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To cite this Article Namini, S. and Murken, S.(2009)'Self-chosen involvement in new religious movements (NRMs): well-being and mental health from a longitudinal perspective', Mental Health, Religion & Culture, 12:6, 561 - 585 To link to this Article: DOI: 10.1080/13674670902897618

URL: http://dx.doi.org/10.1080/13674670902897618

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Self-chosen involvement in new religious movements (NRMs): well-being and mental health from a longitudinal perspective

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(Received 10 September 2008; final version received 16 March 2009)

In spite of a cult debate that has lasted for some decades now, the controversy about the harmfulness of new religious movements (NRMs) continues. A core question remains whether current or past involvement with an NRM has an adverse effect on psychosocial adjustment. In this study, this question is investigated from a longitudinal perspective. First, an overview on previous research is given. Then findings from an empirical study on individuals who get involved with NRMs in Germany are reported. Life satisfaction, depression and anxiety are investigated over the course of three years for two groups: (a) "stayers": individuals who remained in the chosen NRM (n=51) and (b) "leavers": persons who left a Pentecostal parish during the course of the study (n=9). The results confirm findings from previous studies which indicate that joining an NRM is often preceded by some kind of (retrospectively reported) crisis and that well-being increases with involvement. Adaptation during involvement was comparable to that of comparison groups from the general population and remained relatively stable over time. Among several aspects of involvement related to health and well-being, religious sense of coherence and secure attachment to God were most often and most strongly correlated with the outcome measures. Surprisingly, the hypothesis of a crisis accompanying the exit from the Pentecostal parish was only partially supported. Overall, the study does not confirm the popular notion that membership in an NRM must be harmful. It calls for a sensitive handling of the topic.

Keywords: new religious movements; well-being; mental health; longitudinal study; Germany

Introduction: the cult debate

Catchwords like "snapping" (Conway & Siegelman, 1978/2005), "brainwashing" (Lifton, 1961/1989; Schein, 1961), "mind control" (Hassan, 1990), "thought reform" (Lifton, 1961/1989) and "coercive persuasion" (Schein, 1961) illustrate vividly the fear that has kept a heated debate on cults or new religious movements (NRMs) going for some decades now. It started in the 1960s when a great number of unfamiliar alternative religious groups emerged in Western industrialised countries. Concepts like the ones mentioned above were introduced to explain why a normally reasonable person would follow an unfamiliar religious leader and join his or her group with unconventional religious practices, sexual

ISSN 1367–4676 print/ISSN 1469–9737 online © 2009 Taylor & Francis DOI: 10.1080/13674670902897618 http://www.informaworld.com

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ethics, communal life, etc. Signs and symptoms like sudden, drastic changes in values and behaviour, reduction of cognitive and emotional functioning, dissociation, estrangement from family and regressive behaviours were ascribed to the involvement in an NRM. In order to name this variety of phenomena and classify them as a clinical diagnosis some clinicians coined terms like "cult indoctrinee syndrome" (Delgado, 1977, as cited in Freckelton, 1998, p. 6–7), and "destructive cultism" as "a sociopathic illness" (Shapiro, 1977, p. 83). Others such as Clark and Lifton claimed that being brainwashed resulted in a mental illness which was so subtle that it could hardly be recognised and diagnosed by ordinary psychiatric methods (cf. Richardson, 1980). Thus, the question of whether membership in an NRM is detrimental to a person's well-being and mental health has been one of the core questions in the public and scientific debate since its inception.

In spite of vast theological and structural differences, a wide variety of non-mainstream religious or spiritual groups and movements have been labelled as cults – or interchangeably, *sects* (French: *sectes*, Italian: *sette*, Spanish: *sectas*, German: *Sekten*)¹ in the course of the debate. The terms function to brand groups that for some often highly subjective reasons are suspected of brainwashing and harming their members. Hence, there are certainly no exact definitions of "cults." For those thinking in theological terms, the core feature of a religious cult is its deviation from a presumed religious truth as expressed in "historic Christianity" or "essential biblical doctrines" (Martin, 1993, as cited in Durocher, 1999, p. 582). For others, arguing in rather psychological terms, the characteristics of a cult are consistent with the main accusations against the groups. In this sense, Langone is often cited; he defined a cult as

a group or movement that, to a significant degree, (a) exhibits great or excessive devotion or dedication to some person, idea, or thing, (b) uses a thought-reform program to persuade, control and socialize members (i.e., to integrate them into the group's unique pattern of relationships, beliefs, values, and practices), (c) systematically induces states of psychological dependency in members, (d) exploits members to advance the leadership's goals, and (e) causes psychological harm to members, their families and the community. (Langone, 1995, p. 5)

In order to avoid the connotations of the terms "cult" or "sect," scholars struck by the paucity of systemised knowledge and facts about "cults" and membership in the groups have also addressed the problem. They sought for alternative, more neutral terms to name the many, usually rather small religious groups and movements that have arisen in newer times. The term *new religious movement* emerged as the most common expression for this kind of religion (among other terms such as "alternative religions" or "marginalised religious movements"). Although there is some definitional vagueness to the term NRM as well (cf. Robbins & Bromley, 1993), it allows examination of the members of a variety of groups without the a priori implication that they must be harmed.

Until today, researchers are split into two parties: (a) those who have a critical stance towards NRMs and are often called "anti-cultists" and (b) more liberal scholars who are labelled "cult-apologists" by the former (e.g., Lewis, 2004). Research results and conclusions seem to derive considerably from the authors' perspective and the methodology chosen. In sum, it can be said that negatively biased in-depth studies of groups are rare, but that single case studies of impaired members or ex-members and clinical studies are used to negatively generalise about the groups in question. Specific beliefs and practices are seldom considered. Studies of current members, applying quantitative methods to a larger sample, have usually come to different, much more positive conclusions (cf. Saliba, 2004). They show that the popular negative view on cults is in many cases not justified and simplifies a very complex issue which can hardly be explained by brainwashing and similar claims (Anthony & Robbins, 2004; Dawson, 1998).

However, more liberal scientific research has seldom found its way into the discussion. Thus, the severe disagreements on new religions have not been overcome yet and Richardson's (1995, p. 145) conclusion that "continuing controversy about the new religions, popularly known as 'cults,' makes the study of mental health of participants in such groups a topic of major importance for the psychology of religion" is still relevant. Its significance is by no means restricted to a theoretical interest in the phenomenon at hand. The question on NRMs and the mental health of their members has a number of practical implications, in fact. It touches a diversity of ethical and legal questions as they relate to psychotherapy, medical treatment, child custody litigations, etc.

The present study aims to enhance clinicians' and scholars' understanding of the complex interplay of membership in NRMs and individuals' mental health and well-being. First, an overview on international studies is given for this purpose. Then findings from our empirical study conducted in Germany are reported. In contrast to most previous studies which focus on certain stages of the membership process, this research adopts a longitudinal perspective and considers voluntary entry, involvement with and exit from an NRM.

Mental health and membership in NRMs

Psychopathology preceding membership

In order to explain why individuals join new religious groups that question some of the most basic religious faiths, lifestyles and values of Western cultures, critics have concluded that NRMs specifically address and attract vulnerable individuals such as young and mentally impaired people. Whereas some empirical studies indicated that members display increased levels of psychopathology prior to joining an NRM (e.g., Deutsch, 1975; Galanter, Rabkin, Rabkin, & Deutsch, 1979), the majority of research, however, does not support the notion that psychopathology is a precondition to joining. There is even some evidence that it is not in the interest of the groups to accept very emotionally unstable individuals as members (cf., Barker, 1991–1992; Galanter, 1980).

Nevertheless, numerous studies show that membership in NRMs and conversion to other religions is often preceded by times of crisis, some dating back to childhood and youth. Retrospective reports of strains such as emotional problems and frustrations, dissatisfaction with life, difficult life situations or a lack of fulfilling relationships prior to joining have been found for a variety of groups and contexts (e.g., in the studies on converts to the Unification Church or the Pentecostal Church in the Netherlands [Kox, Meeus, & 't Hart, 1991]; the Osho movement and Transcendental Meditation movement in Germany [Klosinski, 1985]; and the Hare Krishna movement in the United States [e.g., Dein & Barlow, 1999; Poling & Kenney, 1986] and in Italy [Di Fiorino, Fizzotti, & Miniati, 2002]). Moreover, converts often report difficult or even traumatic childhood experiences, especially detached or negative relationships to one or both parents (e.g., Ullman, 1982, 1989; see Murken & Namini, 2007, for a review on childhood familial experiences as antecedents to adult membership in NRMs). Research done in the context of a German Governmental Commission on "So-called Sects and Psychogroups" showed that in the biographies of many members or former members, conflicts (some subconscious) and life themes could be identified for which the converts were seeking a solution (see Deutscher Bundestag Referat Öffentlichkeitsarbeit, 1998).

In a recent Belgian study, Buxant, Saroglou, Casalfiore and Christians (2007, p. 220) aspired "to go further than the normality vs. pathology debate and focus on psychological

dimensions that, although non-pathological, may indicate some psychological vulnerability of NRM members." In their study of members of several NRMs in Belgium, the authors found cognitive, affective and relational "vulnerabilities" – that is, high insecurity in childhood attachment to parents, high (current) need for closure and depressive tendencies prior to joining the group. However, it would be wrong to reduce the motives for membership in NRMs solely to vulnerabilities or crisis, which by no means are necessary pre-requisites for the decision to join. Most studies point to individual differences (e.g., Levine, 1985; Inaba, 2004). In particular, social and religious aspects can be important reasons for involvement, too, with motives varying among members of different groups (see the reviews by Dawson, 1998; Murken, 1998).

Benefits of membership

Findings which indicate that a considerable proportion of individuals who join NRMs experience some kind of crisis or tension before getting involved raise the question of what happens after people have joined the groups. Do they experience their membership as beneficial? Are they happy and healthy?

Mental health and personality assessments of NRM members have hardly supported the popular notion that involvement with an NRM inevitably leads to harmful consequences and that rates of mental illness among members of NRMs are higher than in the general population. A number of studies indicate that NRM members as an aggregate do not show signs of mental disorders, even though single members may show severe symptoms (e.g., Di Fiorino et al.'s, 2002, study of Hare Krishna devotees in Italy; Kuner's, 1983, research on German members of the Unification Church, Family of Love and Ananda Marga; Latkin, Hagan, Littman, & Sundberg's, 1987, study on Rajneeshpuram residents).² Moreover, it seems that many individuals benefit from membership in the chosen group (cf. reviews on the topic, e.g., Murken, 1998; Richardson, 1985, 1995; Rochford, Purvis, & Eastman, 1989; Saliba, 1993, 2003). Studies indicating psychological impairment of NRM members often suggest that its cause predated involvement with the group (Rochford et al., 1989).

Among the potential benefits of membership that are reported in studies are a decrease in drug use and relief from neurotic distress in members of the American Divine Light Mission and the Unification Church (Galanter & Buckley, 1978; Galanter, Buckley, Deutsch, Rabkin, & Rabkin, 1980; Galanter et al., 1979); escape from a depressive development, alcohol and drug abstinence, decrease of a sense of inferiority and increase in self-esteem among German sannyasins (Klosinski, 1985); an increase in life satisfaction in a study of Rajneeshpuram residents (Latkin et al., 1987); and security in current adult attachment, absence of depressive tendencies, positive outlook on the world and optimism for the future among members of several NRMs in Belgium (Buxant et al., 2007).

Little is known about the stability of NRM members' well-being and mental health over time, as hardly any longitudinal studies exist. Available studies indicate that well-being and mental health remain relatively stable over the course of time; changes in personality profile point to a beneficial rather than detrimental effect of long-term membership (Galanter, 1986; Ross, 1985). These findings are supported by cross-sectional "quasilongitudinal" research: Studies which compared short-term and long-term members indicated that long-term members' psychosocial integration is on average better than short-term members' adaptation (e.g., Di Fiorino et al., 2002; Kuner, 1983; Nathawat & Khan, 1995). However, as Di Fiorino et al. (2002) pointed out, this cross-sectional research strategy does not reveal whether differences between short- and long-term members are caused by other factors. For example, it may be that members with poor mental health at the time of joining leave the movement after a shorter period of time or with higher probability than members with good mental health.

Costs of membership

Although the above-mentioned studies indicate that many individuals profit from involvement with (certain) NRMs and that systematic harm through membership in NRMs is rare, the phenomenon cannot be reduced solely to the beneficial aspect. While many individuals seem to benefit from their (often temporary) membership and experiences in the groups, others can be unaffected or adversely influenced by it (cf. Barker, 1989, 1997). Just as other relationships like marriage or psychotherapy can in some cases turn out to be difficult or even traumatic, the decision to join an NRM can result in experiences of abuse and trauma, too. These mostly single cases are beyond the scope of this paper and need to be studied separately in depth. Nevertheless, the endeavour to paint a balanced picture of membership in NRMs requires that the problems, conflicts and sacrifices that may go along with an involvement are also considered.

These costs can vary with the specifics of the group chosen, although some are of a rather general nature. For example, considerable "acculturative stress" (Weiss & Mendoza, 1990) can go along with the decision to leave one's family and deeply immerse oneself in a minority religion with a highly unfamiliar lifestyle. In the course of involvement, stress may arise from specific demands that members are expected to fulfill. From his study on marriage and well-being in the Unification Church (in which spouses are designated by the religious leader, Reverend Moon) Galanter (1986) concluded that membership in the group both precipitated distress caused by the unusual marital experience and relieved it through affiliation to the group. The costs of conversion that Klosinski (1985) observed in a sample of German sannyasins were complete or partial social drop-out, dependency on the "master," unlearning the competence of planning ahead, uncertainty and mental destabilisation, as well as overidentification with others.

In our German research project on individuals who were new members or recently got involved with a Pentecostal parish, the New Apostolic Church, or Jehovah's Witnesses, various psychosocial conflicts in the context of new involvement with an NRM were investigated (Murken & Namini, 2004a). The study showed that single individuals may experience considerable conflict, but that on average only little inter-personal and inner psychic conflict was reported. Findings indicate that the time spent on religious practice is significantly correlated with the frequency of conflicts with the non- or other-religious environment. Thus, the causes of conflicts in the context of NRM membership are not necessarily of a genuinely religious nature. Moreover, conflicts which arise during involvement with an NRM often existed prior to contact with the group and are simply shifted to the context of a person's religiosity (e.g., Pfeifer, 1999).

Other studies point to the reparative and substitutive functions that NRMs can offer to individuals with a weak sense of self (e.g., Kraus & Eckert, 1997; Kriegman & Solomon, 1985). Although the "psychosocial fit" (Kriegman & Solomon, 1985) between the appeal of the group and the needs of the person can have a stabilising effect, from a psychological perspective, it may be costly in the long run. It often does not offer a solution to the specific problem, but can lead to a displacement of psychological problems and can hamper an individual's psychosocial development (cf. also Kraus, 1999). Some authors

found indication that characteristics like dependency, rigidity or restriction of autonomy are the price which has to be paid for the structure and identity that NRMs offer (Buxant & Saroglou, 2008a; Walsh & Bor, 1996).

Overall, liberal scholars have done much less research on costs of membership in NRMs than on potential benefits. Besides, most authors consider only one aspect, benefits or costs. As the following quote by Barker illustrates, the context of the cult debate (which does not always stick to facts) complicates the matter: "The somewhat paradoxical situation is that the more we feel the NRMs are having *untrue* bad things said about them, the less inclined we are to publish *true* 'bad' things about the movements" (Barker, 1995, p. 305, original emphasis).

Consequences of leaving

Exit from an NRM is a process which affects the affective, cognitive and organisational level (Wright & Ebaugh, 1993). It usually begins with growing doubts and dissatisfaction that the individual keeps to him- or herself before the detachment from the group starts with a more open expression of dissatisfaction and visible tension between member and NRM. An eliciting event or a series of events finally leads to exit from the group. Conflicts with the group, inner conflicts and the emotional ties to other members of the group can make it difficult to leave, especially when a person has been a member for a long time and his or her complete social life is tied to the group (Bromley, 1997, 2004). Nevertheless, in contrast to popular stereotypes that NRMs cannot be left on a person's own initiative, most members leave the group voluntarily on their own. Empirical data demonstrated that membership in NRMs usually does not last very long and can be considered a transitional phase which often serves a developmental purpose (cf. Dawson, 1998).

The voluntariness of the exit from an NRM has been shown to be decisive for the consequences of the experience. Whereas forceful extraction from a group often results in a negative view of the experience, most former members who left voluntarily manage to successfully assimilate their NRM experience or at least can see positive aspects of their involvement, although mixed feelings may remain (e.g., Buxant & Saroglou, 2008b; Galanter, 1983; Wright, 1987). The process of leaving can be compared to exits from other high commitment groups like marriage (Wright, 1991) or other previously emotionally meaningful roles like jobs (Ebaugh, 1988). Thus, like divorce and retirement, it can be a highly distressful loss which demands a reorientation of a person's identity and social network.

The degree of impairment that is found in former members of NRMs varies between studies. Galanter (1983) studied former members of the Unification Church and found adjustment and well-being to be comparable to other samples, although about a third of the individuals reported serious emotional problems after leaving. The author concluded that membership was a developmental stage and that individuals benefited from their experience. Similarly, Buxant and Saroglou's (2008b) recent study on ex-members of various NRMs in Belgium who reported a strong past sense of belonging and exclusivity with the group indicated that leaving did not seriously harm the individuals, although a reduction in general well-being right after departure could be observed in interviews. In members with depressive tendencies, the exit seemed to have triggered a depressive state. Other studies on former members of "cults" report (at least temporarily) more severe psychiatric problems or psychological distress which are attributed to previous involvement with the group (e.g., Swartling & Swartling's, 1992,

research on ex-members of the Word of Life Bible School in Sweden; Malinoski, Langone, & Lynn's, 1999, American comparison study on former members of the International Church of Christ, former Catholics and inter-varsity Christian Fellowship graduates; see also Aronoff, Lynn, & Malinoski, 2000, for a review). However, Wright (1991) points out that post-involvement symptoms like anxiety, depression, guilt, loneliness, dissociated states and obsessive review do not have to result from harmful experiences in the NRM, but can as well be understood as a concomitant of the exit process similar to that in individuals that undergo a divorce.

Emotional problems that are reported by former members in the context of leaving usually decrease as a function of time (e.g., Galanter, 1983; Walsh, Russell, & Wells, 1995). According to Levine (1981, p. 537), "a minimum of six months is estimated as necessary before an adequate readjustment can be made to the 'real' world, a genuine appreciation of its qualities, and a sense that the group is no longer a need or a threat." Wright (1991) concluded that restabilisation and reintegration were accomplished by 89% of his sample of defectors from Unification Church, Hare Krishna movement and Children of God/Family of Love within two years.

Linking factors between involvement and psychosocial consequences

Critics of NRMs who warn of the harm that can arise from involvement with an NRM and liberal scholars who find potential "therapeutic" effects of membership alike have so far neglected the systematic study of potential linking factors between membership in an NRM and its effects. Most studies assume a causal relationship between psychological variables and membership in NRMs without examining the factors which are effective. The fact that certain characteristics are found in members of an NRM is prematurely taken as evidence that it must be the group which causes them. Some theoretical considerations on psychological and sociological aspects of (new) religious involvements which may lead to negative consequences of involvement have been listed by Murken (1997) and Barker (2003), but have not been systematically empirically studied so far.

Among the few authors who investigated specific aspects of NRM involvement that have potentially positive effects, Galanter (1989) must be mentioned. His theoretical and empirical observations point to the importance of belief (more precisely: finding comfort and closeness to God) and group cohesiveness as predictors of members' sense of wellbeing. The author emphasises the significance of close affiliation to the group as the central condition for the experience of relief from neurotic distress (*relief effect*). Murken (1998) suggested that findings from other research on religion and mental health should be applied in order to explain the association between membership in an NRM (as not being genuinely different from membership in other religions) and mental health. In his summary, he points at five functional aspects that can potentially explain the effects of religion: (a) the regulative function of religion with regard to health behaviour (e.g., the prohibition of drugs); (b) the significance of the community and social ties; (c) the development of cognitive coherence through a religious interpretation of situations; (d) self-esteem regulation as the individual mirrors him- or herself in the relationship to God and the community; (e) the coping advantage in highly distressing and borderline situations (e.g., answers in the face of death). In a similar vein, a negative relationship between religion and well-being can be explained by analogue aspects such as religiously justified behaviour detrimental to one's health (e.g., taking drugs, extensive fasting) or a negative, self-esteem diminishing God image with resulting fear of punishment.³

Present empirical study

The present empirical study was carried out in Germany and has to be understood in the context of this country's religious situation. In Germany, like in many other countries, NRMs, including the groups studied, are a "fringe phenomenon" (Schoen, 2001). Despite the persistent general changes in the religious field, the religious situation in Germany is still characterised by a great homogeneity. Of the 69% of the population that belong to a religious group, more than 89% adhere to either the Lutheran or the Roman-Catholic Church, another 5.8% to Islam and 2.5% belong to one of the Orthodox Churches. Less than 2% of the German population belong to another religion, including NRMs. At least formally, membership is still traditionally passed on by most parents as they let their children be baptised by "their" church. In contrast to the United States, religious pluralism and a free choice or change of religion during one's lifetime is still uncommon. Hence, membership in NRMs is watched with suspicion and the "sect debate" has been especially vehement. In the 1990s, widespread public concern and serious accusations against various NRMs that are perceived to be fundamentally different from the two major Christian churches and other world religions finally led to the appointment of a governmental commission on "So-called Sects and Psychogroups," which investigated the topic from 1996 to 1998. In its final report, it came to the conclusion that new religious and ideological movements are no threat for society as a whole. On the individual level an (often only temporary) commitment "can involve considerable problems and risks; however, the (potential) gains for the individual and for society must also be borne in mind" (Deutscher Bundestag Referat Öffentlichkeitsarbeit, 1998, p. 282). Moreover, the commission observed a considerable lack of research on NRMs in Germany.

Thus, in order to remedy the empirical deficiency, a large multi-method, longitudinal research project (which the present study is part of) was implemented to investigate psychosocial motives and consequences of joining an NRM in Germany. The purpose of this study is to enhance the psychological understanding of well-being and mental health in different stages of the process of adult voluntary membership in an NRM without prior socialisation in the group. The stability or change of well-being and mental health is longitudinally studied; the investigation includes the period before getting involved with the NRM (retrospective data), the time of remaining in the group chosen and after leaving it. In addition, this study examines which aspects of the experience are related to well-being and mental health during involvement with the group.

From the findings and assumptions reported above, the following hypotheses were deduced:

- (1) Well-being prior to closer contact with an NRM is lower than in the general population and lower than at a later time of involvement (indication of crisis).
- (2) Well-being and mental health scores of individuals who are involved with an NRM are comparable to scores of other groups of the general population.
- (3) Well-being and mental health of individuals who are involved with an NRM remain stable over time.
- (4) Well-being and mental health of individuals who leave an NRM decrease.
- (5) Well-being and mental health during involvement with an NRM are positively related to the beneficial aspects and negatively related to costly aspects of involvement.

Due to its research design, the present study extends earlier research in several ways. First, in contrast to the mixed samples of socialised and converted members which were used in other studies (e.g., Buxant & Saroglou, 2008a), it focuses exclusively on persons who got involved with an NRM as adults without having been socialised in the group. This restriction seemed necessary as socialised and converted members of NRMs can be assumed to be in a very different situation (e.g., individuals who grew up in an NRM do not have an external frame of reference and choice that is available to adult members who have grown up outside the group). Second, the study applies a longitudinal instead of a cross-sectional design. This implies the possibility to study individuals who leave the groups close to the point of their departure (instead of many years later as other studies are forced to do; e.g., Walsh et al., 1995, report that on average study participants had left the groups 8.5 years ago). Third, in contrast to previous studies, beneficial and costly aspects of involvement are directly operationalised and not just inferred from belongingness to a certain group. NRMs are understood as one form of religion that is not fundamentally different from other religions, but mainly differs from other religions with regard to date of origin and societal reactions. Thus, potential beneficial and costly aspects were included in this study which the psychology of religion has shown to be related to well-being: existential coherence and meaning, closeness or attachment to God, satisfaction with community as indicator of religious support and inter-personal and inner psychic conflict (see Hill & Pargament, 2003, for an overview). Both beneficial and costly aspects of involvement were considered in order to reach a balanced understanding of the phenomenon.

Method

Participants and procedure

As already mentioned, the present study is part of a larger longitudinal research project. Participants were individuals who, at the first point of analysis, showed a recent interest or were new members in one of three NRMs in Germany – a Pentecostal parish within the Federation of Pentecostal Churches (FPC), the New Apostolic Church (NAC) or Jehovah's Witnesses (JW) in Germany.⁴ In order to ensure that the individuals had their first contact as recently as possible, only persons who, at the first time of analysis, had been affiliated with the group no longer than two years after their baptism or sealing⁵ and had not been brought up in the group were eligible for participation in the study. This criterion was intended to minimise recollection errors, especially with regard to the time before the first contact with the group.

In order to find individuals who met our criteria and would be willing to participate repeatedly in our research, we needed the support of the religious groups. After consultations with the NRMs' leading bodies, the groups actively supported the recruitment process by: (a) encouraging worshippers to participate at the end of Sunday services (FPC); (b) sending letters to all potential respondents within a certain geographical area (NAC) or (c) personally asking potential participants (JW). All individuals who indicated interest were phoned and informed separately by researchers before they decided whether or not to participate. Those who agreed were administered questionnaires and structured interviews at least once (t_1 : March to June 2003). Before a second, third and fourth data collection (t_2 : November 2003 to January 2004; t_3 : May to August 2004; t_4 : May to July 2006) all individuals – irrespective of their remaining in the NRM or leaving it – were contacted to ensure willingness to continue with the study before questionnaires were sent out or personal interviews were conducted. Individuals received monetary reimbursement for participation. The NRMs' leading bodies did not get any notice of the participants' identities.

A sample of 71 individuals was recruited altogether at t_1 (FPC: n=21; NAC: n=28; JW: n=22) of which 83% (n=59) participated over the whole time period from t_1 to t_4 . Two sub-samples were considered in this study:

- (a) *Stayers*: Fifty study participants completed the whole research project and remained in the NRM in which they were involved at t_1 (FPC: n = 6; NAC: n = 23; JW: n = 21). At t_1 76% (n = 38) were already baptised or sealed in the NRM, and eight more were baptised in the course of the study; at t_1 the time that had elapsed since baptising or sealing was 1.07 years (SD = 0.55) on average. Mean time of contact with the group was 5.02 years (SD = 4.53). The age of respondents ranged from 18 to 66 years (M = 40.89, SD = 12.15). Sixty-four percent (n = 32) were women; 70% (n = 35) had a partner.
- (b) Leavers: Nine study participants left the t_1 -NRM during the course of the research and could be interviewed at least once after their exit from the group. All belonged to the Pentecostal group and left on their own initiative (one person who had to leave the parish because he moved away, was not included in this sub-sample). At t_1 three individuals were already baptised in the parish, and two more were baptised during the course of the study; at t_1 mean time since baptism was 0.70 years (SD = 0.57). The average time of contact with the group was 1.06 years (SD = 0.51). The age of respondents ranged from 20 to 53 years (M = 39.28, SD = 9.92); six were women. Six participants had a partner.⁶

Measures

Life satisfaction

Respondents' current overall life satisfaction at all measurement points $(t_1, t_2, t_3 \text{ and } t_4)$ was assessed by the item "How satisfied would you say you are currently, all in all, with your life?" Participants were asked to respond to this statement on an 11-point scale with the anchors *totally dissatisfied* (0) and *totally satisfied* (10) (Wohlfahrtssurvey, 1998). In addition, at t_1 participants were asked to retrospectively assess their life satisfaction before first closer contact with the group with a slightly modified phrase ("When you think of the year before you came into closer contact with your faith community: How satisfied would you say you were at that time, all in all, with your life?"). Since the question on current life satisfaction was part of the German Welfare Survey 1998, comparison data from a representative sample of the West German population was available (Schöb, 2001).

Anxiety and depression

The German version of the Hospital Anxiety and Depression Scale (Herrmann, Buss, & Snaith, 1995) was used to assess anxiety and depression at all points of measurement. The two sub-scales consist of seven items each, and responses are made on a 4-point scale ranging from 0 (*the symptom is absent*) to 3 (*the symptom is very severe*). Sum scores range from 0 to 21 with higher scores indicating greater impairment. In this research project, Cronbach's alphas for the two sub-scales were 0.78 for depression and 0.81 for anxiety ($N_{t1}=71$). The test manual gives depression and anxiety means of a general healthy control group (Herrmann et al., 1995) which were used as comparison data.

Religious sense of coherence

In order to assess the sense of coherence (cf. Antonovsky, 1987) participants get from their religiosity, three items were developed in the context of this project: "My faith gives me the trust that there are and will be answers to all questions in my life" (comprehensibility); "My faith gives me the trust that I can accept all current and future occurrences and experiences as challenges or that I at least can somehow handle them" (manageability); "My faith gives me the trust that it is worthwhile to continue my efforts and commitment even in the most difficult situations" (meaning). Participants were asked to indicate on a 5-step Likert scale, ranging from *not at all* (1) to *very much* (5), how much they agreed with each paragraph. A total religious sense of coherence score was computed by averaging the item scores. Cronbach's alpha was 0.68 ($N_{t1} = 71$) which can be considered satisfactory in view of the scale's shortness.

Secure attachment to God

Following Kirkpatrick and Shaver's (1990) approach, attachment to God was modelled on a parental attachment measure. Hazan's (1990, as cited in Granqvist & Kirkpatrick, 2004, p. 232) revised self-report attachment history measure was modified to measure attachment to God. Respondents were asked how much they agreed with the following prototypical description of a secure attachment to God on a 5-point scale with the poles *not at all* (1) to *very much* (5): "I experience God's relationship with me as loving. I know that he backs me when I need his help."

Satisfaction with community

In order to assess how much at home study participants felt in their religious community, an earlier version of the scale "Parish as a social resource" from Huber's Structureof-Religiosity-Test (Huber, 2003, 2006) was used. It consists of five items regarding the aspects feeling secure in the parish; meeting with refusals (reverse); finding support; feeling abandoned (reverse); and having people to talk to about problems. Participants were asked to indicate on a 5-step Likert scale, ranging from *not at all* (1) to *very much* (5), how much they agreed with each paragraph. In this study, Cronbach's alpha was 0.75 $(N_{t1} = 71)$.

Conflict with the environment

In order to assess whether an individual's affiliation with the NRM lead to conflicts with his or her environment, respondents were asked the following question: "Sometimes it is difficult to reconcile one's faith or affiliation with one's religious community with other areas of life. This can lead to conflicts. What about your life? – How often do you experience conflicts because of your faith in the area of ...? (1) job, (2) family/friends, (3) leisure time." Answers could be given on a 5-point Likert scale, ranging from 1 (*never*) to 5 (*very often*). A mean score was computed to assess mean conflict with the environment.

Bad conscience

As an indicator of inner psychic conflict caused by the affiliation to the NRM, the item "It often happens that I have a bad conscience when I disregard principles of faith" was included in a list of religious conflict and religious resources items. Participants indicated their agreement with the item on a 5-step scale with the poles 1 (*not at all*) and 5 (*very much*).

With one exception, all items were put together in self-administered questionnaires. The retrospective item on life satisfaction in the year before first closer contact with the NRM was part of a highly structured interview at the first point of measurement.

Analysis

Computations were conducted with the statistical software SPSS for Windows 14.0. An alpha significance level of at least p < 0.05 was used for all analyses; findings with p < 0.10 are reported as trends.

Results

Comparison of stayers and leavers

In order to check whether stayers and leavers differed systematically on the outcome variables, *t*-tests were computed for the data collected at t_1 (the only data that were available for the individuals of both sub-groups). No significant differences between the groups were found for current life satisfaction, depression and anxiety at t_1 . However, a significant difference with a large effect size was found for retrospective life satisfaction in the year before first closer contact with the NRM (t[56]=2.38, p=0.021, d=0.86): Leavers scored considerably lower than stayers (see also Table 1).

				Point in time	e		
	Ν	Year before contact ^a M (SD)	During contact $-t_1$ M (SD)	During contact– <i>t</i> ₂ <i>M</i> (<i>SD</i>)	During contact– <i>t</i> ₃ <i>M</i> (<i>SD</i>)	During contact– <i>t</i> ₄ <i>M</i> (<i>SD</i>)	Comparison value (M)
Stayers							
Life satisfaction	46–50	5.31 (2.79)	7.79 (1.46)	7.77 (1.31)	7.82 (1.50)	8.00 (1.27)	7.7 ^b
Depression (HADS-D)	49–50	_	2.62 (2.52)	2.55 (2.55)	2.56 (2.57)	2.00 (1.74)	3.4 ^c
Anxiety (HADS-D)	49–50	_	4.38 (2.92)	5.31 (3.00)	4.66 (2.68)	4.08 (2.96)	5.8 ^d
Leavers				After exit f	rom the paris	$sh^{e}, M(SD)$	
Life satisfaction	9	2.89 (2.85)	7.00 (1.80)		6.78 (2.59)		7.7 ^b
Depression (HADS-D)	9	—	4.22 (4.66)		6.33 (6.67)		3.4 ^c
(HADS-D) Anxiety (HADS-D)	9	_	6.22 (4.89)		6.44 (6.58)		5.8 ^d

Table 1. Means and standard deviations of outcome variables for stayers and leavers at different points in time plus comparison values.

Notes: ^aRetrospective measurement at t_1 .

^bRepresentative sample of the West German population 1998 (N = 1922; Schöb, 2001, p. 11–19).

^cGeneral healthy control group (test manual, Herrmann et al., 1995, p. 21).

^dGeneral healthy control group (test manual, Herrmann et al., 1995, p. 21).

^eAs study participants left the Pentecostal parish at different times, the next point of measurement after exit for which data are available was used for each individual. Thus, time between leaving the parish and point of measurement after exit ranges from 0.41 to 1.48 years (M = 0.78, SD = 0.40).

Changes in life satisfaction and mental health: stayers

In order to assess whether retrospectively reported life satisfaction in the year before closer contact with the group scores indicated a phase of crisis prior to joining the NRM, they were compared to the mean life satisfaction which was reported by a representative sample of the West German population in 1998 (Schöb, 2001). T-tests for one sample showed that the mean life satisfaction that stayers retrospectively reported for the year before first contact was significantly lower than the mean score of the comparison group from the population with the effect size being large (t[48] = -6.00, p = 0.000, d = 0.86). In contrast, the comparisons of current life satisfaction at t_1 , t_2 , t_3 and t_4 with the mean score for the representative sample yielded that the groups no longer differed significantly. Similarly, *t*-tests for one sample were computed to examine whether stayers differed significantly from a general healthy control group (Herrmann et al., 1995) on depression and anxiety. At all measurement points, stayers scored significantly lower on depression than the control group $(t_{t1}[49] = -2.19, p = 0.034, d = 0.31; t_{t2}[48] = -2.33, p = 0.024, d = 0.33;$ $t_{t3}[49] = -2.31, p = 0.025, d = 0.33; t_{t4}[48] = -5.62, p = 0.000, d = 0.80)$. Analyses yielded a similar result for anxiety $(t_{t1}[49] = -3.44, p = 0.001, d = 0.49; t_{t2}: ns; t_{t3}[49] = -3.01, p = -3.$ $0.004, d = 0.43; t_{t4}[48] = -4.07, p = 0.000, d = 0.58$). With two exceptions (depression and anxiety at t_4) all effect sizes were small.

In order to test whether life satisfaction and mental health changed over time, repeated measures ANOVAS with Greenhouse–Geisser corrections were computed. For life satisfaction, the analysis yielded a highly significant result and a large effect size $(F[2.16] = 26.75, p = 0.000, \eta^2 = 0.40)$. Bonferroni pairwise comparisons revealed that retrospective life satisfaction in the year before contact was significantly lower than current life satisfaction at t_1 , t_2 , t_3 and t_4 (p = 0.000) each, whereas no significant differences were found between current life satisfaction scores at the four points of measurement (for an illustration, see Figure 1). Similarly, depression scores at t_1 , t_2 , t_3 and

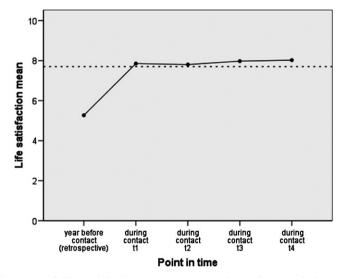


Figure 1. Development of life satisfaction among stayers from the year before first contact with the NRM (retrospective) until t_4 . (The dashed line indicates the comparison value from the 1998 representative German Welfare Survey sample.)

 t_4 did not differ significantly. For anxiety, a repeated measures ANOVA yielded a significant difference between the four time points and a medium effect size $(F[2.67]=4.54, p=0.006, \eta^2=0.09)$ with Bonferroni pairwise comparisons showing a significant difference between the scores at t_2 and t_4 (p=0.018).

Changes in life satisfaction and mental health: leavers

Results for leavers were consistent to a large extent with the results for stayers. *T*-tests for one sample indicated that retrospective life satisfaction in the year before contact with the NRM was significantly lower than the mean score of the representative sample from the general population with the effect size being large (t[8] = -5.07, p = 0.001, d = 1.69). Mean life satisfaction at t_1 and after leaving did not differ significantly from the mean of the representative sample, although the leavers' mean score remained below the mean of the general population. Similarly, leavers did not differ significantly from a general healthy control group on depression and anxiety, although the leavers' mean was somewhat higher.

As for stayers, repeated measures ANOVAS with Greenhouse–Geisser corrections for leavers yielded a highly significant result and a large effect size for life satisfaction $(F[1.90] = 21.92, p = 0.000, \eta^2 = 0.73)$. Bonferroni pairwise comparisons again showed that retrospective life satisfaction in the year before contact was significantly lower than current life satisfaction when in contact with the NRM at t_1 (p = 0.001) as well as life satisfaction after having left the group (p = 0.003), whereas the difference between life satisfaction at t_1 and life satisfaction after exit was not significant (cf. Figure 2). Paired samples *t*-tests comparing anxiety at t_1 and after having left the group also showed no significant difference between the scores. For depression, the *t*-test yielded a trend (t[8] = -1.90, p = 0.094), indicating an increase of depression after exit.

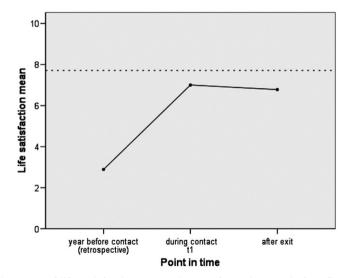


Figure 2. Development of life satisfaction among leavers from the year before first contact with the NRM (retrospective) until after exit. (The dashed line indicates the comparison value from the 1998 representative German Welfare Survey sample.)

Association between beneficial and costly aspects of involvement and outcome measures (stayers)

Table 2 shows correlations between different beneficial (religious sense of coherence, secure attachment to God and satisfaction with community) and costly aspects of religion (conflicts with environment and bad conscience), respectively at t_1 and outcome measures (life satisfaction, depression and anxiety) at all time points. Beneficial and costly aspects did not correlate significantly with life satisfaction; just one trend was found -a positive correlation between secure attachment to God at t_1 and current life satisfaction at t_2 . However, analyses yielded a number of significant correlations and trends between mental health measures and religious benefits and costs. All correlations were small to moderate and showed a uniform pattern: that is, a positive association between religious resources and mental health and a negative association between religious conflicts and mental health, respectively. Religious sense of coherence and secure attachment to God at t_1 correlated negatively with depression and/or anxiety at t_1 , t_3 and t_4 . Satisfaction with community at t_1 was negatively related to depression at t_1 , t_2 and t_3 . Furthermore, it tended to be negatively correlated with anxiety at t_2 (trend). Higher conflict with the environment at t_1 significantly correlated with higher anxiety at t_1 , t_3 and t_4 as well as depression at t_4 . Hardly any association was found between bad conscience at t_1 and mental health measures. Analyses yielded just one positive correlation between bad conscience and anxiety at t_1 and a trend for a relation to anxiety at t_2 .

Discussion

This empirical study longitudinally investigated well-being (life satisfaction) and mental health (depression and anxiety) in individuals who became involved with a Pentecostal parish, the New Apostolic Church or Jehovah's Witnesses. In agreement with our hypotheses and earlier findings of primarily cross-sectional studies cited above, the data indicate that individuals experienced reduced well-being prior to joining the NRMs and that there is an increase in well-being as they become involved with the groups. Well-being and mental health during involvement with the groups proved to be relatively stable and comparable to that of other groups from the general population over the course of three years. Thus, the potentially stabilising effect of affiliation seems to be lasting.

Positive effects of involvement in the NRMs studied can be explained by features of the three groups which – to varying degrees and in specific ways – offer social contact, direction for life and assistance with daily matters along with religious faith and practice (cf. Murken & Namini, 2004b). Although some authors have concluded that belonging to Pentecostal churches and Jehovah's Witnesses is detrimental to members' mental health (cf. Bergman, 1996; Saliba, 1993), other research on the movements does not support these conclusions. Studies on Pentecostalism point to potentially positive aspects of involvement like mood-lifting effects of Pentecostal music and emotional release during religious practice (e.g., Gritzmacher, Bolton, & Dana, 1988; Miller & Strongman, 2002). For Jehovah's Witnesses, Besier and Besier (2001) found that most members who participated in a survey in Germany reported that they did not experience any negative effects of membership, but that becoming acquainted with the group helped them to cope with a diversity of problems. Ellison's (1991) American research also showed a rather positive association of involvement with Jehovah's Witnesses and well-being.⁷

However, the assumption that well-being and mental health during contact with an NRM is associated with the beneficial and costly aspects of involvement included in this

		t_1			t_2			t_3			<i>t</i> ₄	
	Life satisfaction	Life Depression Anxiety Life Depression Anxiety Life Depression Anxiety Life Depression Anxiety astisfaction (HADS-D) (HADS-D) satisfaction (HADS-D) (HADS-D	Anxiety (HADS-D)	Life satisfaction	Life Depression Anxiety isfaction (HADS-D) (HADS-D) s	Anxiety (HADS-D)	Life satisfaction	Life Depression Anxiety tisfaction (HADS-D) (HADS-D)	Anxiety (HADS-D)	Life satisfaction	Life Depression Anxiety isfaction (HADS-D) (HADS-D	Anxiety (HADS-D)
Religious sense	0.138	-0.458^{**}	-0.321*	0.125	-0.206	-0.185	0.181	-0.346*	-0.273 ^x	-0.043	-0.214	-0.283*
Secure attachment	0.015	-0.417^{**}	-0.315^{*}	0.260^{x}	-0.092	-0.193	0.226	-0.371^{**}	-0.337*	-0.110	-0.274 ^x	-0.353*
Satisfaction with	0.001	-0.311*	-0.212	0.198	-0.411^{**}	-0.249 ^x	0.182	-0.295*	-0.235	-0.150	-0.117	-0.206
community at t_1 Conflict with the	-0.014	0.205	0.390^{**}	-0.244	0.058	0.174	-0.191	0.166	0.297*	-0.058	0.312*	0.332*
environment at t_1 Bad conscience at t_1	-0.139	0.052	0.294*	-0.060	-0.142	0.242 ^x	-0.125	-0.102	0.189	-0.137	0.028	0.228
Notes: $N = 43-50$. **Correlation is significant at the 0.01 level (two-tailed).	gnificant at	the 0.01 lev	vel (two-tai	led).								

Table 2. Correlations between beneficial and costly aspects of involvement at t₁ and outcome measures at t₁ to t₄ (only stayers).

*Correlation is significant at the 0.05 level (two-tailed). *Trend at the 0.10 level (two-tailed).

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study is only partially supported by the data. The strongest and most frequent correlations were found for religious sense of coherence and secure attachment to God with mental health, which points to a primary significance of genuinely religious aspects. The choice of the conflict aspects may have been sub-optimal. The report of a conflict itself does not say anything about the individuals' appraisal of the same, which can be assumed to be decisive for the outcome of an event (cf. Lazarus, 1999; Lazarus & Folkman, 1984). It may be that conflicts with the environment are framed in positive terms by at least some of the respondents. For example, Jehovah's Witnesses often refer to Jesus, who suffered persecution and warned that the same would happen to his followers ("Happy are those who have been persecuted for righteousness' sake, since the kingdom of the heavens belongs to them. Happy are you when people reproach you and persecute you and lyingly say every sort of wicked thing against you for my sake. Rejoice and leap for joy, since your reward is great in the heavens." - Matthew 5:10-12. Watch Tower Bible and Tract Society of Pennsylvania, 2003, p. 10). Similar notions are found in other groups that reference the Bible. Similarly, a bad conscience when disregarding principles of faith must not necessarily mean that a person is feeling bad about him- or herself or that he or she fears God's revenge. It may also be an expression of taking responsibility and regretting one's misdeeds and may thus spur a person in a positive way (cf. also Exline & Rose, 2005). Since correlations do not provide a causal explanation, it is difficult to infer any causal associations between beneficial and costly aspects of involvement on one hand and mental health on the other hand. Methodological logics that are applied in cross-lagged panel designs (cf. Anderson & Kida, 1982) are not of any help here since the strength of correlations seems to vary for different mental health points of measurement for different variables. It remains unclear why no significant association was found for any of the beneficial and costly aspects of involvement with life satisfaction, which has repeatedly been shown to correlate positively with religion (see the reviews by Grom, 2004; Koenig, McCullough, & Larson, 2001).

The development of well-being and mental health among individuals who left the Pentecostal parish after some time was similar to the course that was observed for stayers. However, the data indicate that the level of well-being and mental health was lower in this group at the time prior to joining and remained a little lower at the time of involvement. This result is in line with Buxant and Saroglou's (2008b) finding that the attachment history of ex-members was even more insecure than that of NRM members in Belgium. The authors conclude that this "reflects a general difficulty in maintaining attachment to any object in the long-term" (p. 265). Moreover, it is consistent with the notion that the greater the distress (and thus, the need for a solution) which a person experiences, the less he or she has the possibility to reflect on his or her involvements and decisions (Ullman, 1989). This condition should with higher likelihood lead to the choice of a group which does not fit the person in the longer run and thus lead to less stable involvements. This longitudinal finding supports Di Fiorino et al.'s (2002) caution regarding cross-sectional comparisons of short-term and long-term members, since results can be distorted by systematic differences between the two types of members.

In line with findings from previous studies, depression tended to increase with exit from the parish. However, only a slight decrease and slight increase, respectively, were found for life satisfaction and anxiety. As depicted above, most studies on former members of NRMs find indication of considerable emotional distress in the context of leaving an NRM. Thus, it is surprising that the crisis which was expected to accompany exit only partially shows in the data. One explanation for this finding is that, although involvement in a German Pentecostal parish can be intensive and time-consuming (cf. Murken & Namini, 2004a), it does not require the same level of commitment and identity change as new religious forms of communal living that have been frequently studied. Moreover, it may be that at least some of the individuals who exit continue to profit from the experiences in the group, especially from having come to know the "living God" and Jesus and having found faith. Considering Levine's (1981) conclusion that a minimum of six months is needed for adequate readjustment, it may also be that some of the respondents had already gone through the worst of the process when interviewed. Further studies are needed to investigate well-being and mental health, both in the course of leaving an NRM and subsequently, to determine the variation of the variables with time.

Although this study could overcome some of the major weaknesses of former studies due to its longitudinal design and analysis of factors potentially linking involvement with an NRM and well-being and mental health, some limitations have to be addressed. One strength of the study – the requirement that individuals included in our project should be in the process of joining certain NRMs or a "new" member of maximally two years – limited the size of the sample. Thus, sub-samples were quite small and may have prevented us from finding additional significant results, especially in the case of the small sub-sample of Pentecostal leavers. Moreover, the sample size prevented us from undertaking more sophisticated analysis on the association between beneficial and costly aspects of involvement and well-being and mental health. It also kept us from conducting NRMspecific analysis for stayers, which would be interesting considering earlier studies showed that there are differences between childhood familial antecedents as well as differences in the well-being of the members of the three NRMs for the time prior to involvement (Namini, 2007; Namini & Murken, 2008). Further studies with larger samples will have to investigate these points.

Another major limitation that must be addressed is the retrospective nature of the study regarding the time prior to involvement with the groups. As with other previous studies, these data could only be assessed retrospectively due to the impracticability of prospective studies in this context. Retrospective data bear the danger of distortions – a topic which has repeatedly been discussed in the conversion literature (e.g., Zinnbauer & Pargament, 1998; cf. also the concept of "conversion narrative," e.g., Popp-Baier, 2001; Stromberg, 1993). However, a more detailed analysis of the pre-contact data in an earlier study indicates that no systematic distortion occurred: (a) a reduction of well-being was not retrospectively reported by all individuals, (b) persons who reported life events that mirror strain in relationships for the year before first close contact with the NRM also reported lower well-being for the same time period. Thus, the subjective appraisal can be explained and validated by a more objective parameter (Murken & Namini, 2004b). In order to confirm that the increase in well-being from a retrospectively assessed past to a prospectively assessed future is not merely an effect of time, future research should include a control group that has not become involved with an NRM. Another potential problem regarding the data collected in this study may be its subjective nature and the problem of social desirability, including a desire to present the religious groups as beneficial. Although social desirability cannot be completely ruled out, we see no reason to mistrust participants' responses. In our interviews, most individuals appeared open and also reported conflicts. We did not include a standard social desirability instrument because of problems regarding the interpretability of the data in highly religious samples (cf. Spilka, Hood, Hunsberger, & Gorsuch, 2003; Trimble, 1997).

Finally, it must be emphasised that findings cannot be generalised to other NRMs, times and aspects of well-being and mental health. Religious groups and their impact on members' well-being may differ. Religions also change over time. Life satisfaction,

depression and anxiety cover only some aspects of the complex constructs of well-being and mental health. Nonetheless, they are important facets and hence deliver a good impression of individuals' mental states. Depression and anxiety are among the most common mental disorders in contemporary Western societies and they regularly occur comorbidly with other physical and mental illnesses.

In conclusion, it can be said that this longitudinal study supported the results of earlier cross-sectional studies which concluded that involvement with an NRM is not generally associated with impaired mental health. Although individuals in these groups may suffer from symptoms of mental illness just as individuals in other groups do, in general, persons involved with the groups studied were well adjusted. In line with Richardson's (1995) conclusion that participation in NRMs is similar to participation in other religions, there was no indication that the association between religion and mental health in the context of NRMs is genuinely different from that in the context of more traditional religions.

Acknowledgements

We gratefully acknowledge the German Volkswagen Foundation's funding of the research project "Self-chosen membership in new religious movements: Psychosocial motives and consequences" (2002–2007) which enabled this study. We thank Claudia Appel, Stefan Huber, Claudia Müller, Angelika Sassin-Meng, Michael Schmiedel and Claudia Zieroff for help with the data collection as well as other support in different stages of the project; Daria Kaluza for the preparation of a related paper; Pehr Granqvist for discussion and helpful comments on a first draft; Lisa Friedrich for her thorough proofreading; and anonymous reviewers for their helpful comments and suggestions.

Notes

- It must be noted that the term "sect" is used differently in different countries and contexts. Whereas in Europe, "sect" usually is a synonym for "cult," American sociologists differentiate between church, sect and cult. According to this "church-sect-cult tricotomy" (Melton, 2004, p. 18), the term "church" refers to the established dominant religious community of a culture. Although "sects" rise in protest against churches, they still resemble them to a considerable degree but are more fervent in their worship and are stricter regarding beliefs and individual commitment.
- 2. According to Saliba (1993, p. 106) more than 75% of empirical studies with current members of NRMs tended "to show that the psychological profiles of individuals tested fall well within 'normal' bounds." Nonetheless, frequently an overrepresentation of certain characteristics in specific groups is observed e.g., compulsive (Klosinski, 1985; Weiss & Comrey, 1987a, b) or schizotypical personality traits (Day & Peters, 1999; Farias, Claridge, & Lalljee, 2005). As there is not much evidence that membership in an NRM brings about radical alterations in basic personality, although other aspects of personality like world view, self-identity and personal adaptation may change, most authors conclude that the distinctive characteristics of members of a certain group are motives for joining an NRM which offers a culture that suits a person well, rather than a consequence of involvement (cf. also Paloutzian, Richardson, & Rambo, 1999).
- 3. Although meditation is a common religious practice that is applied in many NRMs and which can be considered a pathway to mental health and well-being, it is not included here, since the depth of the subject matter would merit its own study. A great deal of literature which focuses on the effects of meditation is available (for a review see e.g., Ivanovski & Malhi, 2007; Murphy & Donovan, 1997; Perez-de-Albeniz & Holmes, 2000).
- 4. Although American readers may doubt the classification of these groups as NRMs, it is justified in the German context in which this study was conducted. Following the German religious historian Flasche (1996) all three groups can be considered to be "new" religious movements as they have arisen since the mid-nineteenth century, which – compared to the two major churches in Germany, the Roman Catholic Church and the Protestant Church – is quite "new."

Apart from this historical argumentation, the groups share some other characteristics with NRMs that have arisen in recent decades, for example, the relatively small size of the groups and the public's hostility towards them. In Germany, Jehovah's Witnesses and the New Apostolic Church are generally considered to be classical *Sekten* and, thus, assumed to manipulate and harm their members.

- 5. The Holy Sealing is a specific New Apostolic sacrament in which living apostles dispense the Holy Spirit through prayers and the laying on of hands.
- 6. The finding that all leavers were from the Pentecostal group can be ascribed to the shorter mean time of contact (in comparison to stayers) which in part results from the fact that we could include individuals with a more recent interest in the Pentecostal group than in the two other groups. Moreover, the religious groups differently conceptualise becoming a Pentecostal, a member of the New Apostolic Church or a member of Jehovah's Witnesses, respectively. Becoming a Pentecostal is closely linked to the (often spontaneous) decision to accept Jesus as personal saviour and often quickly followed by baptism, which is a prerequisite to becoming a member of the parish. It can be assumed that the quickness of the decision results in a higher probability that it will be discarded later on.
- 7. No studies on mental health or well-being of members of the New Apostolic Church exist.

References

- Anderson Jr, T.N., & Kida, T.E. (1982). The cross-lagged research approach: Description and illustration. Journal of Accounting Research, 20, 403–414.
- Anthony, D., & Robbins, T. (2004). Conversion and "brainwashing" in new religious movements. In J.R. Lewis (Ed.), *The Oxford handbook of new religious movements* (pp. 243–297). New York: Oxford University Press.
- Antonovsky, A. (1987). Unraveling the mystery of health: How people manage stress and stay well. San Francisco: Jossey-Bass.
- Aronoff, J., Lynn, S.J., & Malinoski, P. (2000). Are cultic environments psychologically harmful? *Clinical Psychology Review*, 20, 91–111.
- Barker, E. (1989). New religious movements: A practical introduction. London: Her Majesty's Stationery Office.
- Barker, E. (1991/1992). Cults and the health of society. *Transactions of the Medical Society of London*, 108, 35–45.
- Barker, E. (1995). The scientific study of religion? You must be joking! Journal for the Scientific Study of Religion, 34, 287–310.
- Barker, E. (1997). New religions and mental health. In D. Bhugra (Ed.), *Psychiatry and religion: Context, consensus and controversies* (pp. 125–137). London: Routledge.
- Barker, E. (2003). Harm and new religious movements (NRMs): Some notes on a sociological perspective. *Cultic Studies Review*, 2(1). [Retrieved September 2,2008, from http://www.icsahome.com/culticstudiesreview/csrmembers/docview.asp?Subject=Harm+and+New+ Religious+Movements+%28NRMs%29%3A+Some+Notes+on+a+Sociological+Perspec tive].
- Bergman, J. (1996). Paradise postponed...and postponed: Why Jehovah's Witnesses have a high mental illness level. *Christian Research Journal*, 19(1), 36–41.
- Besier, G., & Besier, R.-M. (2001). Jehovah's Witnesses' request for recognition as a corporation under public law in Germany: Background, current status, and empirical aspects. *Journal of Church and State*, 43, 35–48.
- Bromley, D.G. (1997). Falling from the new faiths: Toward an integrated model of religious affiliation/disaffiliation. In M. Bar-Lev, & W. Shaffir (Eds.), *Religion and the social order: Leaving religion and religious life* (Vol. 7, pp. 31–60). Greenwich, CT: JAI Press.
- Bromley, D.G. (2004). Leaving the fold: Disaffiliating from new religious movements. In J.R. Lewis (Ed.), *The Oxford handbook of new religious movements* (pp. 298–314). New York: Oxford University Press.

- Buxant, C., & Saroglou, V. (2008a). Feeling good, but lacking autonomy: Closed-mindedness on social and moral issues in new religious movements. *Journal of Religion and Health*, 47, 17–31.
- Buxant, C., & Saroglou, V. (2008b). Joining and leaving a new religious movement: A study of ex-members' mental health. *Mental Health, Religion and Culture*, 11, 251–271.
- Buxant, C., Saroglou, V., Casalfiore, S., & Christians, L.-L. (2007). Cognitive and emotional characteristics of new religious movement members: New questions and data on the mental health issue. *Mental Health, Religion and Culture, 10*, 219–238.
- Conway, F., & Siegelman, J. (1978/2005). Snapping: America's epidemic of sudden personality change (expanded 2nd ed.). New York: Stillpoint.
- Dawson, L.L. (1998). Comprehending cults: The sociology of new religious movements. Toronto: Oxford University Press Canada.
- Day, S., & Peters, E. (1999). The incidence of schizotypy in new religious movements. *Personality* and Individual Differences, 27, 55–67.
- Dein, S., & Barlow, H. (1999). Why do people join the Hare Krishna Movement? Deprivation theory revisited. *Mental Health, Religion and Culture, 2*, 75–84.
- Deutsch, A. (1975). Observations on a sidewalk ashram. Archives of General Psychiatry, 32, 166–175.
- Deutscher Bundestag Referat Öffentlichkeitsarbeit (Ed.) (1998). Final report of the Enquete Commission on "So-called Sects and Psychogroups": New religious and ideological communities and psychogroups in the Federal Republic of Germany (W. Fehlberg & M. Ulloa-Fehlberg, Trans.). Bonn: Deutscher Bundestag, Referat Öffentlichkeitsarbeit.
- Di Fiorino, M., Fizzotti, E., & Miniati, M. (2002). Psychometric profiles in Italian Hare Krishna Movement: Affiliation and membership. *Archives of Psychiatry and Psychotherapy*, *4*, 53–61.
- Durocher, N. (1999). Insights from cult survivors regarding group support. British Journal of Social Work, 29, 581–599.
- Ebaugh, H.R.F. (1988). Becoming an ex: The process of role exit. Chicago: University of Chicago Press.
- Ellison, C.G. (1991). Religious involvement and subjective well-being. *Journal of Health and Social Behavior*, 32, 80–99.
- Exline, J.J., & Rose, E. (2005). Religious and spiritual struggles. In R.F. Paloutzian, & C.L. Park (Eds.), *Handbook of the psychology of religion and spirituality* (pp. 315–330). New York: Guilford.
- Farias, M., Claridge, G., & Lalljee, M. (2005). Personality and cognitive predictors of New Age practices and beliefs. *Personality and Individual Differences*, 39, 979–989.
- Flasche, R. (1996). Neue Religionen [New religions]. In P. Antes (Ed.), *Die Religionen der Gegenwart: Geschichte und Glauben* [The Religions of Today: History and Beliefs] (pp. 280–298). München: Beck.
- Freckelton, I. (1998). "Cults," calamities and psychological consequences. *Psychiatry, Psychology* and Law, 5, 1–46.
- Galanter, M. (1980). Psychological induction into the large-group: Findings from a modern religious sect. American Journal of Psychiatry, 137, 1574–1579.
- Galanter, M. (1983). Unification Church ("Moonie") dropouts: Psychological readjustment after leaving a charismatic religious group. *American Journal of Psychiatry*, 140, 984–989.
- Galanter, M. (1986). "Moonies" get married: A psychiatric follow-up study of a charismatic religious sect. American Journal of Psychiatry, 143, 1245–1249.
- Galanter, M. (1989). Cults: Faith, healing, and coercion. New York: Oxford University Press.
- Galanter, M., & Buckley, P. (1978). Evangelical religion and meditation: Psychotherapeutic effects. Journal of Nervous and Mental Disease, 166, 685–691.
- Galanter, M., Buckley, P., Deutsch, A., Rabkin, R., & Rabkin, J. (1980). Large group influence for decreased drug use: Findings from two contemporary religious sects. *American Journal of Drug* and Alcohol Abuse, 7, 291–304.
- Galanter, M., Rabkin, R., Rabkin, J., & Deutsch, A. (1979). The "Moonies": A psychological study of conversion and membership in a contemporary religious sect. *American Journal of Psychiatry*, 136, 165–170.

- Granqvist, P., & Kirkpatrick, L.A. (2004). Religious conversion and perceived childhood attachment: A meta-analysis. *International Journal for the Psychology of Religion*, 14, 223–250.
- Gritzmacher, S.A., Bolton, B., & Dana, R.H. (1988). Psychological characteristics of Pentecostals: A literature review and psychodynamic synthesis. *Journal of Psychology and Theology*, 16, 233–245.
- Grom, B. (2004). Religiosität psychische Gesundheit subjektives Wohlbefinden: Ein Forschungsüberblick [Religiosity-mental health-subjective well-being: A research overview]. In C. Zwingmann, & H. Moosbrugger (Eds.), *Religiosität: Messverfahren und Studien zu Gesundheit und Lebensbewältigung* (pp. 187–214). Münster: Waxmann.
- Hassan, S. (1990). Combatting cult mind control. The #1 best-selling guide to protection, rescue, and recovery from destructive cults. Rochester, VT: Park Street.
- Herrmann, C., Buss, U., & Snaith, R.P. (1995). HADS-D Hospital Anxiety and Depression Scale Deutsche Version [HADS-D–German version]. Bern: Huber.
- Hill, P.C., & Pargament, K.I. (2003). Advances in the conceptualization and measurement of religion and spirituality: Implications for physical and mental health research. *American Psychologist*, 58, 64–74.
- Huber, S. (2003). *Items und Konstrukte des Religiositäts-Struktur-Tests (R-S-T)* [Items and constructs of the Structure-of-Religiosity Test (S-R-T)]. Unpublished manuscript.
- Huber, S. (2006). The "Structure-of-Religiosity-Test." European network of research on religion, spirituality, and health newsletter, 2/2006, 1–2. [Retrieved April 10, 2009, from http:// www.rish.ch/pdf/Newsletter%202006-2.pdf].
- Inaba, K. (2004). Conversion to new religious movements: Reassessment of Lofland/Skonovd conversion motifs and Lofland/Stark conversion process. *Human Sciences Research*, 11(2), 33–47.
- Ivanovski, B., & Malhi, G.S. (2007). The psychological and neurophysiological concomitants of mindfulness forms of meditation. *Acta Neuropsychiatrica*, 19, 76–91.
- Kirkpatrick, L.A., & Shaver, P.R. (1990). Attachment theory and religion: Childhood attachments, religious beliefs, and conversion. *Journal for the Scientific Study of Religion*, 29, 315–334.
- Klosinski, G. (1985). Warum Bhagwan? Auf der Suche nach Heimat, Geborgenheit und Liebe [Why Bhagwan? In search of home, security and love]. München: Kösel.
- Koenig, H.G., McCullough, M.E., & Larson, D.B. (2001). *Handbook of religion and health*. New York: Oxford University Press.
- Kox, W., Meeus, W., & 't Hart, H. (1991). Religious conversion of adolescents: Testing the Lofland and Stark model of religious conversion. *Sociological Analysis*, 52, 227–240.
- Kraus, D. (1999). "Jugendreligionen" zwischen Fluch und Segen ["Youth religions" between bane and boon]. Praxis der Kinderpsychologie und Kinderpsychiatrie, 48, 192–201.
- Kraus, D., & Eckert, J. (1997). Die Bedeutung der Mitgliedschaft in Neuen Religiösen Bewegungen für die Regulation des Selbsterlebens am Beispiel der Hare-Krischna-Bewegung [The significance of membership in New Religious Movements for the regulation of self-experience exemplified by the Hare Krishna Movement]. *Psychotherapie, Psychosomatik, Medizinische Psychologie, 47*, 21–26.
- Kriegman, D., & Solomon, L. (1985). Cult groups and the narcissistic personality: The offer to heal defects in the self. *International Journal of Group Psychotherapy*, 35, 239–261.
- Kuner, W. (1983). New religious movements and mental health. In E. Barker (Ed.), Of gods and men: New religious movements in the West. Proceedings of the 1981 Annual Conference of the British Sociological Association Sociology of Religion Study Group (pp. 255–263). Macon, GA: Mercer University Press.
- Langone, M.D. (1995). Introduction. In M.D. Langone (Ed.), *Recovery from cults: Help for victims of psychological and spiritual abuse* (pp. 1–21). New York: Norton & Company.
- Latkin, C.A., Hagan, R.A., Littman, R.A., & Sundberg, N.D. (1987). Who lives in Utopia? A brief report on the Rajneeshpuram research project. *Sociological Analysis*, 48, 73–81.
- Lazarus, R.S. (1999). Stress and emotion: A new synthesis. London: Free Association Books.
- Lazarus, R.S., & Folkman, S. (1984). Stress, appraisal, and coping. New York: Springer.

- Levine, S.V. (1981). Cults and mental health: Clinical conclusions. *Canadian Journal of Psychiatry*, 26, 534–539.
- Levine, E.M. (1985). The motives behind cult converts and cult leaders. Update: A Quarterly Journal on New Religious Movements, 9(4), 11–23.
- Lewis, J.R. (2004). Overview. In J.R. Lewis (Ed.), *The Oxford handbook of new religious movements* (pp. 3–15). New York: Oxford University Press.
- Lifton, R.J. (1961/1989). Thought reform and the psychology of totalism: A study of "brainwashing" in China. Chapel Hill, NC: University of North Carolina Press.
- Malinoski, P.T., Langone, M.D., & Lynn, S.J. (1999). Psychological distress in former members of the International Churches of Christ and noncultic groups. *Cultic Studies Journal*, 16, 33–51.
- Melton, J.G. (2004). An introduction to new religions. In J.R. Lewis (Ed.), *The Oxford handbook of new religious movements* (pp. 16–35). New York: Oxford University Press.
- Miller, M.M., & Strongman, K.T. (2002). The emotional effects of music on religious experience: A study of the Pentecostal-charismatic style of music and worship. *Psychology* of Music, 30, 8–27.
- Murken, S. (1997). Ungesunde Religiosität Entscheidungen der Psychologie? [Unhealthy religiosity–Decisions of psychology?]. In G.M. Klinkhammer, S. Rink, & T. Frick (Eds.), *Kritik an Religionen. Religionswissenschaft und der kritische Umgang mit Religionen* (pp. 157–172). Marburg: Diagonal.
- Murken, S. (1998). Soziale und psychische Auswirkungen der Mitgliedschaft in neuen religiösen Bewegungen unter besonderer Berücksichtigung der sozialen Integration und psychischen Gesundheit [Social and psychic consequences of membership in new religious movements with special consideration of social integration and mental health]. In Deutscher Bundestag, Enquete-Kommission "Sogenannte Sekten und Psychogruppen" (Ed.), Neue religiöse und ideologische Gemeinschaften und Psychogruppen: Forschungsprojekte und Gutachten der Enquete-Kommission "Sogenannte Sekten und Psychogruppen" [New religious and ideological communities and "psycho-groups" Research projects and appraisals of the enquiry-commission "So-called sects and psycho-groups"] (pp. 297–354). Hamm: Hoheneck.
- Murken, S., & Namini, S. (2004a). Psychosoziale Konflikte im Prozess des selbst gewählten Beitritts zu neuen religiösen Gemeinschaften [Psycho-social conflicts in the process of joining a NRM]. Zeitschrift für Religionswissenschaft [Journal of Religious Science], 12, 141–187.
- Murken, S., & Namini, S. (2004b). Selbst gewählte Mitgliedschaft in religiösen Gemeinschaften: Ein Versuch der Lebensbewältigung? [Self-chosen membership in religious communities: An attempt to cope with life?]. In C. Zwingmann, & H. Moosbrugger (Eds.), Religiosität: Messverfahren und Studien zu Gesundheit und Lebensbewältigung. Neue Beiträge zur Religionspsychologie [Religiousness: Measuring procedures and studies on health and coping with life. New contributions to the psychology of religion] (pp. 299–316). Münster: Waxmann.
- Murken, S., & Namini, S. (2007). Childhood familial experiences as antecedents of adult membership in new religious movements: A literature review. Nova Religio, 10(4), 17–37.
- Murphy, M., & Donovan, S. (1997). The physical and psychological effects of meditation: A review of contemporary research with a comprehensive bibliography 1931–1996 (2nd ed.). Sausalito, CA: Institute of Noetic Sciences.
- Namini, S. (2007). Selbst gewählte Mitgliedschaft in neuen religiösen Bewegungen eine Frage der Passung? Empirische Befunde und kritische Überlegungen [Self-chosen membership in new religious movements-a question of fit? Empirical findings and critical reflections]. Unpublished Ph.D. thesis, University of Luzern, Switzerland.
- Namini, S., & Murken, S. (2008). Familial antecedents and the choice of a new religious movement. Which person in which religious group? *Nova Religio*, 11(3), 83–103.
- Nathawat, S.S., & Khan, S. (1995). A study of subjective well-being of Osho's devotees. Indian Journal of Clinical Psychology, 22, 41–44.
- Paloutzian, R.F., Richardson, J.T., & Rambo, L.R. (1999). Religious conversion and personality change. *Journal of Personality*, 67, 1047–1079.

- Perez-de-Albeniz, A., & Holmes, J. (2000). Meditation: Concepts, effects and uses in therapy. International Journal of Psychotherapy, 5, 49–58.
- Pfeifer, S. (1999). Wenn der Glaube zum Problem wird: Wege zur inneren Heilung [When faith turns into a problem: Ways to inner healing]. Moers: Brendow.
- Poling, T.H., & Kenney, J.F. (1986). The Hare Krishna character type: A study of the sensate personality. Lewiston, NY: Mellen.
- Popp-Baier, U. (2001). Narrating embodied aims: Self-transformation in conversion narratives–A psychological analysis. *Forum: Qualitative Social Research*, 2(3), art. 16. [Retrieved September 1, 2008, from http://qualitative-research.net/fqs-texte/3-01/3-01popp-e.htm].
- Richardson, H. (1980). Mental health, conversion, and the law. In H. Richardson (Ed.), *New religions and mental health: Understanding the issues* (pp. ix-lv). New York: Mellen.
- Richardson, J.T. (1985). Psychological and psychiatric studies of new religions. In L.B. Brown (Ed.), *Advances in the psychology of religion* (pp. 209–223). Oxford: Pergamon Press.
- Richardson, J.T. (1995). Clinical and personality assessment of participants in new religions. International Journal for the Psychology of Religion, 5, 145–170.
- Robbins, T., & Bromley, D.G. (1993). What have we learned about new religions? New religious movements as experiments. *Religious Studies Review*, 19, 209–216.
- Rochford, E.B., Purvis, S., & Eastman, N. (1989). New religions, mental health, and social control. In M.L. Lynn, & D.O. Moberg (Eds.), *Research in the social scientific study of religion* (Vol. 1, pp. 57–82). Greenwich, CT: JAI Press.
- Ross, M.W. (1985). Mental health in Hare Krishna devotees: A longitudinal study. American Journal of Social Psychiatry, 5(4), 65–67.
- Saliba, J.A. (1993). The new religions and mental health. In D.G. Bromley, & J.K. Hadden (Eds.), *Religion and the social order: The handbook on cults and sects in America* (Vol. 3B, pp. 99–113). Greenwich, CT: JAI Press.
- Saliba, J.A. (2003). Understanding new religious movements (2nd ed.). Walnut Creek, CA: AltaMira.
- Saliba, J.A. (2004). Psychology and the new religious movements. In J.R. Lewis (Ed.), *The Oxford handbook of new religious movements* (pp. 317–332). New York: Oxford University Press.
- Schein, E. (1961). Coercive persuasion: A socio-psychological analysis of the "brainwashing" of American civilian prisoners by the Chinese Communists. New York: Norton.
- Schöb, A. (2001). Die Wohlfahrtssurveys 1978 bis 1998. Zeitreihendaten zur Wohlfahrtsentwicklung in der Bundesrepublik Deutschland [The welfare surveys 1978 to 1998. Time series data on welfare development in the Federal Republic of Germany]. Mannheim: Zentrum für Umfragen, Methoden und Analysen (ZUMA).
- Schoen, B. (2001). New religions in Germany: The publicity of the public square. *Nova Religio*, 4, 266–274.
- Shapiro, E. (1977). Destructive cultism. American Family Physician, 15(2), 80-83.
- Spilka, B., Hood Jr, R.W., Hunsberger, B., & Gorsuch, R. (2003). The psychology of religion: An empirical approach (3rd ed.). New York: Guilford.
- Stromberg, P.G. (1993). Language and self-transformation: A study of the Christian conversion narrative. Cambridge: Cambridge University Press.
- Swartling, G., & Swartling, P.G. (1992). Psychiatric problems in ex-members of Word of Life. *Cultic Studies Journal*, 9, 78–88.
- Trimble, D.E. (1997). The Religious Orientation Scale: Review and meta-analysis of social desirability effects. *Educational and Psychological Measurement*, 57, 970–986.
- Ullman, C. (1982). Cognitive and emotional antecedents of religious conversion. *Journal of Personality and Social Psychology*, 43, 183–192.
- Ullman, C. (1989). The transformed self: The psychology of religious conversion. New York: Plenum.
- Walsh, Y., & Bor, R. (1996). Psychological consequences of involvement in a new religious movement or cult. *Counselling Psychology Quarterly*, 9, 47–60.
- Walsh, Y., Russell, R.J.H., & Wells, P.A. (1995). The personality of ex-cult members. *Personality* and Individual Differences, 19, 339–344.

- Watch Tower Bible and Tract Society of Pennsylvania. (2003, October 1st). Persecuted for righteousness' sake. *Watch Tower*, 9–13.
- Weiss, A.S., & Comrey, A.L. (1987a). Personality and mental health of Hare Krishnas compared with psychiatric outpatients and "normals". *Personality and Individual Differences*, 8, 721–730.
- Weiss, A.S., & Comrey, A.L. (1987b). Personality characteristics of Hare Krishnas. Journal of Personality Assessment, 51, 399–413.
- Weiss, A.S., & Mendoza, R.H. (1990). Effects of acculturation into the Hare Krishna movement on mental health and personality. *Journal for the Scientific Study of Religion, 29*, 173–184.
- Wohlfahrtssurvey (1998). Fragebogen vom 12.10.1998 [Welfare survey (1998). Questionnaire of 10/12/1998]. Berlin: Abteilung Sozialstruktur und Sozialberichterstattung, Wissenschaftszentrum Berlin für Sozialforschung (WZB).
- Wright, S.A. (1987). Leaving cults: The dynamics of defection. Washington, DC: Society for the Scientific Study of Religion.
- Wright, S.A. (1991). Reconceptualizing cult coercion and withdrawal: A comparative analysis of divorce and apostasy. *Social Forces*, 70, 125–145.
- Wright, S.A., & Ebaugh, H.R. (1993). Leaving new religions. In D.G. Bromley, & J.K. Hadden (Eds.), *Religion and the social order: The handbook on cults and sects in America* (Vol. 3B, pp. 117–138). Greenwich, CT: JAI Press.
- Zinnbauer, B.J., & Pargament, K.I. (1998). Spiritual conversion: A study of religious change among college students. *Journal for the Scientific Study of Religion*, 37, 161–180.