

Wellbeing and religious community participation: Exploring resources for wellbeing in areas of socio-economic deprivation in the United Kingdom

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Abstract

A decrease in wellbeing in the United Kingdom since the 2008 economic crisis has been compounded by the closure of community groups in socio-economically deprived areas. This leaves churches as one of the few communal groups for fostering wellbeing, despite a dearth of research on religiosity and wellbeing in such areas. This article draws on semi-structured interviews, supplemented with participant observations and ethnographic observations, to explore the social processes involved in shaping experiences of wellbeing amongst religious communities in socio-economically deprived areas in North East England. It identifies the resources available for wellbeing and the points at which they are accessed. It also expands the existing conception of wellbeing by: (i) unpacking and refining a three-tiered structure for understanding wellbeing; (ii) identifying a wellbeing paradox, whereby interpersonal vulnerability supports and undermines wellbeing; and (iii) mapping the relationships between the micro, meso and macro levels in shaping experiences of wellbeing, highlighting the need for more qualitative studies of subjective wellbeing. As it does so, this article offers practical insights that can guide those

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with pastoral responsibilities in areas of socio-economic deprivation to foster higher levels of wellbeing in their communities.

KEYWORDS

qualitative methods, religiosity, socio-economic deprivation, subjective wellbeing

1 | INTRODUCTION

Since the economic crisis in 2008, there has been a cross-national decrease in wellbeing, particularly in its social and psychological dimensions (Parmar, Stavropoulou, & Ioannidis, 2016). In the United Kingdom, the economic crisis has been linked to decreased mental health in the wake of government-led austerity measures (Curl & Kearns, 2015). Those with less formal education and the unemployed have been especially vulnerable to decreased wellbeing in England (Barr, Kinderman, & Whitehead, 2015). Hence, areas with lower employment rates also have lower levels of wellbeing (see Office for National Statistics, 2019a; Watson, 2018). This is juxtaposed alongside widespread closure of public services (UNISON, 2019), leading to fewer opportunities to acquire resources that foster wellbeing. Churches thus remain one of the few providers of community resources. In fact, higher levels of religiosity predict higher levels of wellbeing, whereas lower levels of religiosity are linked with lower levels (see Lim, 2015). Equally, higher socio-economic status has been linked with higher levels of wellbeing with lower socio-economic status being linked to lower levels of it.

Notwithstanding, there has been little research on the relationship between communal religiosity and wellbeing in socio-economically deprived areas. Such research is timely, having the potential to inform how wellbeing can be fostered within this milieu, particularly whilst existing inequalities are being compounded due to numerous factors, including 'Trussonomics', the COVID-19 pandemic, the Russian invasion of Ukraine (Barr, 2022; Hourston, 2022; Lansley, 2022) and related 'cost-of-living crisis'. Indeed, the latter is a predictor of increased premature mortality rates in deprived areas of Scotland (Richardson, McCartney, Taulbut, Douglas, & Craig, 2023). This also compounds other existing socio-economic concerns, such as the slowing of life expectancy after a decade of austerity and the proportionally higher loss of lives during the COVID-19 pandemic than in comparable nations (Broadbent et al., 2023). Research in UK wellbeing evidences that this trend has a clear arch traceable to economic policies introduced by the British Government after the 2010 General Election (see Zhang et al., 2023).

2 | LITERATURE REVIEW: WELLBEING, RELIGIOSITY AND SOCIO-ECONOMIC STATUS

Dodge, Daly, Huyton, and Sanders (2012) have criticised most definitions of wellbeing as mere descriptions. They have argued that individuals possess a set of resources for responding to challenging events. Resources, they posit, can be divided into three types, social (e.g., relational networks), physical (e.g., a car to get one to a hospital appointment) and psychological (e.g., positive life experiences). When these resources adequately deal with challenges, wellbeing is experienced as stable, owing to an equilibrium between challenges and resources. Equally, challenges and resources will fluctuate, indicating that experiences of wellbeing are not constant. Dodge et al. assert that this definition has several advantages: it can be universally applied, it is relatively simple compared to other definitions, and it is more straightforward to measure than other definitions. Previous research has operationalised the idea of wellbeing resources differently; Fry (2023) has theorised resources through Putnam's (2000) notion of social capital

and Verter's (2003) articulation of spiritual capital. Windle and Woods (2004) put it well when they write, 'despite definitional differences, these [understandings of psychological] resources share the element of psychological strength' (p. 584). However, this statement readily underscores the focus of resources as psychological phenomena. More recent research looking at the relationship between wellbeing and socio-economic status foregrounds the role of conservation of resources theory, thereby privileging the role of psychological phenomena in shaping experiences of wellbeing (see Wanberg, Csillag, Douglass, Zhou, & Pollard, 2020). As will be demonstrated below, in contradistinction, the types of resources identified by Dodge et al. (2012) cannot be treated as entirely independent of each other. Hence, this article adds to existing understanding by highlighting the in situ social significance of recognising the overlap between different types of wellbeing resources. This insight is facilitated by the granular detail afforded via qualitative research.

Insights from earlier work, by Pierce, Sarason, and Sarason (1996), can add to this conception of wellbeing. They note three types of social support that bolster coping. These are: perceived social support, supportive relationships, and supportive networks. The perception of social support is related to the presence of supportive (individual) relationships and to supportive networks (the totality of one's relationships with individuals). In essence, these are social resources for wellbeing. Regarding subjective wellbeing (SWB)—a self-reported approach that is concerned with individuals' experience and perception of wellbeing—Diener et al. (2011) describe three broad components. These are: life evaluations (thoughts that one has concerning their life), positive feelings, and negative feelings. Positive feelings and life evaluations shape higher levels of SWB whereas negative feelings and life evaluations shape negative experiences of SWB. In essence, these are psychological resources. This indicates the presence of two tiers of wellbeing, the types of resources identified by Dodge et al. (2012) and broad sub-categories that are more particular types of the resources identified by Pierce et al. (1996) and Diener et al. (2011).

However, this conception of wellbeing does not afford a detailed description of the specific resources available. It is necessary to understand the particular resources that exist for addressing life's challenges, so that solutions can be provided that utilise a community's existing resources. This is so that the solutions' effectiveness for fostering wellbeing will be enhanced at a time of limited community resources. It is in part the argument of this paper that this is a third tier that ought to be added to this wellbeing model and explored (see Figure 1). The existing model also foregrounds the role of the individual in fostering wellbeing via individual resource pools and appears to exclude an appreciation for how wider social phenomena beyond one's control come to bear upon SWB (see Dodge et al., 2012). This is a neoliberal depiction of wellbeing, focusing on individual autonomy at the exclusion of social structures (see Card & Hepburn, 2022). Hence, it is unsurprising that explicit recognition that social and psychological resources interact to foster SWB is also omitted from Dodge et al.'s discussion. The present paper also contends that the implications of broader contextual factors for SWB also ought to be more explicitly appreciated.

	Social resources	Psychological resources
Tier 1: Type of resource		
Tier 2: Sub-categories of resources	<p><i>Supportive relationships</i></p> <p><i>Supportive network</i></p> <p><i>Perceived social support</i></p>	<p><i>Positive feelings</i></p> <p><i>Life evaluations</i></p>
Tier 3: Specific example of resources	<p><i>For example, words of encouragement; shared humour; collaboration</i></p>	<p><i>For example, emotional support, purpose</i></p>

FIGURE 1 A three-tiered conception of wellbeing.

Relatedly, resources for wellbeing are often social in nature and thus exist within social networks. They therefore occur at the meso level, necessitating a qualitative analysis as this involves tapping into subjective accounts of wellbeing (see Halualani, 2008). This highlights the need to explore wellbeing using Dodge et al.'s (2012) model qualitatively and with greater appreciation of the social dimensions of wellbeing, being attentive to how such an analysis can help refine their model. A qualitative approach also provides an opportunity to offer a detailed description of the social processes accompanying SWB in context as well as of the resources that can foster SWB. This would also inform how wellbeing can be effectively enhanced through greater appreciation of how it is experienced in daily life in a way unavailable via quantitative means.

To date, research has found that religious service attendance bolsters coping because the resulting social connections can create a sense of constancy (Durkheim, 1964; Rainville, 2018). Indeed, joint activities undertaken by those with shared beliefs can foster the perception of solidarity, which provides shared meaning and thus positive feelings (Krause, 2009). Religious communities also provide devotees with practical and emotional support (Koffman, Morgan, Edmonds, Speck, & Higginson, 2008). Regular service attendance also buffers against depression (Balbuena, Baetz, & Bowen, 2013; Schnittker, 2020). In fact, religious participation may provide greater health benefits than other types of community involvement (Croezen, Avendano, Burdorf, & Van Lenthe, 2015). Unsurprisingly, therefore, Christian groups with higher levels of service attendance also possess higher levels of SWB than the non-religious (Lim, 2015). This can be explained by religious social integration, which buffers against isolation (DeAngelis & Ellison, 2018). Research also indicates that the communal aspects of religiosity more effectively foster wellbeing than private expressions (Stroope & Baker, 2018; Upenieks, 2021). Similarly, wellbeing is related to individual-congregation alignment (Hayward & Elliott, 2009).

Just as higher levels of SWB are associated with higher socio-economic status (Haring, Stock, & Okun, 1984), lower socio-economic status is associated with lower wellbeing (Bellani & D'Ambrosio, 2011). The relationship between social class and SWB is moderated by sense of status (being well perceived by others) and power (the possession and control of resources); the impact that social class can exert on how a person is perceived by others, and the social relations that they enjoy with others, shapes wellbeing more so than the material benefits of class, with status being more effective in this regard than power (Yu & Blader, 2020). This highlights the influential role of the social over and above the purely economic in impacting wellbeing. Nevertheless, the financial strain of unemployment, along with its psychological ramifications, decrease SWB (Ervasti & Venetoklis, 2010).

However, there is little research on the religiosity–wellbeing relationship in areas of socio-economic deprivation. The little (predominantly quantitative) research that exists indicates that religious persons in deprived communities have higher levels of SWB than the non-religious living in the same conditions (Hoverd & Sibley, 2013). It also indicates that certain aspects of religiosity—specifically, religious attendance and belief in the afterlife—buffer against the impact of financial hardship (Bradshaw & Ellison, 2010). Moreover, religiosity supports wellbeing in less economically developed nations (Diener et al., 2011), despite evidence that the difference made by religion to wellbeing is more significant for those with higher levels of income (Churchill, Appau, & Farrell, 2019).

This article offers a rare qualitative exploration of the social processes involved in experiences of wellbeing amongst those who partake in communal religious activities and live in areas of socio-economic deprivation. In doing so, it identifies the specific resources available for SWB, highlighting the points at which they are accessed. Consequently, this article expands the existing conception of wellbeing by: (i) developing Dodge et al.'s (2012) model of wellbeing via: (a) unpacking a three-tiered structure to (especially communal) pools of resources that foster SWB; (b) clarifying the relationship between experiences of SWB, the types of resource pools that foster these, and the specific resources within these pools; (c) offering a critique of the neoliberal assumption shaping Dodge et al.'s conception of wellbeing; and (d) explicitly incorporating the inter-reliance of social and psychological resources for fostering SWB; (ii) mapping the relationships between the micro (individual), meso (group) and macro (institutional) levels in shaping SWB, highlighting how different layers within society intersect in the social processes of wellbeing; and (iii) identifying a wellbeing paradox, whereby the interpersonal vulnerability required for higher levels of SWB can also lead to negative experiences of wellbeing.

In doing so, this article highlights the need for further qualitative study of SWB; it also offers practical insights that can guide religious professionals with pastoral responsibilities to foster higher levels of SWB, particularly in socio-economically deprived areas. The focus of this study is on social and psychological dimensions of wellbeing. This is because much of the evidence available for the impact of the prevailing socio-economic milieu on wellbeing has particularly highlighted these areas of concern.

3 | METHODOLOGY

As there are major socio-economic challenges being faced by communities across North East England, this area was the focus of study. Prior to the 2008 economic crisis, many areas in the region were amongst the most socio-economically deprived nationally (Church of England, 2006). This has since been compounded by government austerity measures (Barr et al., 2015; Parmar et al., 2016). From 2010, the percentage of children in the North East living in poverty has increased, with 36% of children living below the poverty line in County Durham, for instance (North East Child Poverty Commission, 2020). The number of people with long-term chronic health conditions before retirement has increased (Jagger, 2014), and the region has the highest levels of death in England during the winter months (Equality statistics, research and information, 2017). The North East also has the highest unemployment rate in England (Watson, 2018) and the highest proportion of suicides in England (Office for National Statistics, 2019a).

Data were provided by two congregations in two villages in County Durham. They are within the top 5% of deprived communities in England. One minister oversaw both churches and acted as a 'gatekeeper' for the researcher, providing access to potential participants. Church of England communities were selected as Anglicanism is the largest affiliated religion in the region, making it the most representative (see Office for National Statistics, 2019b). The villages were selected because: (i) congregants had somewhat diverse backgrounds, reflecting the diversity of the region; (ii) the gatekeeper explained that there was a high proportion of devotees with low levels of wellbeing and those with higher levels, offering the potential for comparison; (iii) they are ex-mining communities that have suffered hardship as the result of the closure of the coal pits, thus reflecting the context of many small, ex-industrial, socio-economically deprived communities across the United Kingdom; and (iv) regular service attendance amounted to 45–50 persons, providing a sufficient number of participants to observe and invite for interview. Figure 2 contains more information on participant demographics. This paper only reflects the experiences of Anglicans in ex-mining villages of the North East of England. Nevertheless, findings may be relevant to other contexts (religions, areas and so forth). However, further research in those contexts is needed.

The interviews involved discussion of: (i) family and religious background; (ii) church community involvement; (iii) religious beliefs and practices; (iv) local socio-economic changes; and (v) other challenges and positive experiences. This was complemented with three further interviews—with the minister and two trainee ministers placed in the church communities—to shed additional light on the other data. Ethnographic observations were conducted by going into shops, using local bus services and making observations in participants' homes during the interviews, which was sometimes accompanied by an invitation to lunch. This involved taking notes, which were used to inform additional questions asked during the interviews and to get a more panoramic understanding of how different aspects of participants' social context shaped their personal experiences of wellbeing.

Participant observations were also undertaken. Church events were attended over five months; notes on worshippers' responses to different parts of the services and on their social interactions were taken. This combination of data offered a detailed window into individuals' personal perceptions of their wellbeing, a fuller view of their wider social context and how this can shape their experiences of wellbeing, and provided firsthand experience of the impact that religious community participation could have on these. This aspect of data collection was agreed with the clergy in advance and the parish priest gave notices during the services to remind participants of the research taking place.

Gender	<i>Men</i>	<i>Women</i>				
	5	7				
Age	<i>18-29</i>	<i>30-39</i>	<i>40-49</i>	<i>50-59</i>	<i>60-69</i>	<i>70+</i>
	-	1	2	-	4	5
Relationship to community	<i>Born there</i>	<i>Moved from elsewhere</i>				
	5	7				
Health challenges	<i>Mental</i>	<i>Physical</i>	<i>Both</i>			
	4	4	2			
Employment	<i>Industrial role (formerly)</i>	<i>Regular employment history</i>	<i>Home Makers</i>	<i>Now Retired (inc. formerly employed)</i>		
	1	6	3	8		

FIGURE 2 Participant demographic information.

Participants were recruited via three means. First, the minister approached some members of the congregations who they thought might be willing to participate. Second, the researcher advertised the project in the parish newsletter, providing their email address in case potential participants were either keen or interested in being involved. Third, during the participant observations, the researcher built up relationships with the churchgoing community before inviting individuals for an interview, for example, by staying after church services for tea and coffee. Informed consent for the interviews was gained via a succinctly written information sheet to those who expressed interest in the project. The information sheet outlined the aims of the research, the intended use of the data, promised anonymity, outlined how data would be stored in keeping with GDPR (General Data Protection Regulation) legislation and participants' right to withdraw from the study without the need to provide a reason. Participants also had the opportunity to ask any questions at any point prior to interview, including in-person, immediately before the interview.

The data were interpreted with thematic analysis, enabling the researcher to identify patterns across it (Braun & Clarke, 2006). This facilitates the identification of similarities across participants' data, allowing discussion of the group as a whole. Descriptive coding was employed in the first instance—data were summarised with the language found within it. Pattern and focused coding were utilised in the second instance. The former involved making connections across the data and the latter, identifying the most common codes (see Saldaña, 2009). To create the themes, codes were combined when their language or concepts were related.

The researcher had assumed prior to data collection that participants would report feeling helped by their personal faith and by the social support on offer via church attendance. Nevertheless, researcher subjectivity was

reduced in a number of ways: (i) semi-structured interviews enabled the researcher to capture participants' subjective interpretations of the questions asked and answer as they find appropriate; (ii) data triangulation minimised the possibility projecting the researcher's assumptions onto a small data sample by engaging with different types of data (see Maxwell, 2004); (iii) descriptive coding foregrounded participants' personal perspectives on the topics explored; and (iv) memos, tables and diagrams were utilised to visualise the data and identify relationships between the themes and the most appropriate literature.

Interviews were conducted with seven women and five men between the ages of 30–90, reflecting the gender ratio and age range of the congregations. Most participants were aged 50 and above, in keeping with the overall demographic of the congregations. Histories of mental health, gained via the discussion of challenging and positive life experiences during the interviews, were varied and six were born locally with six having been born elsewhere in the North East or having moved from other parts of the United Kingdom. The two churches meet together regularly and some of those living in one of the villages regularly attend the church in the other, meaning that the community boundaries were blurred. The names provided below are pseudonyms and the specific communities are undisclosed.

The researcher is a university-educated, White male working in academia. As the interviews included questions that referred to highly personal and challenging events, the risk of reproducing hierarchical sociocultural relations was addressed (see Fry, 2023). This was aided by the fact that the researcher's religious tradition differed from the congregations'. In deferring to the religious practices of the community, the risk that the researcher would possess 'soft power' was reduced. This was evinced via physical symbols, for example, kneeling with the congregants for Communion as those distributing it stood over them at the altar. Subsequently, participants were highly honest in their discussion of their life experiences and open to the possibility of an interview. The themes for discussion, emerging from all three data sources, are: Church community; Role of the clergy; and Church-related action.

3.1 | Data analysis

3.1.1 | Church community

Participants explained the impact that belonging to their church community has on them. Helena has anxiety and obsessive compulsive disorder (OCD). She spoke positively of the way that congregants and ministers offer practical and emotional support:

Some people don't drive. We've got a few with cars and they help give lifts ... [I've] spoken about [my] OCD [with the minister and asked her] "If I stop [being anxious about whether my front door is locked] will it be okay because God's looking after me?" She says, "Definitely."

Jillian has fibromyalgia, meaning that she cannot always attend church events, but also expressed the practical and emotional support on offer:

I like to have a cup of tea [after church]. I like to chat around the table ... knowing that we are Christians together, feeling the love of each other as Christians and knowing that people care ... And you can find out a lot in that time- you can find out how somebody is doing, if somebody is poorly and how your friends are ... [it] gives us a purpose. It gives us something to get up for on a morning because I know I'm going to go out and do God's work ... Being able to pray together is a lovely feeling. And I just love being part of it all.

Interviews reveal that the network of congregants (i.e., a supportive network) is a social resource for those within it, providing perceived social support. Specifically, the ability to provide lifts for those who cannot drive to church services and social events enabled individuals to participate in the community and thus access social

resources. This would not have been otherwise possible given the limited and costly public transport in the villages. The few bus routes that operate are not particularly frequent, nor do they regularly keep to their timetable. Return tickets cost the researcher between £6–7, which is substantial in a community where many are on state-provided benefits and require foodbanks (charity-provided, non-perishable food) to be able to eat. Social assistance was also clear during the participant observations. For example, after one of the services, most congregants would sit on tables at the back of the church whilst a handful of younger and more mobile volunteers prepared refreshments that were enjoyed over conversation.

The emotional support on offer is evidently a psychological resource; it fostered positive feelings, whether that be through providing feelings of reassurance, social belonging or a sense of meaning. Moreover, the distinction between social and psychological resources is blurred given that the social network evidently helps foster the psychological resources. Whilst this is in keeping with previous research that identifies the mutual dependence on these types of resources, this qualitative description details: (i) the specific resources on offer; (ii) how they are experienced in situ; and therefore (iii) insight into the particulars of the relationship between psychological and social resources. Indeed, the above examples indicate that the psychological resource of emotional support is available *because of* the supportive network (i.e., a social resource) enjoyed by the participants. Equally, positive feelings (e.g., belonging, a sense of meaning) reinforce social resources given that they motivate participants to continue attending church events.

This theme therefore highlights the mutually reinforcing nature of some psychological and social resources. Whilst this has been recognised in previous research (Krause, 2009), the present qualitative approach offers more specific insight. That is, because it explores direct reports of SWB in situ, it more specifically demonstrates that psychological resources are initially bolstered by social ones, which then promote behaviours that further foster social ones. In doing so, it reveals that resources for SWB are available via interaction between the micro and meso levels. In other words, the existence of a community at the meso level reinforces the group membership of the individual. The communal pool of resources thus benefits the individual; Jillian attends church to pray for and connect with others and benefits from the communal gathering as a result, experiencing a sense of belonging. This, in turn, encourages her desire to engage with the community on a continuing basis. This undermines the neoliberal assumption implicit in Dodge et al.'s articulation of their wellbeing model, given that the inter-reliance that fosters SWB at the meso level evidences the salient role of community in experiences of wellbeing. To foreground this insight, it is necessary to specify the interdependent nature of different types of resources and explicitly recognise the significant interpersonal aspect of SWB.

3.1.2 | Role of the clergy

Participants referred to the supportive role that the church leaders have in their lives. Francesca suffers from anxiety and requires a mobility scooter, both of which make her physically isolated from the worshipping community on a regular basis. She said:

[The minister] comes and sees me sometimes ... It's as if we're two old friends meeting up. You know, we have a laugh over things, what the kids have done, things that have happened ... she's always been really nice to me, and I've done everything that I'm able to help with if she asks me.

In this example, the social resource (a supportive relationship) not only helps to foster positive feelings, for instance through a shared sense of humour, but also contributes to self-efficacy (a psychological resource that promotes positive feelings (see Waters & Sun, 2016)). Francesca explained that she likes being asked to contribute to the church community, for example, by baking for church meetings, because it provides her with a sense of usefulness and connectedness.

When discussing her journey to faith and into the church community, Jillian said:

[The minister] came to me and she started showing ... an interest in me and saying that you are one of God's children ... it was a strange feeling but it was a welcome feeling. And ... my faith started off like a candle flame. You know how it flickers a little? And now it's grown bigger and bigger. So it's more like a fire now than a candle. And that fire is raging on. Through the fire I can see the sunshine. And that's what God makes me think of, the sunshine and happiness and being loved and warm.

In this instance, the congregant's relationship with the minister provides affirming words and an inviting attitude that helped facilitate Jillian's pursuit of Christian faith, leading to positive feelings and life evaluation. Jillian embodied a confidence whilst at church, despite reporting a lack of confidence in the outside world. This was apparent during the services where Jillian was present. She was the most audible singer, even when the rest of the congregation were hesitant and quieter, for example, when the hymn being sung was less familiar to them. It was also apparent in her body language during her interactions with others as she made sustained eye contact and walked with purpose to others, to strike up conversation.

Again, social resources for SWB contribute to psychological ones. Both of these examples foreground the potency that words and behaviours have for contributing to SWB; it is the minister's willingness to see Francesca at home and ask her to contribute to the social life of the church (i.e., a supportive relationship) that has helped foster her positive feelings, and it is the minister's affirming words and hospitable attitude (also a supportive relationship) that contributes to Jillian's exploration of faith and subsequent positive feelings.

This theme also demonstrates that, for SWB to be fostered, it is helpful for there to be mutual dependence, not only amongst the congregation (as seen in the first theme), but also between the church leadership and the laity. This was most clearly expressed by Francesca, who elaborated that she is depended on for providing baked items for church meetings. This was also found in Jillian's experience of religiosity and SWB; Jillian had been asked by the minister to train as a pastoral assistant, someone who aids the clergy to carry out pastoral care in the local community. She did this with a significant level of autonomy (e.g., meeting with members of the community by herself), despite explaining that she would not describe herself as a particularly confident person. Yet, she has grown in her willingness and ability to engage with others in pastoral need since becoming a part of the worshipping community and benefitting from the social and psychological resources available. Although Bourdieu understood clergy to possess symbolic capital in the religious field at the expense of the laity (Rey, 2004)—likely because of his exposure to French Catholicism (McKinnon, Trzebiatowska, & Brittain, 2011)—an alternative dynamic is found in the present study. This enables the laity to undertake activities that help foster wellbeing through facilitating positive feelings, particularly through self-efficacy. This highlights the need for church ministers to be aware of the possible power dynamics at play in ministry (see Wasey, 2013) and for them to include congregants in a way that indicates a level of reliance on them, in keeping with congregants' circumstances and abilities.

3.1.3 | Church-related action

Taking on responsibilities to help run church services is indicative of a certain amount of confidence in one's ability to undertake particular tasks (i.e., self-efficacy). Paradoxically, however, such voluntary work could also undermine experiences of wellbeing amongst participants. Freddie recalled a recent mistake he had made when asked about his voluntary service:

I don't know how good a job I do. I messed up. For some unknown reason I put [page] 68 up [on the board] when I should have put [page] 64 up ... There's always one or two who don't know where to look so I felt bad about that.

There is a board at the front of the church that instructs the congregation what page to turn to in the service books for the liturgy. However, Freddie had put the wrong page number up on the board, leading to confusion for some congregants as they were unable to then follow the service at this point. This lack of self-efficacy led to some negative feelings (specifically, dejection emotions) for Freddie as he felt responsible for this. On the one hand, this is a clear example of religious community participation shaping lower levels of SWB. On the other hand, it is because Freddie belongs to a community that share social resources—and where people are therefore dependent upon one another—that has led to these feelings.

During the participant observations, Freddie displayed higher levels of self-efficacy and positive feelings. For instance, he was operating the sound desk to ensure that the preacher and service leader could be heard on the sound system. He did so with apparent confidence, even singing to himself in the process, apparently without concern of being heard. He also had no apparent hesitation in his competent use of the technology, despite the fact that any technical glitch was likely to be publicly obvious. He was also one of the first people to introduce themselves to the researcher and displayed no reluctance in doing so. This highlights the importance of contextualising individuals' particular experiences of SWB, understanding the micro level within the meso context, to fully appreciate the relationship that religious community participation bears to SWB.

By way of contrast, discussing her aspirations for the church community and her role within it, Barbara said, 'Now that I'm on the PCC I'm trying to bring this up: ... I was thinking of suggesting... one or two services in the year... and just put it as a children's service on, say, a Wednesday in half term'. The PCC is the Parochial Church Council, the local church's executive committee. Each Church of England parish has a PCC. Barbara was confident about articulating her desire for, and planning, changes in the church community. She wants to introduce several services that require significant involvement from children attending schools in the parish. Equally, she recognised that this would be a significant change for some congregants and could even meet resistance. She factored that into her plans by beginning with a very limited number of services during the year, outside of a Sunday, before building up to a fuller integration into the worshipping life of the church community. This evidences the presence of self-efficacy, which finds expression because of the involvement of the laity in organising church activities. Hence, the local structure of the Church of England also fosters psychological resources for wellbeing.

Both of these examples also serve to reinforce the present critique of the neoliberal assumption found within Dodge et al.'s (2012) conception of wellbeing. Even individualised experiences of wellbeing, including those that revolve around self-mastery, are shaped by one's belonging at the meso level. Hence, individual, psychological resources are inseparable from collective, social resources. One's conception of wellbeing must therefore explicitly recognise this fact. The below discussion will unpack this point in greater detail.

4 | DISCUSSION

Figure 3 depicts the social and psychological resources found within the communities explored. The contextually specific approach allows one to expand on the sub-categories of wellbeing resources previously described in the literature, by identifying the specific examples of these sub-categories. Indeed, Figure 3 illustrates the three-tiered nature of SWB that has been drawn out of the literature and above analysis combined. First, there are the broad types of resources identified by Dodge et al. (2012) (but with focus on the social and psychological rather than the physical). Second, there are the broad sub-categories provided by Pierce et al. (1996) and Diener et al. (2011). Third, there are the many possible specific expressions of the sub-categories, of which several have been identified above.

One implication of this is found in its provision of a list of the specific examples of the sub-categories of resources for SWB found within the worshipping communities. This would be useful for religious practitioners, particularly those working in areas of socio-economic deprivation, as it offers in situ examples of phenomena that help foster SWB. Such persons can use these examples to reflect on which of these they already see manifest in their ministerial contexts and how these can be harnessed to foster SWB. It is also useful to conceptualise SWB in this

	Social resources	↔ Mutually shaping ↔	Psychological resources
Tier 1			
Tier 2	Supportive relationships/ perceived social support		Positive feelings
Tier 3	<ul style="list-style-type: none"> ● Hospitable actions ● Affirming words ● Mutual dependency ● Humour 		<ul style="list-style-type: none"> ● Emotional support ● Social belonging ● Self-efficacy
Tier 2	Supportive network/perceived social support		Life evaluations
Tier 3	<ul style="list-style-type: none"> ● Practical support (e.g., lifts) 		<ul style="list-style-type: none"> ● Sense of meaning

FIGURE 3 List of social and psychological resources for subjective wellbeing.

way as it offers a fuller picture of its components of. This will make it easier for religious practitioners to foster SWB in their communities because it is more explicit about what SWB consists of. For instance, it is clear what particular types of resources are required to foster wellbeing; by providing concrete examples of these, there will be a firmer understanding of what individuals with pastoral responsibilities can utilise, encourage and/or introduce into their communities to support SWB with greater efficacy.

However, there is more to unpack regarding the relationship that these types of resources have with each other that is of relevance beyond the context studied. One can identify from the analysis that the social resources always support the psychological ones and that the psychological resources sometimes support the social ones. For example, in the first theme a supportive network facilitated a sense of belonging, which reinforced membership of the social network. Where psychological resources foster social ones, it is when they reinforce a group identity for individuals. The social resources offer this sense of belonging, meaning that the psychological resources identified are thus dependent upon group membership.

Additionally, specific expressions of the psychological resources can foster other psychological resources. For instance, the sense of meaning is supported by social belonging as meaning is shaped by ingroup dynamics; individuals' beliefs and behaviours are significantly shaped by their social groups (Sani, 2005). Hence, Jillian spoke of having a purpose regarding her role within the community, in the first theme. Again, this has practical implications for religious professionals. By ensuring that certain examples of resources are available within their communities, SWB can be fostered more effectively if resources that bolster other resources are readily available. Indeed, particular attention to how a sense of community belonging can be fostered within one's context should be paid. This has other practical implications for those with pastoral responsibilities: it highlights that individual wellbeing must be contextualised within their religious community for one's SWB to be enhanced. This might include, for example, factoring in community-based activities and the likely impact of various relationships between individuals, whilst attempting to bolster the wellbeing of congregants.

Moreover, the presence of social networks and the supportive relationships that they offer are insufficient by themselves for understanding the religiosity–SWB relationship. Attention must be paid to the micro level to understand how SWB works itself out at the meso level. It is the particular actions of individuals that feed into the social networks and supportive relationships—sub-categories within the social resource pool. These facilitate psychological resources, which then bolster the social resources by conferring a sense of social identity on participants. To illustrate from the second theme, when the minister was verbally affirming and inviting towards Jillian, Jillian experienced positive feelings which fostered a sense of belonging to the community, increasing her engagement with it. Whilst critiquing the neoliberal assumption found within Dodge et al.'s (2012) model of wellbeing, it is important not to throw the proverbial baby out with the bathwater.

The above analysis provides additional support for previous research which has indicated that the social dimensions of religiosity are more effective for enhancing wellbeing than individual religious activities; it shows that the

presence of (more individual) psychological resources are dependent upon (communal) social resources whereas the reverse is not always true. Again, this supports the critique of neoliberal conceptions of wellbeing. It also reinforces the claim that belonging and wellbeing depend on individual-congregation alignment. However, the present data also highlights the cyclical nature of the social process at play between the micro and meso levels in addition to the way in which the social and psychological interact in resource building.

The second and third themes also highlight the role of religious tradition in shaping experiences of wellbeing, particularly as the wider religious culture of the Church of England (operating at the macro level) has contributed to the presence of opportunities for congregants to become more actively involved in church life and in its engagement with the wider society. Being a Protestant denomination, the Church of England stands in a tradition that has historically affirmed the concept of the priesthood of all believers. This is the idea that all Christians have direct access to God and are to play an active life in the Church's ministry. Also, the Church of England has recognised the necessity of facilitating lay leadership in recent years, partly in light of clergy shortages (Davies, 2021). This macro context is paralleled at the meso level where the minister responsible for the communities was running multiple churches across multiple parishes. It was essential that laity were involved in running the churches. This context thus facilitates opportunities for congregants to experience self-efficacy.

The analysis has also shown that understanding the resources available through community religiosity requires appreciation of how the micro, meso and macro levels intersect. All three converge to shape SWB. It is individual action at the micro level that feeds into the pool of resources available to the worshipping community (the meso level). The former is reinforced by a sense of belonging to the latter. The possibility of contributing at the meso level is also afforded, in part, by the context operating at the macro level; it is the Church of England's belief heritage and numerical decline that facilitate some of the opportunities to contribute to and thus benefit from the resources on offer at the meso level. Hence, it is not only the presence of religious community practices that matter for SWB, but the interaction of the different levels at which this happens; nor is it only about the specific resources available but how they come to be (see Figure 4).

Religious professionals will therefore need to pay close attention to the institutional context they are operating in to harness opportunities in the existing religious culture to foster greater levels of SWB amongst devotees. This may include finding opportunities in phenomena that are typically considered undesirable within their institution (e.g., religious decline), effectively making a virtue of it. The above underscores the importance of qualitative investigation into religiosity and SWB given that it is such methods that enable a detailed description of social context, thereby facilitating direct observation of how social phenomena manifest in situ (see Maxwell, 2004).

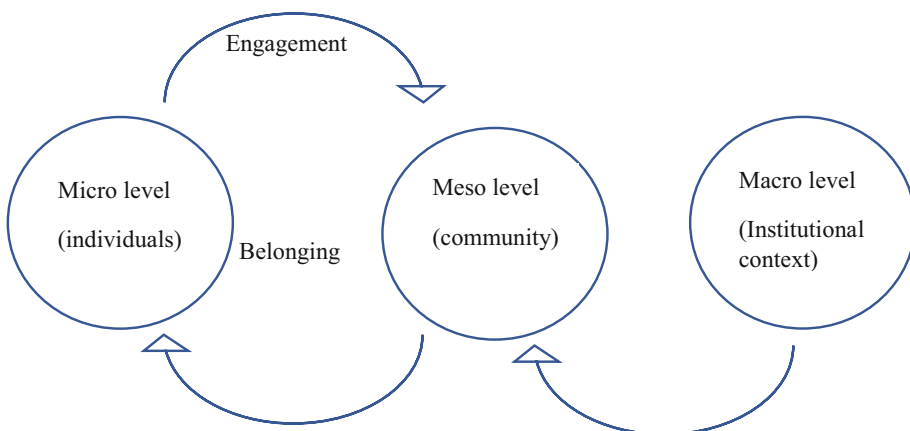


FIGURE 4 Conceptualisation of the intersections of micro, meso and macro levels for shaping subjective wellbeing.

The third theme demonstrates that SWB is not a binary phenomenon where one either suffers from lower levels of it or enjoys higher levels. The presence of a wellbeing paradox is apparent on considering the interactions that occur between the micro and meso levels. Belonging to the group here confers a sense of responsibility. When Freddie believed that he confused the other congregants by providing incorrect information, he experienced negative feelings, recognising their dependence on him for participating in the service. In other words, contribution to the resource pool is a double-edged sword as it can foster both positive and negative feelings. This is the case because the fact of social belonging—that which enables access to the resource pool for SWB—is also that which provides a sense of responsibility towards others. Aforementioned examples of this sense of responsibility include the giving of lifts to those without cars and the desire to catch up with other congregants to learn of their needs. This is consistent with, and can be illuminated by, research which evidences that group belonging increases the likelihood of helping behaviour towards others in that group (Dovidio, Piliavin, Gaertner, Schroeder, & Clark, 1991).

The above also adds a further dimension to Dodge et al.'s (2012) model. Not only is wellbeing fluid but it is fluid *because* of context-dependent variables. In other words, its fluidity derives from the fact that wider social factors operating at the meso level come to shape SWB at the microlevel. Once more, the problematic nature of the neoliberal understanding of wellbeing is highlighted. This also indicates an inconsistency in Dodge et al.'s articulation of their model; as aforementioned, their statement that wellbeing is stable when one has the resources to deal with the challenges faced in any given scenario suggests that wellbeing will vary by context. Indeed, they recognise that challenges and resources are not stable over time. This requires acknowledgement of situational variables. Inevitably, this will include those operating at the meso and macro levels. Nevertheless, such context is omitted in their model, focusing instead on the individual (micro) level of wellbeing.

Relatedly, the above also indicates that SWB gained via religious community participation requires a level of vulnerability. It is conceivable that vulnerability stems from a dependence on others for accessing resources for wellbeing. However, the data show that it also lies in one's ability to help others who are depending on them. Doing so well can foster positive feelings, particularly via self-efficacy, whereas failing to meet this need can foster negative feelings, such as dejection-related emotions. Moreover, it is the social nature of the human being that determines this wellbeing paradox. It is because humans are predisposed to identify with social groups (Sani, 2005), leading to a desire to help those perceived similar to oneself (Dovidio et al., 1991), that serves as the prerequisite for social belonging and the subsequent vulnerability.

4.1 | Limitations

This study offers a focused exploration on two small communities in a semi-rural part of the North East of England. A strength of this study is that these communities are representative of ex-industrial areas in deprived parts of the United Kingdom, home to approximately 16.6 million persons (Beatty & Fothergill, 2018). Nevertheless, the findings are not generalizable beyond them without further testing in different contexts, such as urban environments. Moreover, this study concerned two Anglican groups. The majority living in the villages explored did not attend church on a regular basis and the impact of this on their SWB remains unexplored and so a comparison has not been offered. Consequently, this study cannot address the question of how wellbeing differs between the religious and non- or less religious in areas of socio-economic deprivation, highlighting the necessity of a follow-up study.

A further limitation is that of sample size. The usual trade-off of richer, more nuanced data versus quantity of data applies to this study as it does in other areas of social research. The fact that this study's findings are simultaneously in keeping with previous large-scale research, whilst adding nuance, indicates their reliability. Moreover, their specificity allows for tailor-made solutions to issues affecting specific communities. Notwithstanding, the data sample, whilst being representative of the small communities contributing to the research, was more modest than would be the case in quantitative analyses. Finally, this project did not explore how physical resources map on to

participants' resource pools. Future work would do well to seek to address this current gap in understanding amongst religious communities in deprived areas.

5 | CONCLUSION

SWB requires understanding of group dynamics and the role that wider social contexts play in shaping it. Whilst wellbeing can be understood in terms of an equilibrium operating at the individual level, it is artificial to disentangle this from the wider social contexts in which an individual finds themselves. To put this another way, wellbeing stems from a balance between life's challenges and a resource pool that enables one to adequately deal with these challenges *insofar as* the broader social context (meso and macro levels) present opportunities that can foster resources for wellbeing. Whilst the model explored recognises social dimensions to wellbeing resources, it does not elaborate on what constitutes such resources and does not account for how social contextual factors shape wellbeing. Such contexts must be accounted for when strategizing to enhance individuals' wellbeing. Hence, the theoretical contribution made by this paper is that, when taken together, the heuristic models depicted in Figures 1 and 4 offer a conception of wellbeing that more fully integrates the various 'levels' of the social world at their intersection with experiences of wellbeing. In doing so, the polyphony of factors shaping SWB become clearer. This was made possible by a specifically qualitative exploration of wellbeing and religious community participation.

One other area that further research could focus on is that of the vulnerability paradox. If SWB is to be fostered through social belonging, a level of vulnerability is necessary. However, this creates its own challenges, especially on considering the relative vulnerability that those living in such areas already possess. This could be addressed, for example, by exploration of how appropriate boundaries can be established and managed by religious practitioners. This insight has been enabled through a qualitative analysis that seeks rich descriptions of people's everyday life and thus gained access to self-reports of experiences of wellbeing within the context in which wellbeing resources were accessed. Further research could consider the relationship that physical resources have to social and psychological ones as this has been beyond the scope of the current study, which has focused on the interplay between the individual and the group with regard to SWB. Other studies may also wish to consider qualitatively exploring how those beyond religious communities fare in the pursuit of wellbeing, including how/if they access comparable resources to the communally religious.

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CONFLICT OF INTEREST STATEMENT

The author declares no conflicts of interest.

DATA AVAILABILITY STATEMENT

Research data are not shared.

ETHICAL APPROVAL

This research was conducted in line with, and approved by, the Ethics Committee of St John's College, Durham.

CONSENT TO PARTICIPATE

All participants provided written, informed consent to participate in this study in keeping with the ethical requirements of St John's College, Durham and UK GDPR legislation.

CONSENT TO PUBLISH

All participants gave their consent to their anonymised data appearing in publications.

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