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Christianity and COVID: Conservative Authoritarianism

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Abstract

Since the COVID-19 outbreak in the United States, the CDC has implemented guidelines to help reduce its spread. Despite efforts, people often do not follow these guidelines, leaving many questions about why so many deviate. The current research examines the connection between religious belief, observance, and the mistrust of scientific findings in relation to adherence to CDC COVID guidelines. We created a survey measuring peoples’ religious beliefs, trust and mistrust of sources, and COVID-19 practices in a population of Christians. Analyses examined correlations between religious variables and pandemic-related behavior. One hypothesis suggests that, generally speaking, higher Christian religiosity will predict less adherence to COVID-19 guidelines. We found a correlation between specific religious beliefs and COVID related behavior. Namely, within a Christian population, more authoritative and absolute ways of thinking predicted less adherence to COVID-19 guidelines; specifically, those guidelines limiting socialization. These findings show how particular aspects of religiosity relate to deviance in adherence to COVID-19 guidelines, moving beyond simple explanations that view religious groups monolithically. A better understanding of relationships between religiosity, trust in science, and COVID-19 practices may suggest ways that practices might be encouraged within different religious groups.

Keywords: Christianity; COVID; authoritarianism; conservatism; religiosity; social behavior; rule breaking
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Since March of 2020, COVID-19 changed the lives of billions of people all over the world, whether that be through contracting the virus, or the many restrictions and regulations put upon the population to reduce transmission. Schools and companies went online where possible, restaurants and stores were closed down, and stay at home orders were put into place. As time passed, stay at home orders began to lift and other public spaces began to slowly open up with limited capacity, among other restrictions, but regulations such as mask mandates and social distancing were still enforced. Despite these regulations from health organizations, such as the CDC, being in place, many individuals have ignored these guidelines, posing a threat to public safety and contributing to the increase in COVID cases. Hypothesized connections between religious belief and deviance from these policies have been posed.

From heliocentrism to evolution, examples throughout history show that religious beliefs and institutions can affect trust in scientific authority. One study conducted by Perry et al. concluded that American Christian nationalism, that emphasizes God’s ability to protect his people from harm was positively linked to one’s likelihood to participate in the incautious behavior the CDC warns against (2020). While this research does show a connection between a particular mindset of Christianity intertwined with more right leaning political views, it does not look at other fundamental religious beliefs and their connection to following specific regulations. The current research aims to examine the connection between other aspects of religious observance, beliefs, and trust in authority, in relation to adherence to CDC guidelines, both individual guidelines and one’s average compliance to the guidelines in total. One hypothesis suggests that more absolute, authoritarian religious beliefs and practices will is predictive of greater mistrust for science, and therefore, less adherence to COVID-19 guidelines.

Methods

Participants

161 participants were surveyed. All of the participants self-identified as Christian. Participants’ ages ranged from 16 to 71. They were selected using online convenience sampling via various social media platforms.
Measures

A survey was created for this study to look at variability in individual Christian beliefs and one’s likelihood to follow specific CDC guidelines. This survey included questions pertaining to one’s religious beliefs and practices, how one perceived characteristics of God, and how well one followed the CDC’s COVID-19 guidelines, scored on a Likert scale (1 = “Strongly disagree”, 2 = “Agree”, 3 = “Neither agree nor disagree”, 4 = “Disagree”, 5 = “Strongly agree”), as well as general demographic questions, such as political ideology (1 = “Very liberal”, 2 = “Liberal”, 3 = “Moderate”, 4 = “Conservative”, 5 = “Very conservative”) and gender. After demographic questions were answered, the three remaining groups of questioned were presented in a random order to eliminate bias based on which questions were answered first.

Religious Beliefs and Practices (Cohen et al., 2003)

In this section, participants were asked to respond to the following statements regarding one’s religious beliefs and practices on a Likert scale, after being asked how much they agreed with them.

- I believe in God.
- I believe that religion can answer more fundamental questions than science.
- I believe in an eternal afterlife.
- I believe in reincarnation.
- I think praying in times of need is important.
- I follow any purity/sanitary guidelines my religion upholds.
- I uphold the ethic of reciprocity. (i.e., I treat others how I would like to be treated)

Characteristics of God (Purzycki et al., 2016)

In this section, participants were asked to respond to the following statements regarding one perceives the characteristics of God on a Likert scale, after being asked how much they agreed with them.

- God can punish people for their behavior.
- God can influence what happens to people after they die.
God can see what people are doing no matter where they are.

God cares about how people treat strangers.

**COVID Guideline Adherence** (Park et al. 2020)

In this section, participants were asked to respond to the following statements regarding how closely one followed CDC COVID-19 guidelines on a Likert scale, after being asked how much they agreed with them.

- I self-monitor my symptoms.
- I avoid in-person social gatherings.
- I avoid eating or gathering at bars, restaurants, and food courts.
- I avoid unnecessary travel, shopping, and social visits.
- I keep a 6-foot distance between myself and other people.
- I avoid physical contact when greeting other people.
- I avoid touching my face with unwashed hands.
- I avoid close contact with people who are sick.
- I wash my hands often.

In addition to these questions, they were also asked if they or someone in their household has had COVID-19, to which they could respond with “Yes” = 1, “No” = 2, or “Had symptoms, but was not tested” = 3. Participants were also asked if they or someone in their household is more susceptible to getting COVID-19, to which they could respond “Yes” = 1 or “No” = 2.

**Analysis**

Bivariate correlation tests were run to look at the relationships between average scores for each variable.

**Results**

Several significant bivariate correlations were found, signified by the bolded $r$ values in Figure 1. These included several negative correlations seen with the more authoritarian Christian beliefs and CDC
guidelines that limited socialization. This was seen in participants avoiding contact with others when greeting and whether they believed that religion could answer more fundamental questions than science ($r(159) = -0.18, p = 0.019$), that God can influence what happens to people after they die ($r(159) = -0.16, p = 0.046$), that God can see what people are doing no matter where they are ($r(159) = -0.17, p = 0.034$), and that God can punish people for their behaviors ($r(159) = -0.32, p < 0.001$). Negative correlations were also seen with the restriction on social gatherings with the same religious beliefs on fundamental questions ($r(159) = -0.17, p = 0.031$), God’s influence after death ($r(159) = -0.21, p = 0.007$), God’s omniscience ($r(159) = -0.22, p = 0.006$), and God’s ability to punish people ($r(159) = -0.17, p = 0.28$).

Figure 1 illustrates the strength of the correlational relationships between all of the religious beliefs and perceptions of God, and how closely CDC guidelines are followed. By looking at the bolded, significant $r$ values, it can be seen that there are considerably more negative correlations between religious beliefs and following the guidelines, particularly with the more authoritarian religious beliefs mentioned above.

![Figure 1. Bivariate correlation results.](image)

Looking at more general COVID-19 guideline compliance, only three of the aforementioned authoritarian beliefs about God and religion as a whole are found to have a significant correlation, *Religion being able to answer more fundamental questions* ($r(159) = -0.19, p = 0.015$), *God being able to...*
see people no matter what \((r(159) = -0.16, p = 0.039)\), and God being able to punish people \((r(159) = -0.19, p = 0.016)\). Figure 2 highlights these relationships between religious based beliefs and the average compliance of COVID-19 guidelines. Notably, there are no significant negative correlations other than with these beliefs pertaining to more authoritarian aspects of religion.

Figure 2

Despite the fact this research focused on religious beliefs and their relation to following the CDC’s restrictions and guidelines, the relationships between religious beliefs, specifically one’s perception of the characteristics of God, and how politically conservative one identifies as to see how this study find similar results to previous research that focused more on religion’s connection to conservatism. (CITE past research) Figure 3 shows these correlational relationships, and markedly produced significant positive relationships with conservatism with God’s omniscience \((r(159) = 0.266, p < 0.001)\) and God’s ability to punish people \((r(159) = 0.215, p = 0.006)\).
Figure 3

Discussion

Deviance from the CDC’s public health guidelines can have serious consequences as the world strives to get a handle on COVID-19 and starts to return to normal. While it has been proposed that religiosity could be to blame for this behavior based on the historical mistrust of science from many religious institutions, the results of this study show that the relationship between religious beliefs and scientific mistrust is more subtle. The strong negative correlations between adherence to COVID-19 guidelines, both at the individual level with restriction of socialization and on average, and the more authoritarian religious beliefs and trust in religion as a source of authority, suggests that particular kinds of religious beliefs, even within a single religion, are linked to this deviance in this community. This study supports findings from the study on Christian Nationalism conducted by Perry et al. that linked religion to political conservatism in relation to the noncompliance of the guidelines (2020). The negative correlations between conservatism and COVID guideline adherence, and the positive correlations between conservatism and authoritarian religious beliefs about God found in the present study suggest that relations between these kinds of religious and political beliefs need to be looked at together to explain the deviant social behaviors being observed.

One limitation that this study had was not being able to include other religious beliefs systems due to lack of response from other communities. Future studies could look at religion more holistically by exploring comparative beliefs among participants of multiple religions to see if similar findings can be found across belief systems. Additionally, another limiting factor was all participants from this study were from the U.S. and were questioned about the CDC restrictions that have been in place there. It is possible that there would be difference in the results of a similar study that looked more closely at religious belief systems and national identities in other countries.

Despite limitations, these findings contribute to the scientific conversation surrounding COVID-19 and the behaviors we are seeing regarding CDC guidelines and restrictions in two ways. One of these
ways is by focusing on the kinds of religious beliefs and perceptions of God within Christianity that are connected to a mistrust of science and COVID guideline noncompliance. This study’s findings also support the connection of religion and conservatism within similar studies (Perry et al., 2020). Overall, these results emphasize the importance of looking at fine-grained differences in belief systems and how other personal beliefs may be influencing behavior when drawing conclusions between religious beliefs and COVID-19 guideline adherence.

References

