion as engaging in religion as a defining part of one's life, whereas extrinsic motivation for religion was engaging in religion due to its usefulness and for personal gain. Allport and Ross suggested that intrinsic motivation for involvement in religion would be related to having meaningful experiences related to religion, which was supported in later research that showed intrinsic orientation to have a positive correlation with mystical experience (Hood, 1970, 1972, 1973, 1976).

Only a few studies have examined guilt across religious traditions, with the Catholic religious tradition typically yielding higher levels of guilt. In a Dutch sample, feelings of guilt were more prevalent in Roman Catholics than in Calvinists or non-church members (Braam, Sonnenberg, Beekman, Deeg & Van-Tilburg, 2000). It should be noted that the setting of Braam's study in the Netherlands may reduce generalizability to people in the United States. London, Schulman, and Black (1964) found a higher guilt in Protestant and

Catholic samples compared with a Jewish sample in the United States' Midwest region. In the only published study comparing religious traditions specifically on maladaptive interpersonal guilt, Catholics and Lutherans were significantly higher than Buddhists and Episcopalians in the United States (Albertsen, 2002). Such studies suggest that certain religious traditions, such as Catholicism, may tend to foster higher levels of guilt among their members, or that different religious traditions attract members—on either the community or the individual scale—with different levels of guilt.

### *Spirituality and guilt*

There is increasing interest in clarifying the distinction between religion and spirituality in research and theoretical discussion (Elkins, Hedstrom, Hughes, Leaf & Saunders, 1988). While religion generally refers to attitudes and identity pertaining to an organized set of beliefs and affiliation with a religious institution (Shafranske & Malony, 1990), spirituality is generally understood to reflect beliefs and practices aimed at valuing and connecting with the existence of transcendent, non-physical, spiritual elements (Elkins et al., 1988; Piedmont, 1999). Whether religion and spirituality tend to occur together or exclusive of each other is far from clear. Many studies that have examined spirituality and religiosity as separate constructs have not examined the question of how much overlap exists between them (Tloczynski, Knoll & Fitch, 1997). Others have examined questions, such as the relationship between religiosity and peak experiences or mystical experiences, without having clearly focused on the question of the relationship between religiosity and spirituality. Breed and Fagan (1972) found that people with less adherence to traditional religious beliefs were more likely to experience peak moments than people with higher adherence to traditional beliefs. Hood (1976) notes that mystical experience, frequently considered a part of spirituality, may be elicited by either religious or non-religious stimuli. He also noted that people who had quit church attendance completely had the lowest mysticism scores, while people who did not intend to change churches had scores in the middle range, and people who attended church but were considering changing churches had the highest scores on mysticism.

Hood suggested

Perhaps it is worth while to consider intense experiences such as mysticism as either motivating or confirming depending upon whether or not one's ideological orientation supports and endows these experiences with meaning (confirming) or ignores or minimizes them in which case the person is likely to seek another ideology to make sense of his intense personal experiences (motivating). (Hood, 1976, p. 1134)

Morris and Hood (1980) found that people with religious affiliation tend to give religious interpretation to mystical experience, which is frequently considered a part of spirituality, more than people who have no religious affiliation.

As with religion, differences in spirituality might be associated with different degrees of interpersonal guilt. Due to the aspect of spirituality that places a high value on the interconnectedness of life, spirituality may correlate with

higher sensitivity and proneness to interpersonal guilt. One study showed that spirituality with an emphasis on connectedness with others had a positive correlation with maladaptive interpersonal guilt, while general spiritual experience had an inverse relationship with maladaptive interpersonal guilt (Albertsen, 2002).

### *Hypotheses*

In the present study, we examine the relationships between spirituality, religiosity, ethnicity, and maladaptive interpersonal guilt. For the first hypothesis, regarding ethnicity, it is proposed that Asian Americans and Latin Americans, as more collectivistic groups, will have a higher maladaptive interpersonal guilt than European Americans, as a more individualistic group. For the second hypothesis, regarding religious tradition or denomination, it is proposed that Catholics will have higher levels of maladaptive interpersonal guilt than other religious groups or people reporting no religious affiliation. For the third hypothesis, regarding individuals' ratings of themselves as religious and/or spiritual, it is proposed that individuals identifying themselves as religious will have higher levels of maladaptive interpersonal guilt than individuals identifying themselves as spiritual. Exploratory analyses will be performed to examine whether effects on levels of guilt remain when religion and ethnicity are both taken into account.

### **Method**

#### *Participants and procedures*

Participants were 246 college students (64.2% female, 35.8% male) in an undergraduate psychology course in the Western United States, who completed a packet of questionnaires in partial fulfillment of a course requirement. Of 325 questionnaires completed, 246 were selected based on ethnic background and religious affiliation that would be large enough groups for statistical analyses and comparisons. The participants varied in age from 17 to 35 years, with a mean of 19.9 years ( $SD = 2.76$ ). The sample included 140 Asian Americans (56.9%), 73 European Americans (29.7%), and 33 Latin Americans (13.4%). The religious affiliation groups included 88 Catholics (35.8%), 58 Protestants (23.6%), 27 Buddhists (11.0%), and 73 who reported they had no religious affiliation (29.7%). Questionnaires were distributed at a class session, and interested students returned the questionnaires at the next class session. The response rate was 88.6%.

#### *Instruments*

A demographics questionnaire asked participants to provide information regarding their age, gender, national/racial/ethnic heritage, and religious/spiritual affiliation. Participants were asked to identify themselves as "religious", "spiritual", "religious and spiritual", or "neither". No definitions of the terms were provided for participants who, thus, relied on their own personal definitions.

The Interpersonal Guilt Questionnaire (IGQ-67; O'Connor et al., 1997) is a 67-item, self-report questionnaire designed to assess maladaptive guilt related to the fear of harming others. This instrument has four subscales: Survivor



Guilt (22 items), Separation Guilt (16 items), Omnipotent Responsibility Guilt (14 items), and Self-hate (15 items). Only the first three subscales, which are directly related to worry about harming others, are used in this study. These three subscales can be summed to create a Composite Interpersonal Guilt total score.

Survivor guilt is characterized by the maladaptive belief that by pursuing normal goals and achieving success and happiness, one will cause others to suffer simply by unfavorable comparison. This subscale contains items such as "I conceal or minimize my success" and "It makes me uncomfortable to receive better treatment than the people I am with". Separation guilt is characterized by the maladaptive belief that if a person separates from loved ones, or differs from loved ones in some way, loved ones will suffer as a direct consequence. Examples include: "I feel that bad things may happen to my family if I do not stay in close contact with them", and "I prefer to do things the way my parents did them". Omnipotent Responsibility Guilt involves an exaggerated sense of responsibility and concern for the well-being of others. Examples include: "It is very hard for me to cancel plans if I know the other person is looking forward to seeing me" and "I often find myself doing what someone else wants me to do rather than doing what I would most enjoy".

Responses to items are given on a 5-point Likert-type scale, and subscale scores are the sum of item responses for that subscale. Internal consistencies (Cronbach's alpha coefficients) have ranged from 0.82 to 0.85 for Survivor Guilt, from 0.82 to 0.83 for Separation Guilt, and from 0.74 to 0.83 for Omnipotent Responsibility Guilt (O'Connor et al., 1997). The construct validity has been established through correlations with measurements of other types of guilt and psychopathology (O'Connor et al., 1999). Significant gender differences occurred only on one scale, with women having higher scores on the Omnipotent Responsibility Guilt scale (O'Connor et al., 1997).

## **Results**

To test the first hypothesis, ethnic groups were compared with each other on interpersonal guilt using one-way ANOVAs. The overall  $F$ -test was statistically significant,  $F(2,243) = 4.62$ ,  $p < 0.05$ . Post-hoc comparisons (Fisher's LSD) showed that Asian Americans ( $N = 140$ , 56.9%) were significantly higher in interpersonal guilt than European Americans ( $N = 73$ , 29.7%) and Latin Americans ( $N = 33$ , 13.4%). These findings only partially support the first hypothesis that more collectivistic groups would have a higher interpersonal guilt than more individualistic groups.

To test the second hypothesis, religious affiliation groups were compared with each other on levels of interpersonal guilt using one-way ANOVAs. The overall  $F$ -test was statistically significant,  $F(3,242) = 3.61$ ,  $p < 0.05$ . Post-hoc comparisons (Fisher's LSD) showed that Catholics ( $N = 88$ , 35.8%) and Protestants ( $N = 58$ , 23.6%) were both significantly higher in interpersonal guilt than individuals without any religious or spiritual affiliation ( $N = 73$ , 29.7%).

Buddhists ( $N=27$ , 11.0%) did not differ statistically from any other group. These findings partially supported the second hypothesis that Catholics would have a higher interpersonal guilt than other groups.

Regarding the third hypothesis, which deals with identification as spiritual or religious, of the 246 participants, 46 respondents (18.7%) identified themselves as "religious" only; 77 (31.3%) identified themselves as "spiritual" only; 69 (28.0%) identified as both spiritual and religious; and 54 (22.0%) identified as neither spiritual nor religious. It is notable that Buddhists tended to identify themselves as religious, spiritual, or neither, but few identified themselves as both religious and spiritual. Catholics and Protestants, on the other hand, were very likely to categorize themselves as both religious and spiritual. The second highest rating for Catholics was describing themselves as religious, whereas, for Protestants, the second highest rating was to describe themselves as spiritual. Catholics and Protestants were unlikely to describe themselves as neither religious nor spiritual. For those individuals who reported no religious affiliation, they tended to describe themselves as spiritual only or neither spiritual nor religious, but not as religious only or both religious and spiritual. Table I presents religious/spiritual emphasis by religion.

To test the third hypothesis, individuals reporting a religious or spiritual orientation were compared with each other on levels of interpersonal guilt, using one-way ANOVAs. The overall  $F$ -test was statistically significant,  $F(3,242)=2.64$ ,  $p<0.05$ . Post-hoc comparisons (Fisher's LSD) showed that people identifying as both spiritual and religious had significantly higher levels of interpersonal guilt than people identifying as spiritual only or neither. There were no significant differences for those who identified as religious only. These results partially supported the third hypothesis that religious individuals would have a higher interpersonal guilt than spiritual individuals.

In exploratory analyses, differences on levels of interpersonal guilt were compared across religious affiliations within cultural groups. Significant differences were found within the Asian American and European American religious affiliation groups on levels of interpersonal guilt. One-way ANOVAs were calculated within each ethnic group; a factorial analysis could not be performed because of sparse cell means (only one Buddhist participant was not Asian American). The overall  $F$ -test within the Asian American group was statistically significant,  $F(3,136)=2.87$ ,  $p<0.05$ . Post-hoc comparisons (Fisher's LSD) showed that in the Asian American group, Catholics and Protestants were both

Table I. Percentage of religion by religious or spiritual emphasis.

Emphasis	Buddhist ( $N=27$ )	Catholic ( $N=88$ )	Protestant ( $N=58$ )	None ( $N=73$ )
Religious	22.2	31.8	18.9	1.4
Spiritual	33.3	15.9	32.8	47.9
Both	14.8	43.2	43.1	2.7
Neither	29.6	9.1	5.1	47.9



significantly higher in interpersonal guilt than people with no religious affiliation. In the European American group, the overall  $F$ -test was statistically significant,  $F(2,69) = 5.11, p < 0.01$ . (The single European-American Buddhist was eliminated from the statistical analyses, reducing the number of European American religious groups.) Post-hoc comparisons (Fisher's LSD) revealed that among European Americans, Catholics were significantly higher in interpersonal guilt than Protestants and those with no religious affiliation. In the Latin American group, there were no significant differences between the religious groups,  $F(2,30) = 0.83, ns$ . Table II compares religious affiliation groups on interpersonal guilt within each ethnicity.

Exploratory analyses also compared levels of interpersonal guilt across religious or spiritual identification within cultural groups. In the Asian American group, there were significant differences regarding interpersonal guilt depending on the identification as religious or spiritual,  $F(3,136) = 3.28, p < 0.05$ . Post-hoc analyses found that Asian Americans who identified as both spiritual and religious, and people who identified as spiritual only, were significantly higher in interpersonal guilt than those who identified as neither spiritual nor religious. There were no significant differences between religious and spiritual emphasis groups in interpersonal guilt within the European American sample,  $F(3,69) = 1.66, ns$ , or within the Latin American sample,  $F(3,29) = 1.66, ns$ . Table III compares groups identified as religious or spiritual emphasis within each ethnicity on interpersonal guilt.

Table II. Interpersonal guilt scores for ethnicity and religious affiliation.

Religious affiliation	Asian American ( $N = 140$ )	European American ( $N = 72$ )	Latin American ( $N = 33$ )
Catholic	159.98	164.46	149.72
Protestant	162.26	148.97	153.73
Buddhist	155.89	–	–
None	152.02	148.55	139.86
$F$ -test	2.86*	5.11**	0.82

\* $p < 0.05$ ; \*\* $p < 0.01$ .

Table III. Interpersonal guilt scores for ethnicity and religious/spiritual emphasis.

Emphasis	Asian American ( $N = 140$ )	European American ( $N = 73$ )	Latin American ( $N = 33$ )
Religious	156.59	166.20	152.57
Spiritual	159.09	148.22	140.80
Both	162.83	153.95	154.48
Neither	151.53	153.10	153.39
$F$ -test	3.28*	1.65	1.65

\* $p < 0.5$ .

## Discussion and limitations

This study found significant differences in levels of maladaptive interpersonal guilt among ethnic groups living in the United States, religious groups, and groups emphasizing religion or spirituality.

As the first hypothesis predicted, regarding distinctions between collectivistic and individualistic ethnic groups, Asian Americans, as representative of collectivistic cultures, were higher in interpersonal guilt than European Americans, as representative of individualistic cultures. Contrary to predictions, however, Latin Americans, who have also been considered to have a collectivistic culture, were no higher in interpersonal guilt than European Americans. A potential explanation for the lack of difference found between Latin Americans and European Americans is that the Latin Americans in the study may have been more strongly influenced by living in close proximity to European Americans than the Asian Americans. McMichael and Grinder (1966) have shown that proximity and exposure to another culture can result in change from the base level of guilt proneness to become more like that of the level of the other culture. To further explore this matter, exploratory analyses compared the participants' families for number of generations born in the United States, to determine whether Latin Americans may have been in close proximity to the dominant European American culture for a longer period of time than the Asian Americans. Results showed that Asian Americans reported a mean of 1.03 generations ( $SD=1.16$ ) born in the United States, whereas the Latin Americans reported a mean of 1.15 generations ( $SD=0.97$ ) born in the United States. A one-way ANOVA comparing the number of generations born in the United States produced an overall  $F$ -test that was not statistically significant,  $F(1,171)=.316$ ,  $p=0.57$ . The time frame that the families of Latin Americans in the study had been in the United States did not differ significantly from that of the Asian Americans and thus does not offer a supported explanation for the lack of difference in interpersonal guilt between Latin Americans and European Americans.

Another possible explanation for this finding is that Latin Americans and Asian Americans may acculturate to the dominant European American culture at different rates. Asano (1998) demonstrated that the level of identification with an ethnic group higher in collectivism was an important factor related to level of interpersonal guilt. A limitation of this study is the lack of measurement of degree of acculturation or retained ethnic identity, including factors such as mixed marriages and what language is used primarily in the home. Further research should include more ethnic groups than European Americans and Asian Americans, who have been the focus of much of the research on interpersonal guilt and ethnic identity. Research models need to further examine whether the model of collectivism versus individualism sheds light on the question of interpersonal guilt in other groups, such as Latin Americans.

Regarding the second hypothesis, as predicted, Catholics had higher levels of interpersonal guilt than people with no religious affiliation. A finding that was

not predicted, however, was that Protestants also had more interpersonal guilt than people with no religious affiliation. The findings of Ratanasiripong (1996), that perception of divine forgiveness by grace is associated with adaptive, shame-free guilt, may help explain this unexpected finding. Although significant diversity in doctrinal belief exists across Protestant denominations, the general Protestant emphasis on individuals coming directly to God for grace and forgiveness may to some degree offset the traditional understanding that Catholics are higher in guilt.

A finding contrary to prediction was that Buddhists were not distinguishable statistically from Catholics (and Protestants.) A possible explanation for the lack of difference between Buddhists and Catholics is that the Buddhist participants were almost entirely Asian American (only one Buddhist participant was not Asian American). This lack of ethnic diversity with the Buddhist participants results in a confound of ethnicity, in which Asian Americans have been shown to be higher in interpersonal guilt (Albertsen, 2002; Asano, 1998; Zane, Sue, Hu & Kwon, 1991), when attempting to demonstrate difference based on religious or spiritual affiliation. In order to further evaluate the impact of ethnicity and religious or spiritual affiliation together, comparisons of religious or spiritual affiliation within ethnic groups were analyzed.

Within the Asian American group, it was found that Catholics and Protestants were both significantly higher in interpersonal guilt than people with no religious affiliation and had no difference from Buddhists, though the Buddhists were somewhat lower in interpersonal guilt. Asian Americans who indicated no religious affiliation were lowest in interpersonal guilt. It is possible that Asian Americans who innately have less tendency toward interpersonal guilt, or may have dealt effectively with reducing their tendency toward interpersonal guilt, may be those who separate themselves from involvement in religion or spiritual affiliation, and thereby rejected or bypassed interpersonal or intersocietal pressure to belong or conform to religious or spiritual groups.

Research on biological and social influences on religious behavior suggests that religious affiliation is largely a phenomenon connected to culture, whereas attitudes about religion have a moderate influence by genetic factors (D'Onofrio, Eaves, Murrell, Maes & Spilka, 1999).

A similar pattern was found among the Latin American samples, with non-affiliated people showing less interpersonal guilt, but the differences were not statistically significant, perhaps due to the smaller sample size. Among European Americans, a slightly different pattern emerged. The European American Catholic participants were higher in guilt than both the Protestant and the non-religious participants.

It may be the case that departing from a more widely accepted religion or spiritual affiliation to a less widely accepted religion or spiritual affiliation may carry a higher charge of interpersonal, or even intersocietal, guilt than completely rejecting any religious or spiritual affiliation. The fact that this study combined several local immigrant communities into broader ethnic categories obscures specific cultural expectations and pressures regarding religion and spirituality

on individuals. With the Asian American sample in particular, having combined individual participants from a broad variety of Asian backgrounds prevents us from knowing whether Buddhism, Catholicism, or Protestantism is near or far from that which is most widely accepted in their local or familial community. Among European Americans, the tradition of Protestantism is as accepted as Catholicism and, in general, more widely spread. For European Americans, then, involvement in Protestantism has the advantage of a religion with more emphasis on grace and forgiveness while also being a widely accepted cultural tradition.

The prediction in the third hypothesis that “religious” people will have more interpersonal guilt than “spiritual” people was partially supported. Although “religious” people in the entire sample did not have exceptionally high levels of interpersonal guilt, those people who were both “religious” and “spiritual” were higher in interpersonal guilt than those who were only “spiritual” or neither. This overall finding would suggest that spirituality may be related to either end of the interpersonal guilt spectrum, whereas religiosity tends to be related to a higher interpersonal guilt.

However, the impact of ethnicity complicates these findings. When European Americans and Latin Americans were examined as separate groups, no differences were found between religiosity and spirituality for levels of interpersonal guilt. This finding further supports the earlier stated finding of little difference between European Americans and Latin Americans for the level of interpersonal guilt. However, the pattern among Asian Americans was different than the pattern found in the entire sample. Among Asian Americans, self-description as both spiritual and religious, or self-description as spiritual only, was associated with a higher interpersonal guilt than self-description as neither spiritual nor religious. Among the Asian American participants, spirituality was the consistent factor related to higher interpersonal guilt. This may be because Buddhism more traditionally emphasizes spirituality over religiosity. Thus, spirituality is more traditional and should correlate with a higher interpersonal and intersocietal guilt. For European Americans, on the other hand, spirituality often means anything but the traditional mainstream Christianity, which has often had more emphasis on religiosity. Thus, European Americans identifying as spiritual may be considered less traditional and more likely to be associated with the lower interpersonal guilt of non-affiliated participants. These findings suggest that for Asian Americans, spirituality has a closer relationship to interpersonal guilt than religiosity does. For European Americans and Latin Americans, however, there is a tendency for religiosity to have a closer relationship to interpersonal guilt, as indicated by the overall trend of the sample.

A limitation in this study is the lack of clear definition for participants’ assessment of themselves as “religious” and “spiritual.” Allowing participants to define for themselves the terms “spiritual” and “religious” resulted in some complexity in the findings, while at the same time providing a clearer picture of which people are more likely to select a particular term to describe themselves. Catholics tended to emphasize the trait of being religious, whereas Protestants tended to emphasize

the trait of being spiritual, which may possibly refer to the same type of experience for these groups with the difference being only semantic. Individuals who reported no religious affiliation tended to describe themselves as spiritual or neither spiritual nor religious. Nearly a third of the Buddhists in this study (of whom only one was not Asian) described themselves as having neither a religious nor a spiritual emphasis. It appears that they might consider their involvement in Buddhism to be a connection to a broader cultural identity.

In summary, significant differences were found between ethnic and religious groups, and those who describe themselves as spiritual or religious, on levels of maladaptive interpersonal guilt. Asian Americans were found to have higher levels of maladaptive interpersonal guilt than European Americans, a finding which has frequently been attributed to cultural differences such as tendencies toward collectivism. However, Latin Americans, who have also been considered to have a collectivistic culture, did not show a higher guilt, suggesting that collectivism versus individualism may not be an adequate variable to examine guilt across cultures. Among the Asian American participants, spirituality was related to a higher interpersonal guilt. For European Americans and Latin Americans, however, religiosity was more closely related to interpersonal guilt.

It appears that departing from the traditionally accepted religious or spiritual philosophies of a cultural group to a less-accepted philosophy is related to a higher interpersonal guilt, whereas completely rejecting religious or spiritual involvement is related to less interpersonal guilt. Both Catholics and Protestants had higher levels of interpersonal guilt than people with no religious affiliation. Buddhists were not distinguishable from any other group on interpersonal guilt.

These correlational findings do not demonstrate causality. A number of explanations for the stated relationships are possible. It may be that individuals with a high guilt proneness may tend to involve themselves in religion, whereas individuals with a lower guilt proneness may have less of a sense of need for religion. A different general explanation is that religion may tend to promote interpersonal guilt because of moral teachings about a person's responsibilities, particularly to others.

These results suggest that the relationship between interpersonal guilt and religiosity varies with regard to factors such as religious affiliation, ethnic background, and religious or spiritual emphasis. In addition, interpersonal guilt is shown to be an important factor in understanding the impact and function of religion.

### **Clinical implications**

This research supports previous writings on the importance of mental-health clinicians having awareness of religious and cultural backgrounds of their clients. One study found that clinician's attitudes toward, and actual use of, interventions of a religious nature were more connected to the clinician's personal view of religion than to the clinician's theoretical orientation in psychology

(Shafranske & Malony, 1990), suggesting that too frequently the clinician's understanding of interventions related to religion are not fully integrated into their theoretical grounding. Yarhouse and VanOrman (1999) write on ethical considerations in working with religious clients. They suggest that to have competence in one's work with religious clients, a clinician needs to recognize the implications of theories of personality, understand the meaning and significance of the religious beliefs, be aware of appropriate assessment measures for religious dimensions, and consider the implications of various forms of mental-health treatment among religious clients. They provide several specific suggestions on improving services to religious clients. Cultural and ethnic backgrounds, as well as a client's individual levels of identifying with these backgrounds, are also important for consideration in clinical work. Raising clinical awareness in general has been the focus of many works (Atkinson & Atkinson, 2003; Ridley, 1994). Some discussion has focused on understanding and adapting psychodynamic clinical theory for clients of diverse cultural background (Berzoff, Flanagan & Hertz, 1996).

This study addressing the relationships between religion, culture, and interpersonal guilt suggests that clinicians should also be aware of differences in proneness to maladaptive interpersonal guilt. In short, maladaptive interpersonal guilt results from pathological beliefs which are believed to be related to the interpersonal context of family and societal environment in which a person grows up. When maladaptive interpersonal guilt prevents a person from taking healthy steps in his or her life, therapeutic intervention would enable the person to realize that past beliefs may not have adequate support or evidence to continue adhering to at that time in his or her life. This view recognizes that such beliefs may have had adequate support during certain phases of the person's development. The process of aiding a person to develop more adaptive beliefs may include direct discussion of the evidence for the maladaptive beliefs compared to the evidence for alternative, adaptive beliefs, in addition to examining the sources of the beliefs, or it may have a more experiential and relational approach. In an experiential approach, the therapist or counselor provides by their own attitudes, which they make visible to the client, a different experience for the client than that which has been experienced in the past. Weiss (1993) and Weiss and Sampson (1986) provide in-depth discussion of individualized treatment approaches that take into account maladaptive interpersonal guilt.

For example, a Christian Protestant man who, during childhood, witnessed his own father struggle with excessive or scrupulous guilt may hold the pathogenic belief that it would be dangerous to allow himself to relax and feel confident in the saving grace of God. To have peace in his experience of divine forgiveness would depart from and, in his view, surpass his father's "success" in religion. Thus, to do so would be a betrayal of his father and cause harm to his father by his act of separating from the model provided by his father and also outdoing his father's performance. This belief lays the groundwork for maladaptive interpersonal guilt. Over time, this man could handicap himself with the inability to become fully involved in a trusting relationship with God, continually focus on



his religious guilt as his father did, and maintain doubt that God can accept him any better than God apparently accepted his father. A therapeutic response to this man's pathogenic beliefs may include putting into words this man's quandary and allowing him to explicitly evaluate the source of the belief, the evidence for the belief, and the effects of the belief. As another form of intervention, the therapist may choose to demonstrate an attitude different from that of the man and his father, by repeatedly showing grace and acceptance within the therapeutic relationship. Opportunities for showing such an attitude of grace include the man arriving late or even missing a session, the man admitting to non-admirable behaviors, or the man making challenging complaints directly against the clinician.

To add to the dimensions of meaning in this man's therapy, the clinician also takes into account the cultural background of this man, considering the implications of general attitudes and communication styles generally held by that cultural group, as well as considering the interplay between the religious and cultural backgrounds. This would include considering whether the man comes from a culture in which it is common and well accepted to be Protestant and, if not, for how many generations this man's family has been Protestant, and the meaning attached within the family to being Protestant. When the man's religious and cultural backgrounds are known, the clinician may make guesses as to the severity of issues related to maladaptive, interpersonal guilt, as discussed in this article. Even when the clinician can make well-educated guesses, though, he or she will gather data from interviews and observations to support or refine the clinician's understanding.

Some of the specific clinical implications regarding interpersonal guilt resulting from this study include the following: A therapist or counselor has clues about a person's tendency toward interpersonal guilt by knowing the person's ethnic background, religious or spiritual affiliation, and their self-description as spiritual or religious. Beyond this, however, a therapist or counselor must also consider the interaction of these factors. For individuals of a given religion, the psychodynamic beliefs and tendency toward maladaptive interpersonal guilt will likely vary based on the person's ethnic background. For individuals of a given ethnic background, the psychodynamic beliefs and tendency toward maladaptive interpersonal guilt will likely vary according to their involvement in religion, whether it be the traditionally accepted religion of their culture, a less-traditionally accepted religion, or a complete lack of involvement in religion.

### **Acknowledgements**

This research was supported by a grant from the Miriam F. Meehan Charitable Trusts, 1999. The authors wish to thank Eunice Yi, Arinn Olson, and Margaret Lynch and her assistants at San Francisco State University for their help.

## References

- Albani, C., Blaser, G., Körner, A., Geyer, M., Volkart, R., O'Connor, L., et al. (2002). Der "Fragebogen zu interpersonellen schuldgefühlen". The German Short Version of the "Interpersonal Guilt Questionnaire"—Validation in a population-based sample and clinical application. *Psychotherapie Psychosomatik Medizinische Psychologie*, 52, 189–197.
- Albertsen, E. J. (2002). Interpersonal guilt, spirituality, and religiosity: An empirical investigation of relationships (Doctoral dissertation, The Wright Institute, Berkeley, CA). *Dissertation Abstracts International*, 63, 1013.
- Allport, G. (1950). *The individual and his religion*. New York: Macmillan.
- Allport, G., & Ross, J. M. (1967). Personal religious orientation and prejudice. *Journal of Personality and Social Psychology*, 5, 432–443.
- Asano, S. E. (1998). Cultural values, ethnic identity, interpersonal guilt and shame: A comparison of Japanese Americans and European Americans (Doctoral dissertation, The Wright Institute, Berkeley, CA). *Dissertation Abstracts International*, 59, 2480.
- Atkinson, D. R. R., & Atkinson, D. (2003). *Counseling American minorities: A cross-cultural perspective* (6th ed.). New York: McGraw-Hill.
- Baumeister, R. F., Stillwell, A. M., & Heatherton, T. F. (1994). Guilt: An interpersonal approach. *Psychological Bulletin*, 115, 243–267.
- Berzoff, J., Flanagan, L. M., & Hertz, P. (1996). Inside out and outside in: Psychodynamic clinical theory and practice in contemporary multicultural contexts. Northvale, NJ: Jason Aronson.
- Braam, A. W., Sonnenberg, C. M., Beekman, A. T. F., Deeg, D. J. H., & Van-Tilburg, W. (2000). Religious denomination as a symptom-formation factor of depression in older Dutch citizens. *International Journal of Geriatric Psychiatry*, 15, 458–466.
- Breed, G., & Fagan, J. (1972). Religious dogmatism and peak experiences: a test of Maslow's hypothesis. *Psychological Reports*, 31, 866.
- Bush, M. (1989). The role of unconscious guilt in psychopathology and psychotherapy. *Bulletin of the Menninger Clinic*, 53, 97–107.
- Ciarrocchi, J. W. (1995). *The doubting disease: Help for scrupulosity and religious compulsions*. Mahwah, NJ: Paulist Press.
- D'Onofrio, B. M., Eaves, L. J., Murrell, L., Maes, H. H., & Spilka, B. (1999). Understanding biological and social influences on religious affiliation, attitudes, and behaviors: a behavior genetic perspective. *Journal of Personality*, 67, 953–984.
- Elkins, D. N., Hedstrom, L. J., Hughes, L. L., Leaf, J. A., & Saunders, C. (1988). Toward a humanistic-phenomenological spirituality: Definition, description, and measurement. *Journal of Humanistic Psychology*, 28, 5–18.
- Ellis, A. (1980). Psychotherapy and atheistic values: a response to A. E. Bergin's "Psychotherapy and religious values". *Journal of Consulting and Clinical Psychology*, 48, 635–639.
- Fehr, L. A., & Stamps, L. E. (1979). The Mosher Guilt Scales: a construct validity extension. *Journal of Personality Assessment*, 43, 257–260.
- Fulgini, A. J., Tseng, V., & Lam, M. (1999). Attitudes toward family obligations among American adolescents with Asian, Latin American, and European backgrounds. *Child Development*, 70, 1030–1044.
- Gallup Foundation (1997). *Religion in America. Gallup Report No. 237*. Princeton, NJ: Author.
- Gartner, J., Larson, D. B., & Allen, G. D. (1991). Religious commitment and mental health: a review of the empirical literature. *Journal of Psychology and Theology*, 19, 6–25.
- Hofstede, G. (1984). *Culture's consequences: International differences in work-related values. Abridged Edition. Volume 5, Cross-Cultural Research and Methodology Series*. Beverly Hills, CA: Sage.
- Hood, R. W. (1970). Religious orientation and the report of religious experience. *Journal for the Scientific Study of Religion*, 9, 285–291.
- Hood, R. W. (1972). Normative and motivational determinants of reported religious experience in two Baptist samples. *Review of Religious Research*, 13, 192–196.
- Hood, R. W. (1973). Religious orientation and the experience of transcendence. *Journal for the Scientific Study of Religion*, 12, 441–448.
- Hood, R. W. (1976). Mystical experience as related to present and anticipated future church participation. *Psychological Reports*, 39, 1127–1136.
- Janoff-Bulman, R., & Leggatt, H. K. (2002). Culture and social obligation: When "shoulds" are perceived as "wants." *Journal of Research in Personality*, 36, 260–270.

- Koenig, H. G., McCullough, M. E., & Larson, D. B. (2001). *Handbook of religion and health*. New York: Oxford University Press.
- London, P., Schulman, R. E., & Black, M. S. (1964). Religion, guilt, and ethical standards. *Journal of Social Psychology*, 63, 145–159.
- Luyten, P., Corveleyn, J., & Fontaine, J. R. J. (1998). The relationship between religiosity and mental health: Distinguishing between shame and guilt. *Mental Health, Religion and Culture*, 1, 165–184.
- McMichael, R. E., & Grinder, R. E. (1966). Children's guilt after transgression: Combined effect of exposure to American culture and ethnic background. *Child Development*, 37, 425–431.
- Meehan, W., O'Connor, L. E., Berry, J. W., Weiss, J., Morrison, A., & Acampora, A. (1996). Guilt and shame depression in clients in recovery from addiction. *Journal of Psychoactive Drugs*, 28, 125–134.
- Morris, R. J., & Hood, R. W. (1980). Religious and unity criteria of Baptists and Nones in reports of mystical experience. *Psychological Reports*, 46, 728–730.
- Murphy, H. B. (1974). Differences between mental disorders of French Canadians and British Canadians. *Canadian Psychiatric Association Journal*, 19, 247–257.
- O'Connor, L. E. (2000). Pathogenic beliefs and guilt in human evolution: Implications for psychotherapy. In P. Gilbert & K. G. Bailey (Eds.), *Genes on the couch: Explorations in evolutionary psychotherapy* (pp. 276–303). Philadelphia, PA: Brunner-Routledge.
- O'Connor, L., Berry, J. W., & Weiss, J. (1999). Interpersonal guilt, shame, and psychological problems. *Journal of Social and Clinical Psychology*, 18, 181–203.
- O'Connor, L., Berry, J. W., Weiss, J., Bush, M., & Sampson, H. (1997). Interpersonal Guilt: The development of a new measure. *Journal of Clinical Psychology*, 53, 73–89.
- Piedmont, R. L. (1999). Does spirituality represent the sixth factor of personality? Spiritual Transcendence and the Five-Factor Model. *Journal of Personality*, 67, 985–1013.
- Ratanasiripong, P. P. (1996). Effects of culture and religious belief on self-conscious emotions and depression: Acculturation, self-construal, belief in grace, shame, guilt, and depression among Asian American and European American Protestants (Doctoral dissertation, The Wright Institute, Berkeley, CA). *Dissertation Abstracts International*, 57, 7235.
- Ridley, C. (1994). *Overcoming unintentional racism in counseling and therapy: a practitioner's guide to intentional intervention* (2nd ed.). Beverly Hills, CA: Sage.
- Shafranske, E., & Malony, H. N. (1990). Clinical psychologists' religious and spiritual orientations and their practice of psychotherapy. *Psychotherapy*, 27, 72–78.
- Spero, M. H. (1980). The contemporary penitent personality: diagnostic, treatment, and ethical considerations with a particular type of religious patient. *Journal of Psychology and Judaism*, 4, 131–196.
- Stephan, W. G., Stephan, C. W., & De Vargas, M. C. (1996). Emotional expression in Costa Rica and the United States. *Journal of Cross-Cultural Psychology*, 27, 147–160.
- Tangney, J. P. (1990). Assessing individual differences in proneness to shame and guilt: Development of the self-conscious affect and attribution inventory. *Journal of Personality and Social Psychology*, 59, 102–111.
- Tangney, J. P., Burggraf, S. A., & Wagner, P. (1995). Shame-proneness, guilt-proneness, and psychological symptoms. In J. P. Tangney & K. W. Fischer (Eds.), *Self-conscious emotions: The psychology of shame, guilt, embarrassment, and pride* (pp. 343–367). New York: Guilford Press.
- Tangney, J. P., Wagner, P., Fletcher, C., & Gramzow, R. (1992). Shamed into anger? The relation of shame and guilt to anger and self-reported aggression. *Journal of Personality and Social Psychology*, 62, 669–675.
- Tloczynski, J., Knoll, C., & Fitch, A. (1997). The relationship among spirituality, religious ideology, and personality. *Journal of Psychology and Theology*, 25, 208–213.
- Van Ornum, W. (1997). *A thousand frightening fantasies: understanding and healing scrupulosity and obsessive compulsive disorder*. New York: Crossroad.
- Watson, P. J., Morris, R. J., & Hood, R. W. (1988). Sin and self-functioning, part 2: Grace, guilt and psychological adjustment. *Journal of Psychology and Theology*, 16, 270–281.
- Webster, R. (1998). Sibling Rivalry and Interpersonal Guilt (Doctoral dissertation, The Wright Institute, Berkeley, CA). *Dissertation Abstracts International*, 59, 5173.
- Weiss, J. (1983). *Notes on unconscious guilt, pathogenic beliefs, and the treatment process*. Bulletin #6. The San Francisco Psychotherapy Research Group (formerly the Mount Zion Psychotherapy Research Group), Department of Psychiatry, Mount Zion Hospital and Medical Center.

- Weiss, J. (1993). *How psychotherapy works: Process and technique*. New York: Guilford Press.
- Weiss, J., & Sampson, H. (Eds.) (1986). *The psychoanalytic process: Theory, clinical observation and empirical research*. New York: Guilford Press.
- Yarhouse, M. A., & Vanorman, B. T. (1999). When psychologists work with religious clients: Applications of the general principles of ethical conduct. *Professional Psychology: Research and Practice*, 30, 557–562.
- Zahn-Waxler, C., & Robinson, J. (1995). Empathy and guilt: Early origins of feelings of responsibility. In J. P. Tangney & K. W. Fischer (Eds.), *Self-conscious emotions: The psychology of shame, guilt, embarrassment, and pride* (pp. 143–173). New York: Guilford Press.
- Zane, N. W., Sue, S., Hu, L., & Kwon, J. (1991). Asian-American assertion: a social learning analysis of cultural differences. *Journal of Counseling Psychology*, 38, 63–70.

Copyright of Mental Health, Religion & Culture is the property of Routledge, Ltd.. The copyright in an individual article may be maintained by the author in certain cases. Content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.