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Predictors of spiritual wellbeing in The Episcopal Church during the COVID-19 pandemic

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Predictors of spiritual wellbeing in The Episcopal Church during the COVID-19 pandemic

Abstract

The COVID-19 pandemic seems to have caused both declines in psychological wellbeing and increases in spirituality and religious coping. This paper explores the relationships of spiritual and psychological wellbeing in a sample of 3,403 Anglicans from the Episcopal Church (USA) who completed an online survey in 2021 during the COVID-19 pandemic. Spiritual wellbeing improved more among women than among men, among older than younger people, among Black or African Americans than among other ethnicities, among those who lived alone, and among clergy than among lay people. Positive change in spiritual wellbeing was also associated with psychological type preferences for extraversion, intuition, and feeling. Emotional volatility was associated with more negative changes in spiritual wellbeing. Multiple regression suggested that spiritual wellbeing was more closely associated with positive, rather than negative, psychological affect.

Keywords: balanced affect; COVID-19; spiritual wellbeing; psychological type; psychological wellbeing

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Introduction

The interactions of religion and the COVID-19 pandemic and religious life have been widely reported and shown to be multifaceted and complex. Among the many questions addressed by researchers are those exploring effects of the pandemic on spirituality or religion (Baker et al., 2020; Coppola et al., 2021; Hyde & Joseph, 2022; Joseph & Hyde, 2022; Lucchetti et al., 2021; Ting et al., 2021), the role of religious or spiritual coping during the pandemic (Chang et al., 2021; Counted et al., 2022; DiGregorio et al., 2021; Kadiroğlu et al., 2021; Kelley et al., 2023; Pankowski & Wytrychiewicz-Pankowska, 2023; Pirutinsky et al., 2020; Xie & Ren, 2023; Zhang et al., 2021), and the relationships of spirituality or religion to health during the pandemic (De Diego-Cordero et al., 2022; Rigoli, 2021; Village & Francis, 2023a). Lockdowns disrupted familiar religious gatherings and the virtual worship rituals that sprang up to replace them were seen as opportunities for creative change by some and second-rate substitutes by others (Campbell, 2020; Edelman et al., 2021; Village & Francis, 2023d).

One facet of this unprecedented event has been the effect of the pandemic, and its associated effects on psychological wellbeing, on the spiritual wellbeing of religious people. Although there have been widespread reports of declines in psychological wellbeing among religious groups (Crea et al., 2021; Kappler et al., 2022; McFerran & Graveling, 2021; Village & Francis, 2021a, 2022b), there have also been reports of spiritual growth or renewal among individuals during the pandemic (Büssing et al., 2021; Büssing et al., 2020; Francis et al., 2021, 2022). Some individuals in these studies reported increases in the frequency of prayer, greater closeness to God, and better

general spiritual wellbeing (Village & Francis, 2023a). The notion of 'religious coping' has been used to argue that many people increased their religious or spiritual practices as a way of offsetting the negative psychological effects caused by the fear of catching COVID-19 or the indirect effects of being locked down (for example, see Counted et al., 2022). Whether the relationship is one of cause and effect, or a co-relationship of spiritual and psychological dimensions of wellbeing is difficult to tell because the evidence comes from cross-sectional studies. What does seem certain is that those who reported positive changes in spiritual wellbeing also tended to report improved (or less deterioration in) psychological wellbeing during the pandemic.

Balanced affect and spiritual wellbeing in COVID-19

Of the many studies of psychological or subjective wellbeing during the pandemic, a number have drawn on the notion of affect balance, first suggested by Bradburn (1969). This argues that overall psychological wellbeing is shaped by a combination of positive and negative affect, which may be determined independently of one another. Balanced affect studies during COVID-19 have been reported from several countries including Spain (Matud et al., 2023; Pérez-Fuentes et al., 2020), Turkey (Yıldırım et al., 2022), Italy (Cattelino et al., 2023), Chile (Lacomba-Trejo et al., 2022), Canada (Desrochers et al., 2022) and the UK (Francis & Village, 2021). Most of these studies have combined the positive and negative dimensions to produce a single scale of subjective wellbeing, which is then shown to be related to a wide range of other psychological factors such as mental health and resilience. Where positive and negative affect measures have been treated separately, they have been shown to be predicted by slightly different set of variables (Village & Francis, 2021c, 2023a, 2023b), implying that in trying to improve psychological wellbeing it may be better to attend to factors promoting positive affect

rather than trying to remove factors that increase negative affect (Francis & Village, 2023).

The balanced affect model suggests that spiritual wellbeing may be differentially related to positive and negative affect. The Spiritual Wellbeing Change Scale (SWCS), developed in the *Covid-19 & Church-21* survey, is based on self-reported changes in prayer, Bible reading, closeness to God, the quality of spiritual life, and spiritual health (Village & Francis, 2023a). Among 1,878 Anglicans living in England, this scale predicted better changes in self-reported mental and physical health, after controlling for changes in individual differences and psychological wellbeing. More positive change in spiritual wellbeing was apparent in women rather than in men, among older rather than younger people, among those who lived alone, among those with certain psychological type preferences, and among those who showed better changes in psychological wellbeing (Village & Francis, 2023a). In that study, positive affect was correlated with an overlapping, but different, subset of variables than negative affect, suggesting that it may be better to treat the two aspects of psychological wellbeing separately when looking for predictors of spiritual wellbeing.

Psychological type and spiritual wellbeing

Psychological type, a model of personality developed initially by Carl Jung (Jung, 1923) and modified by Katharine Briggs and Isabel Briggs Meyers (Myers & Myers, 1980), has been shown to predict a wide range of individual differences across many religious groups (see Francis, 2005; Village & Francis, 2023c and references therein). During the pandemic, better positive affect change was associated with psychological dispositions such as extraversion rather than introversion and intuition rather than sensing, while worse positive affect change was associated with emotional volatility and preference for thinking rather than feeling (Village & Francis, 2022c, 2023a). Changes

in negative affect showed little relationship to psychological type preferences, which is in line with the idea that positive and negative affect may have independent effects on overall psychological wellbeing.

Lockdown in the USA during the pandemic

Although lockdowns were a common feature during the COVID-19 pandemic, different countries applied these in different ways and at different times. In the UK, for example, the initial lockdown in 2020 was universal and excluded people from churches; it was followed by regional and local lockdowns in autumn 2020 and by another national lockdown in 2021, when churches were allowed to offer socially distanced services. In the USA the situation was more complex because stay-at-home orders varied by state and over time. In the first few months of the pandemic, 42 states issued such orders (Moreland et al., 2020) and these were generally in force for the next year, restricting movements for non-essential activities. This resulted in a more varied pattern for the lockdown of churches than in the UK. It is estimated that only around a third of churches were closed in summer of 2020 and by March 2022 43% of churchgoers reported services were back to pre-pandemic levels (Nortey, 2022).

Research questions

A modified version of the *Covid-19 & Church-21* survey was distributed from June to August 2021 among the Episcopal Church in the United States (TEC), a province of the Anglican Communion. This offered a chance to replicate some of the analyses used on the sample of English Anglicans, and to focus more specifically on what factors might have shaped changes in spiritual wellbeing. This paper examines change in spiritual wellbeing in this sample in relation demography, personality, and psychological wellbeing in order to address the following research questions:

1. Which groups in TEC fared better or worse in terms of spiritual wellbeing during the COVID-19 pandemic in 2021?
2. Did psychological type preferences explain any of the variation in spiritual wellbeing changes?
3. Were changes in spiritual wellbeing related to changes in psychological wellbeing as measured by changes in positive and negative affect?

Method

Procedure

The *Covid-19 & Church-21* online survey was launched on 22 January 2021 in order to capture an update on how clergy and laity across Great Britain and Ireland were faring after such a prolonged period of disruption caused by the COVID-19 pandemic. It coincided with another national lockdown introduced earlier in the month to cope with a third upturn in infections in the UK. A version of the same survey was designed for the Episcopal Church in the United States (TEC) which was a slightly shorter version of the UK survey, and which contained some modifications to items that suited the TEC context. It was publicised and distributed through Virginia Theological Seminary, ran from 1 June to 23 August 2021, and collected over 5,000 responses from across the USA, including 4,536 from members of TEC living in the USA.

Sample profiles

Of the total TEC responses, 3,403 had sufficiently complete responses to be included in this analysis. The final sample comprised 65% women and 35% men, the majority (67%) were in their 50s or 60s, 93% identified with White ethnicity, and 24% were ordained (Table 1). Just over a quarter (27%) reported that they lived alone, 6% reported they had definitely had the virus.

-Insert Table 1 about here-

Instruments

The Spiritual Wellbeing Change Scale (SWCS) is designed to measure changes in spiritual wellbeing among specifically Christian samples. It consists of five items: frequency of prayer, frequency of bible reading, trust in God, quality of spiritual life, and overall spiritual health (for details, see Village & Francis, 2023a). Cronbach's alpha in the final sample used in this analysis was .83 (Table 2).

-Insert Table 2 about here-

The Index of Balanced Affect Change, TIBACh, (Francis & Village, 2021; Village & Francis, 2021a, 2022c) consists of two five-item scales designed to measure changes in Positive Affect, PA, (Happiness, Excitement, Thankfulness, Hopefulness, and Confidence) and Negative Affect, NA, (Exhaustion, Anxiety, Stress, Fatigue, and Frustration) (Table 3). In this sample, the scales had good internal reliability as measured by Cronbach's alpha (PA = .80, NA = .85).

-Insert Table 3 about here-

Psychological variables were assessed using the revised version of the Francis Psychological Type and Emotional Temperament Scales (FPTETS-R) (Village & Francis, 2023c, 2023e). This is a 50-item instrument that comprises four sets of ten forced-choice items related to each of the four components of psychological type: orientation (extraversion or introversion), perceiving process (sensing or intuition), judging process (thinking or feeling), and attitude toward the outer world (judging or perceiving), and ten items related to emotional temperament (calm or volatile). In this sample, the alpha reliabilities were .83 for the EI scale, .77 for the SN scale, .78 for the TF scale, .81 for the JP scale, and .83 for the CV scale. Scores (rather than binary

preferences) were used to indicate inclinations for extraversion, intuition, feeling, judging, and emotional volatility.

Demographic variables included sex (0 = male, 1 = female), age (to nearest decade, 1= 20s to 8 = 80s+), household status (0 = living with others, 1 = living alone), virus experience (0 = not known to have had COVID-19, 1 = definitely had COVID-19) and ordination status (0 = laity, 1 = clergy). Ethnicity was measured using seven categories; initial analyses indicated that one group, Black or African American, had distinct responses to all the others, so for ease of presentation of results this was used a dummy variable for ethnicity (0 = other ethnicities, 1 = Black or African American).

Analysis

The first step of the analysis was to examine bivariate correlations between the SWCS and independent variables and between the independent variables themselves. The second step involved hierarchical linear regression with predictor variables entered in six blocks: block one, personal variables (sex, age, and ethnicity); block two living status; block three ordination status; block four psychological type and emotional temperament variables; block five change in negative affect; block six change in positive affect. The aim was to look for evidence that differences in SWCS scores between demographic groups were related to underlying psychological dispositions and whether SWCS scores were best predicted by negative or positive affect, or a combination of both.

Results

The levels of endorsement in the SWCS showed changes that were in line with other studies that have suggested that many people experienced something of a spiritual awakening during the COVID-19 pandemic (Table 2). In this sample, 52% reported

increased frequency of prayer, 44% increased quality of spiritual life, 42% ~~increase~~ increased Trust in God, and 46% better overall spiritual health. The least positive change was for increases in bible reading (25%). Few people reported decreases in these aspects, with figures ranging from 6% reporting decline in trust in God to 23% reporting decline in the quality of spiritual life. The generally positive picture for spiritual wellbeing was despite generally negative changes in psychological wellbeing (Table 3). Just under half of the sample reported increases in exhaustion, anxiety, stress, fatigue, or frustration, while 38% felt less excited, 23% less happy, and 17% less hopeful and 18% less confident. The exception was that 69% felt more thankful, a result that was similar to that found among English Anglicans (Francis & Village, 2021).

Change in SWCS scores were more positive in women than in men, among older than among younger people, among Black or African Americans than among other ethnicities, among those living alone than among those with others in their household, and among clergy than among lay people (Table 4). In terms of psychological dispositions, change in spiritual wellbeing was more positive among those who tended towards extraversion rather than introversion, among those who tended towards intuition rather than sensing, and among those tended towards feeling rather than thinking. It was more negative among those who tended towards judging rather than perceiving and among those with more volatile emotional temperament. Positive change in spiritual wellbeing being was also negatively correlated with negative affect and positively correlated with positive affect.

-Insert Table 4 about here-

The correlation matrix showed that some of the independent variables were correlated. For example, on average compared with men, women were more likely to

live on their own, less likely to be ordained, had higher feeling and volatility scores, and had higher scores for negative affect change. Some of the psychological type scores were significantly correlated with positive affect scores. As has been found among English Anglicans (Village & Francis, 2023a), emotional volatility was a strong predictor of both increased negative affect and reduced positive affect. For this reason, multiple regression was needed to identify the independent effects of predictor variables on spiritual wellbeing change scores.

Hierarchical linear regression

Multiple regression showed that the effects of sex, age, ethnicity, and living alone were retained (albeit reduced in some cases) after allowing for other variables in the final model (Table 5). The greater spiritual wellbeing among clergy was lost when psychological type variables were added to model 4, suggesting that this difference related to the fact that clergy in this sample tended on average to be more extravert, intuitive, and feeling, and less judging than the lay people. Adding affect scores to models 5 and 6 removed the effect of emotional volatility, suggesting that volatility may have affected spiritual wellbeing by predisposing people to poor psychological wellbeing during the pandemic. The effect of negative affect on spiritual wellbeing disappeared when positive affect was in the model, showing that spiritual wellbeing was most closely associated with changes in positive affect such as excitement, happiness, thankfulness, hopefulness, and confidence.

-Insert Table 5 about here-

Discussion and Conclusions

This study examined self-reported changes in spiritual and psychological wellbeing among a sample of 3,403 members of the Episcopal Church (USA) during the COVID-

19 pandemic in 2021. The results offered answers to the three research questions:

The first question asked which groups in TEC fared better or worse in terms of spiritual wellbeing during the pandemic. The results showed that differences in spiritual wellbeing related to sex, age, ethnicity, household status, and ordination status. Women tended to have more positive spiritual wellbeing change than men, an effect that was independent of their slightly different demographic and psychological profiles. In the English study men tended to be generally more negative than women about changes in religious life during lockdown (Village & Francis, 2021b) and this may have dampened their spiritual wellbeing. Men generally found it harder to cope with church closures or the move to virtual worship, so they may have felt the disruption or their spiritual routines more keenly. The age effect reflects a widespread finding in general populations that younger people found lockdowns harder than did older people, showing poorer mental health and wellbeing (Holingue et al., 2020; Pieh et al., 2020; Pierce et al., 2020). This was also true for English Anglicans (Village & Francis, 2022c) and probably reflects the greater demands of people who were likely to be working and to have school-age children to care for at home in lockdowns. This may have ~~had~~ hit their spiritual wellbeing particularly hard compared with older people.

Among English Anglicans, clergy (especially stipendiary clergy in charge of parishes) tended to have poorer psychological wellbeing than lay people, mainly because of increases in negative affect (Village & Francis, 2022c). In this sample from TEC, clergy overall showed greater increases in both negative and positive affect compared to laity, though the correlation with negative affect was the more pronounced. The more positive average scores for spiritual wellbeing change among clergy compared to laity seemed to be related to a slightly different psychological profile, with clergy tending to be more extravert, intuitive, or feeling and less judging and less

emotionally volatile, all of which characteristics were associated with better spiritual wellbeing. Despite the higher levels of stress among those charged with parishes, they may have been better predisposed to sustain their spiritual wellbeing than lay people of different personality who had less ministry pressures.

The second research question was whether changes in spiritual wellbeing were related to psychological type or emotional temperament. The effects of personality were in line with studies elsewhere and with the characteristics associated with different psychological types or temperaments. Although it was assumed initially by many that lockdowns would suit introverts more than extraverts (because they value solitude and are drained by social interaction), this seems not to have been the case (Travers, 2020; Village & Francis, 2021a; Wei, 2020). Social media brought many meetings and social interactions directly into peoples' homes through online interactions and may have made it harder for introverts to find solitude. Intuitive types tend to respond well to changes and new possibilities, and the enforced change in religious routines may have been more positive for them than for sensing or judging types, who tend to value tradition and routine. Thinking types tended be more critical and less accommodating of changes to religious life (Village & Francis, 2021b) and this negativity may have led to more negative changes in spiritual wellbeing.

The third research question was whether changes in spiritual wellbeing were related to changes in psychological wellbeing as measured by changes in positive and negative affect. The links between emotional volatility, psychological wellbeing, and spiritual wellbeing suggested that a disposition to emotional volatility may have led people in this sample to experience greater increases in negative affect and/or decreases in positive affect. Emotional volatility in the FPTETS is correlated with other measures of neuroticism (Village & Francis, 2022a) may point to underlying poor mental health,

which was shown in many studies to be associated with reduced ability to cope with the pandemic (Lewis et al., 2022; O'Connor et al., 2021; Stroud & Gutman, 2021).

Although emotional volatility was associated with increased negative affect, and the latter with reduced spiritual wellbeing, the strongest independent association was between better spiritual wellbeing and increased positive affect. This could be interpreted as positive changes in spiritual wellbeing (specifically in this population, Christian spirituality) leading to better psychological wellbeing by improvements in positive affect, though the evidence for cause and effect is difficult to establish in this sort of study. What is clear is that many in TEC experienced better spiritual wellbeing during the pandemic, and this was associated in particular with better psychological wellbeing as measured by change in positive affect.

Limitations of the study

This cross-sectional study required instruments that measured changes in spiritual wellbeing and psychological affect after the pandemic started. It would be good to be able to do longitudinal studies where the same people can complete instruments on a regular basis so that the effects of future disruptions (including further pandemics) can be assessed more accurately by measuring absolute levels at points in time. Churches might consider doing this as a matter of ongoing routine. Detailed panel studies may help to establish cause and effect in terms of psychological affect and spiritual wellbeing.

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Ethical approval

Ethical approval was granted by the Research Ethics Committee for the School of Humanities, Religion and Philosophy ay York St John University (approval code: HRP-RS-AV-04-20-01). All participants had to affirm they were 18 or over and give their informed consent by ticking a box that gave access to the rest of the survey.

Disclosure statement

No potential conflict of interest was reported by the author(s).

Table 1. Demographic characteristics of the original and final samples of TEC respondents

		N =	4536[a]	3403[b]
			%	%
Sex		Male	35.4	34.6
		Female	64.6	65.4
Age		20s	1.1	0.9
		30s	3.6	3.0
		40s	5.7	5.5
		50s	12.5	12.1
		60s	28.9	30.1
		70s	36.5	36.8
		80s+	11.8	11.7
Ethnicity		White	90.6	93.2
		Black or African American	3.7	3.5
		Latino or Hispanic	1.6	1.5
		Other ethnicity	4.1	1.8
Status		Lives alone	26.8	27.0
		Had virus	5.4	5.8
Ministry status		Ordained	23.7	24.4
		Laity	76.3	75.6

Note. [a] All TEC living in USA, [b] Final sample without missing values.

Table 2 Items in the Spiritual Wellbeing Change Scale (SWCS)

	CITC	Decreased	Same	Increased
		%	%	%
Personal prayer	.65	12	36	52
Bible reading	.57	15	60	25
Quality of spiritual life	.74	23	33	44
Trust in God	.56	6	52	42
Spiritual health	.60	18	36	46

Note. N = 3,403. CICT = Corrected Item Total Correlation.

Table 3 Items in The Index of Balanced Affect Change (TIBACh)

	CITC	Less	Same	More
		%	%	%
(a) Positive Affect				
Excited	.52	38	46	16
Happy	.60	23	56	20
Thankful	.49	4	28	69
Hopeful	.69	17	39	43
Confident	.63	18	55	27
(b) Negative Affect				
Exhausted	.63	10	42	47
Anxious	.66	15	38	47
Stressed	.73	17	36	47
Fatigued	.71	16	38	47
Frustrated	.59	15	40	44

N = 3,403. CICT = Corrected Item Total Correlation

Table 4 Bivariate correlations

		1	2	3	4	5	6	7	8	9	10	11	12
1	SWCS												
2	Female	.06***											
3	Age	.07***	.02										
4	Black / African Am.	.10***	.03	-.03									
5	Lives alone	.07***	.15***	.14***	.01								
6	Ordained	.05**	-.15***	-.11***	-.02	-.07***							
7	Extraversion	.11***	-.04*	.06**	-.01	-.06***	.04*						
8	Intuition	.13***	-.02	-.09***	-.01	.01	.23***	.09***					
9	Feeling	.16***	.18***	.01	-.01	.02	.16***	.11***	.27***				
10	Judging	-.07***	-.06***	-.03	.00	-.04*	-.10***	-.13***	-.48***	-.37***			
11	Volatility	-.15***	.07***	-.23***	-.03	-.05***	-.05**	-.17***	-.05**	-.09***	.09***		
12	Negative affect	-.23***	.05**	-.25***	-.02	-.03*	.11***	-.09***	.02	.01	.03	.35***	
13	Positive affect	.45***	.01	.07***	.08***	.00	.05***	.15***	.07***	.13***	-.07***	-.30***	-.55***

Note. N = 3,403. $^{*}p < .05$; $^{**}p < .01$; $^{***}p < .001$. SWCS = Spiritual Wellbeing Change Scale.

Table 5 Hierarchical linear regression of Spiritual Wellbeing Change Scale scores

		Model					
	0	1	2	3	4	5	6
Female	.06***	.06***	.05**	.06***	.05**	.06***	.04*
Age	.07***	.07***	.06***	.07***	.04*	.01	.04*
Black / African Am.	.10***	.10***	.10***	.10***	.10***	.10***	.07***
Lives alone	.07***		.05**	.05**	.05**	.05**	.06***
Ordained	.05**			.07***	.02	.04*	.01
Extraversion	.11***				.08***	.07***	.04*
Intuition	.13***				.11***	.11***	.10***
Feeling	.16***				.12***	.13***	.08***
Judging	-.07***				.06**	.06**	.05*
Volatility	-.15***				-.11***	-.05*	.00
Negative affect	-.23***					-.21***	.01
Positive affect	.45***						.42***
	R^2	.019	.021	.026	.076	.114	.230
	ΔR^2		.002**	.005***	.050***	.038***	.115***

Note. N = 3,403. Column 0 = bivariate correlations. $^{*}p < .05$; $^{**}p < .01$; $^{***}p < .001$.

References

Baker, J. O., Martí, G., Braunstein, R., Whitehead, A. L., & Yukich, G. (2020). Religion in the age of social distancing: How COVID-19 presents new directions for research. *Sociology of Religion*, *81*(4), 357-370. https://doi.org/10.1093/socrel/sraa039

Bradburn, N. M. (1969). *The structure of psychological well-being*. Aldine.

Büssing, A., Rodrigues Recchia, D., Dienberg, T., Surzykiewicz, J., & Baumann, K. (2021). Awe/gratitude as an experiential aspect of spirituality and its association to perceived positive changes during the COVID-19 pandemic. *Frontiers in psychiatry*, *12*, 642716. https://doi.org/10.3389/fpsyt.2021.642716

Büssing, A., Rodrigues Recchia, D., Hein, R., & Dienberg, T. (2020). Perceived changes of specific attitudes, perceptions and behaviors during the Corona pandemic and their relation to wellbeing. *Health and Quality of Life Outcomes*, *18*(1), 374. https://doi.org/10.1186/s12955-020-01623-6

Campbell, H. A. (Ed.). (2020). *Digital ecclesiology: A global conversation*. Digital Religion Publications. https://doi.org/10.21423/digitalecclesiology.

Cattelino, E., Testa, S., Calandri, E., Fedi, A., Gattino, S., Graziano, F., Rollero, C., & Begotti, T. (2023). Self-efficacy, subjective well-being and positive coping in adolescents with regard to Covid-19 lockdown. *Current Psychology*, *42*, 17304-17315. https://doi.org/10.1007/s12144-021-01965-4

Chang, M.-C., Chen, P.-F., Lee, T.-H., Lin, C.-C., Chiang, K.-T., Tsai, M.-F., Kuo, H.-F., & Lung, F.-W. (2021). The effect of religion on psychological resilience in healthcare workers during the coronavirus disease 2019 pandemic. *Frontiers in Psychology*, *12*(616). https://doi.org/10.3389/fpsyg.2021.628894

Coppola, I., Rania, N., Parisi, R., & Lagomarsino, F. (2021). Spiritual well-being and mental health during the COVID-19 pandemic in Italy. *Frontiers in psychiatry*, *12*(296). https://doi.org/10.3389/fpsyt.2021.626944

Counted, V., Pargament, K. I., Bechara, A. O., Joynt, S., & Cowden, R. G. (2022). Hope and well-being in vulnerable contexts during the COVID-19 pandemic: does religious coping matter? *The Journal of Positive Psychology*, *17*(1), 70-81. https://doi.org/10.1080/17439760.2020.1832247

Crea, G., Filosa, L., & Alessandri, G. (2021). Emotional distress in Catholic priests and religious sisters during COVID-19: the mediational role of trait positivity. *Mental Health, Religion & Culture*, *24*(7), 728-744. https://doi.org/10.1080/13674676.2021.1937586

De Diego-Cordero, R., Ávila-Mantilla, A., Vega-Escaño, J., Lucchetti, G., & Badanta, B. (2022). The role of spirituality and religiosity in healthcare during the COVID-19 pandemic: An integrative review of the scientific literature. *Journal of Religion and Health*, *61*(3), 2168-2197. https://doi.org/10.1007/s10943-022-01549-x

Desrochers, J. E., Bell, A. L., Nisbet, E. K., & Zelenski, J. M. (2022). Does spending time in nature help students cope with the COVID-19 pandemic? *Sustainability*, *14*(4), 1-18. https://doi.org/10.3390/su14042401

DiGregorio, B. D., Corcoran, K. E., Colyer, C. J., & Stein, R. E. (2021). 'When the waves roll high': Religious coping among the Amish and Mennonites during the COVID-19 pandemic. *Religions*, *12*(9), 1-17. https://www.mdpi.com/2077-1444/12/9/678

Edelman, J., Vincent, A., Kolata, P., & O'Keeffe, E. (2021). *British ritual innovation under COVID-19*. https://indd.adobe.com/view/6fe8a0a2-a121-4ca4-bd46-5cf4c2a7575f

Francis, L. J. (2005). *Faith and psychology: Personality, religion and the individual*. Darton, Longman & Todd.

Francis, L. J., & Village, A. (2021). Introducing The Index of Balanced Affect Change (TIBACh): A study among Church of England clergy and laity. *Mental Health Religion & Culture*, *24*(8), 770-779. https://doi.org/10.1080/13674676.2021.1923679

Francis, L. J., & Village, A. (2023). Predictors of perceived changes in psychological wellbeing among clergy in the USA serving in the Episcopal Church during the 2021 Covid-19 pandemic. *Journal of Anglican Studies*, 1-24. https://doi.org/10.1017/S1740355323000591

Francis, L. J., Village, A., & Lewis, C. A. (2021). Spiritual awakening among Anglican clergy during the pandemic: Exploring the effects of personal factors, personality, church orientation, and religious practice. *Духовність особистості: методологія, теорія і практика (Spirituality of Personality: Methodology, Theory and Practice) 101*(2(Ч.1)), 234-257. https://doi.org/10.33216/2220-6310-2021-101-2_1-234-257

Francis, L. J., Village, A., & Lewis, C. A. (2022). Spiritual awakening among church members during the pandemic: An empirical study in England and Wales. *Journal of Empirical Theology*, *35*, 47-75. https://doi.org/10.1163/15709256-20221427

Holingue, C., Badillo-Goicoechea, E., Riehm, K. E., Veldhuis, C. B., Thrul, J., Johnson, R. M., Fallin, M. D., Kreuter, F., Stuart, E. A., & Kalb, L. G. (2020). Mental distress during the COVID-19 pandemic among US adults without a pre-existing mental health condition: Findings from American trend panel survey. *Preventive Medicine*, *139*, 106231. https://doi.org/https://doi.org/10.1016/j.ypmed.2020.106231

Hyde, B., & Joseph, D. (2022). "There is 'plenty' of grace—it is not a limited commodity!:" Experiences of grace in Australian faith communities during the pandemic. *Pastoral Psychology*, *71*(5), 583-596. https://doi.org/10.1007/s11089-022-01024-0

Joseph, D., & Hyde, B. (2022). 'There is light despite all of the darkness': Exploring perceptions of faith and hope during the pandemic in Australian church settings. *Transformation*, *40*(1), 63-79. https://doi.org/10.1177/02653788221144701

Jung, C. G. (1923). *Psychological types*. Routledge.

Kadiroğlu, T., Güdücü Tüfekci, F., & Kara, A. (2021). Determining the religious coping styles of adolescents in Turkey during COVID-19. *Journal of Religion and Health*, *60*(5), 3406-3417. https://doi.org/10.1007/s10943-021-01410-7

Kappler, S., Okozi, I., Diouf, F., & Hartinger, K. (2022). The impact of the COVID-19 pandemic on the psychological well-being of Catholic priests in Canada. *Religions*, *13*(8), 718. https://doi.org/10.3390/rel13080718

Kelley, H. H., Dollahite, D. C., James, S., & Marks, L. D. (2023). Changes in spiritual practices and relational well-being during the COVID-19 pandemic. *Marriage & Family Review*, *59*(2), 41-64. https://doi.org/10.1080/01494929.2021.2022563

Lacomba-Trejo, L., Schoeps, K., Valero-Moreno, S., del Rosario, C., & Montoya-Castilla, I. (2022). Teachers' response to stress, anxiety and depression during COVID-19 lockdown: What have we learned from the pandemic? *Journal of School Health*, *92*(9), 864-872. https://doi.org/https://doi.org/10.1111/josh.13192

Lewis, K. J. S., Lewis, C., Roberts, A., Richards, N. A., Evison, C., Pearce, H. A., Lloyd, K., Meudell, A., Edwards, B. M., Robinson, C. A., Poole, R., John, A., Bisson, J. I., & Jones, I. (2022). The effect of the COVID-19 pandemic on mental health in individuals with pre-existing mental illness. *BJPsych Open*, *8*(2), 1-9. https://doi.org/10.1192/bjo.2022.25

Lucchetti, G., Góes, L. G., Amaral, S. G., Ganadjian, G. T., Andrade, I., Almeida, P. O. d. A., do Carmo, V. M., & Manso, M. E. G. (2021). Spirituality, religiosity and the mental health consequences of social isolation during Covid-19 pandemic. *The International journal of social psychiatry*, *67*(6), 672-679. https://doi.org/10.1177/0020764020970996

Matud, M. P., Zueco, J., Díaz, A., Del Pino, M. J., & Fortes, D. (2023). Gender differences in mental distress and affect balance during the first wave of COVID-19 pandemic in Spain. *Current Psychology*, *42*, 21790-21804. https://doi.org/10.1007/s12144-022-03282-w

McFerran, L., & Graveling, L. (2021). *Clergy wellbeing changes during the COVID-19 pandemic*. https://www.churchofengland.org/sites/default/files/2021-08/Living%20Ministry%20Wave%203%20-%20clergy%20wellbeing%20and%20the%20pandemic.pdf

Moreland, A., Herlihy, C., Tynan, M. A., Sunshine, G., McCord, R. F., Hilton, C., Poovey, J., Werner, A. K., Jones, C. D., Fulmer, E. B., Gundlapalli, A. V., Strosnider, H., Potvien, A., García, M. C., Honeycutt, S., & Baldwin, G. (2020). Timing of state and territorial COVID-19 stay-at-home orders and changes in population movement - United States, March 1-May 31, 2020. *Morbidity and Mortaliy Weekly Report*, *69*(35), 1198-1203. https://doi.org/10.15585/mmwr.mm6935a2

Myers, I. B., & Myers, P. B. (1980). *Gifts differing*. Consulting Psychologists Press.

Nortey, J. (2022). *More houses of worship are returning to normal operations, but in-person attendance is unchanged since fall*. Pew Research Centre. Retrieved 5 January 2024 from https://www.pewresearch.org/short-reads/2022/03/22/more-houses-of-worship-are-returning-to-normal-operations-but-in-person-attendance-is-unchanged-since-fall/

O'Connor, R. C., Wetherall, K., Cleare, S., McClelland, H., Melson, A. J., Niedzwiedz, C. L., O'Carroll, R. E., O'Connor, D. B., Platt, S., Scowcroft, E., Watson, B., Zortea, T., Ferguson, E., & Robb, K. A. (2021). Mental health and well-being during the COVID-19 pandemic: Longitudinal analyses of adults in the UK COVID-19 Mental Health & Wellbeing study. *The British Journal of Psychiatry*, *218*(6), 326-333. https://doi.org/10.1192/bjp.2020.212

Pankowski, D., & Wytrychiewicz-Pankowska, K. (2023). Turning to religion during COVID-19 (Part I): A systematic review, meta-analysis and meta-regression of studies on the relationship between religious coping and mental health throughout COVID-19. *Journal of Religion and Health*, *62*, 510-543. https://doi.org/10.1007/s10943-022-01703-5

Pérez-Fuentes, M. D. C., Molero Jurado, M. D. M., Martos Martínez, Á., & Gázquez Linares, J. J. (2020). Threat of COVID-19 and emotional state during

quarantine: Positive and negative affect as mediators in a cross-sectional study of the Spanish population. *PloS one*, *15*(6), e0235305. https://doi.org/10.1371/journal.pone.0235305

Pieh, C., Budimir, S., & Probst, T. (2020). The effect of age, gender, income, work, and physical activity on mental health during coronavirus disease (COVID-19) lockdown in Austria. *Journal of Psychosomatic Research*, *136*, 110186. https://doi.org/https://doi.org/10.1016/j.jpsychores.2020.110186

Pierce, M., Hope, H., Ford, T., Hatch, S., Hotopf, M., John, A., Kontopantelis, E., Webb, R., Wessely, S., McManus, S., & Abel, K. M. (2020). Mental health before and during the COVID-19 pandemic: A longitudinal probability sample survey of the UK population. *The Lancet Psychiatry*, *7*(10), 883-892. https://doi.org/10.1016/S2215-0366(20)30308-4

Pirutinsky, S., Cherniak, A. D., & Rosmarin, D. H. (2020). COVID-19, mental health, and religious coping among American Orthodox Jews. *Journal of Religion and Health*, *59*(5), 2288-2301. https://doi.org/10.1007/s10943-020-01070-z

Rigoli, F. (2021). The link between COVID-19, anxiety, and religious beliefs in the United States and the United Kingdom. *Journal of Religion and Health*, *60*(4), 2196-2208. https://doi.org/10.1007/s10943-021-01296-5

Stroud, I., & Gutman, L. M. (2021). Longitudinal changes in the mental health of UK young male and female adults during the COVID-19 pandemic. *Psychiatry Research*, *303*, 114074. https://doi.org/https://doi.org/10.1016/j.psychres.2021.114074

Ting, R. S.-K., Aw Yong, Y.-Y., Tan, M.-M., & Yap, C.-K. (2021). Cultural responses to Covid-19 pandemic: Religions, illness perception, and perceived stress [Original Research]. *Frontiers in Psychology*, *12*, 1-19. https://doi.org/10.3389/fpsyg.2021.634863

Travers, M. (2020, 30 April). *Are extroverts suffering more from the quarantine? Not so fast, says new research*. Retrieved 15 December 2020 from

https://www.forbes.com/sites/traversmark/2020/04/30/are-extroverts-suffering-more-from-the-quarantine-not-so-fast-says-new-research/#3541bac951a0

Village, A., & Francis, L. J. (2021a). Exploring affect balance: Psychological wellbeing of Church of England clergy and laity during the Covid-19 pandemic. *Journal of Religion & Health*, *60*, 1556–1575. https://doi.org/10.1007/s10943-021-01225-6

Village, A., & Francis, L. J. (2021b). Shaping attitudes toward church in a time of Coronavirus: Exploring the effects of personal, psychological, social, and theological factors among Church of England clergy and laity. *Journal of Empirical Theology*, *34*(1), 102-128. https://doi.org/10.1163/15709256-12341423

Village, A., & Francis, L. J. (2021c). Wellbeing and perceptions of receiving support among Church of England clergy during the 2020 COVID-19 pandemic. *Mental Health Religion & Culture*, *24*(5), 463-477. https://doi.org/10.1080/13674676.2021.1906214

Village, A., & Francis, L. J. (2022a). Factorial structure and validity of the Francis Psychological Type and Emotional Temperament Scales (FPTETS). *Mental Health, Religion & Culture*, *25*(9), 897-909. https://doi.org/10.1080/13674676.2022.2026311

Village, A., & Francis, L. J. (2022b). How did psychological wellbeing of Church of England clergy and laity change from the first to the third national COVID-19 lockdowns? *Pastoral Psychology*, *71*, 653-666. https://doi.org/10.1007/s11089-022-01017-z

Village, A., & Francis, L. J. (2022c). Psychological wellbeing and sources of support for Church of England clergy and laity during the third national COVID-19 lockdown. *Rural Theology*, *20*(2), 72-90. https://doi.org/10.1080/14704994.2022.2120972

Village, A., & Francis, L. J. (2023a). The effects of spiritual wellbeing on self-perceived health changes among members of the Church of England during the

COVID-19 pandemic in England. *Journal of Religion and Health, 62,* 2899-2915. https://doi.org/10.1007/s10943-023-01790-y

Village, A., & Francis, L. J. (2023b). God is in his heaven, all's right with the world: Psychological wellbeing and belief in divine control during the third Covid-19 lockdown among Anglican clergy and laity in England. *Journal of Psychology and Theology, 51*(2), 141–173. https://doi.org/10.1177/00916471221149027

Village, A., & Francis, L. J. (2023c). Introducing the Francis Psychological Type and Emotional Temperament Scales (FPTETS): A study among church leaders and church members. *Religion, Brain & Behavior*, 1-21. https://doi.org/10.1080/2153599x.2022.2160800

Village, A., & Francis, L. J. (2023d). Lockdown worship in the Church of England: Predicting affect responses to leading or accessing online and in-church services. *Journal of Beliefs & Values*, *44*(2), 280-296. https://doi.org/10.1080/13617672.2022.2101087

Village, A., & Francis, L. J. (2023e). Revising the Francis Psychological Type and Emotional Temperament Scales (FPTETS). *Mental Health Religion & Culture*, 1-10. https://doi.org/0.1080/13674676.2023.2232330

Wei, M. (2020). Social distancing and lockdown – an introvert's paradise? An empirical investigation on the association between introversion and the psychological impact of COVID19-related circumstantial changes [Original Research]. *Frontiers in Psychology, 11*(2440). https://doi.org/10.3389/fpsyg.2020.561609

Xie, Z., & Ren, Z. (2023). Call for faith: Religiousness, religious coping and psychological disturbance of Chinese Christians during COVID-19. *Disaster Medicine and Public Health Preparedness, 17,* e403, Article e403. https://doi.org/10.1017/dmp.2022.295

Yıldırım, M., Arslan, G., & Wong, P. T. P. (2022). Meaningful living, resilience, affective balance, and psychological health problems among Turkish young adults during coronavirus pandemic. *Current Psychology, 41*(11), 7812-7823. https://doi.org/10.1007/s12144-020-01244-8

Zhang, H., Hook, J. N., Van Tongeren, D. R., Davis, E. B., Aten, J. D., McElroy-Heltzel, S., Davis, D. E., Shannonhouse, L., Hodge, A. S., & Captari, L. E. (2021). Spiritual fortitude: A systematic review of the literature and implications for COVID-19 coping. *Spirituality in Clinical Practice*, *8*(4), 229-244. https://doi.org/10.1037/scp0000267