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Alex D. J. Fry

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Religiosity and wellbeing in areas of socio-economic deprivation: The role of social capital and spiritual capital in enabling resources for subjective wellbeing

Alex D. J. Fry 

Department of Social Sciences and Social Work, Bournemouth University, Bournemouth, UK

ABSTRACT

Although religiosity and socio-economic status shape wellbeing, there are few analyses on wellbeing and religiosity in socio-economically deprived areas, despite decreases in wellbeing and increased deprivation in Europe since the 2008 financial crisis. This paper explores how resources for subjective wellbeing are enabled in deprived areas via religious participation, through a thematic analysis of ethnographic and participant observations and semi-structured interviews in two villages in County Durham, UK. The function of social and spiritual capital in transmitting resources for wellbeing is identified, and the theory of spiritual capital developed, in light of the analysis. Consequently, the need for qualitative investigations of wellbeing in deprived communities is highlighted.

KEYWORDS

Social capital; spiritual capital; socio-economic deprivation; wellbeing; subjective wellbeing; qualitative methods

Introduction

Worldview and socio-economic status shape wellbeing; religiosity and higher levels of socio-economic status predict higher levels of it, whereas lower levels of religiosity and socio-economic deprivation are linked with less wellbeing. Nevertheless, there has been comparatively little – especially qualitative – research on wellbeing and religiosity, specifically in areas of socio-economic deprivation, in recent years. Since the 2008 economic crisis, wellbeing has decreased across Europe (Parmar, Stavropoulou, & Ioannidis, 2016). In the UK, decreased affordability of essentials (e.g., food and clothes) has been associated with poor mental health during government-led austerity (Curl & Kearns, 2015). In England, the less formally educated and the unemployed have been particularly susceptible to decreased wellbeing (Barr, Kinderman, & Whitehead, 2015). Hence, areas with lower employment rates also have lower levels of wellbeing (see Office for National Statistics, 2019b; Watson, 2018). This has occurred alongside the widespread closure of public services (UNISON, 2019), reducing opportunities for community activities, which foster wellbeing.

CONTACT Alex D. J. Fry  afry@bournemouth.ac.uk  Department of Social Sciences and Social Work, Bournemouth University, Bournemouth, UK

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In many of the communities most impacted by this context, churches remain one of the few providers of community resources. Indeed, belief that God is in control during the economic crisis has buffered against decreasing mental health (Upenieks, Schieman, & Bierman, 2021). Research into the relationship between wellbeing and religiosity in areas of socio-economic deprivation is therefore salient, able to enhance understanding of how wellbeing can be fostered within the current milieu.

This article explores the religion – wellbeing relationship in such an area. It analyses how facets of wellbeing accompany religiosity in deprived communities, identifying the social processes enabling resources that foster wellbeing. It thereby sharpens and develops existing models for understanding this relationship, offering a more nuanced account of how social and individual components of religiosity shape wellbeing in the day-to-day than is currently acknowledged.

Wellbeing, religion and socio-economic status

Descriptions have frequently been offered for wellbeing (Dodge, Daly, Huyton, & Sanders, 2012), leading to a thorough understanding of subjective wellbeing's (SWB) components. Dodge, Daly, Huyton, and Sanders (2012) have argued that individuals possess a resource pool for responding to life's challenges. Wellbeing is obtained when this pool can deal adequately with these challenges and is thus the result of equilibrium. When the resource pool does not deal sufficiently with challenges an individual will experience decreased wellbeing. A benefit of this conception of wellbeing is that it is more straightforward to measure than other attempted definitions (Dodge, Daly, Huyton, & Sanders, 2012). It also recognizes the existing insight that social aspects of wellbeing bolster psychological ones and *vice versa* (e.g., Krause, 2009).

In this model, individuals require access to resources for wellbeing. However, the above model does not indicate *how* these resources are accessed. This highlights the need to explore how they are manifest in daily life, thereby requiring an understanding of how wellbeing is experienced, given that an *in situ* detailed description of resources for wellbeing has the potential to illuminate the genesis of these resources in the lives of groups and individuals. It is thus necessary to explore SWB, which consists of life evaluations, positive feelings, and negative feelings (Tay & Diener, 2011); within Dodge, Daly, Huyton, and Sanders' (2012) paradigm, phenomena that enable positive life evaluations and positive feelings may be viewed as resources for wellbeing, whereas negative evaluations and feelings are that which threaten wellbeing.

There is a strong link between religion and wellbeing; greater levels of religious belief strengthen experiences of wellbeing (Moore & Leach, 2016). Belief in God can also improve one's confidence that they can influence

their surroundings, enhancing their ability to do so (Pargament & Hahn, 1986), owing to belief in “collaborative control” where believers work with God to influence their environment (Fiori, Brown, Cortina, & Antonucci, 2006). This also fosters positive feelings (Quevedo & Abella, 2014). The social dimensions of religion have a more significant impact on wellbeing than religious beliefs (Churchill, Appau, & Farrell, 2019). For instance, attending religious services supports coping as the social connections made can create a sense of constancy (Durkheim, 1964 [1912]), and joint activities underpinned by shared beliefs create a sense of solidarity, facilitating shared meaning, which also provides positive feelings (Krause, 2009).

Religious communities can provide congregants with tangible assistance as well as emotional support (Krause, 2009) and protect against depression (Balbuena, Baetz, & Bowen, 2013). In fact, religious activities may offer greater health benefits than other types of social participation: more observant Christian groups have higher levels of SWB than religious nones due to religious service attendance (Lim, 2015), perhaps because religious social integration buffers people from isolation (DeAngelis & Ellison, 2018). Nevertheless, in China, religion supports wellbeing within the Christian and Taoist traditions but not within Buddhism (Lai, Cummins, & Lau, 2018) and, in central Europe, only the Roman Catholic tradition is associated with wellbeing amongst the elderly (Bodogai, Olah, & Roşeanu, 2020). This supports the calls for qualitative studies of religiosity and SWB to better explore the contextual peculiarities of their relationship (e.g., Bodogai, Olah, & Roşeanu, 2020).

Deprivation predicts lower levels of SWB (Bellani & D’Ambrosio, 2011). Equally, higher levels of SWB are associated with higher socio-economic status (Haring, Stock, & Okun, 1984). However, the relationship between social class and SWB is moderated by sense of control (Chen, Luo, Wu, Chen, & Zhao, 2021), indicating that the social more than the purely economic is important for wellbeing. Notwithstanding, there is comparatively little (especially qualitative) research on religiosity and wellbeing in socio-economically deprived areas. One exception is New Zealand, where religious persons in deprived communities fare better on measures of SWB than the non-religious (Hoverd & Sibley, 2013), and religiosity has been found to support wellbeing in less developed nations (Diener, Tay, & Myers, 2011).

Nevertheless, whilst religiosity improves wellbeing amongst those with lower socio-economic status, the difference that religion makes to wellbeing for those with higher levels of income is more significant (Churchill, Appau, & Farrell, 2019). Also, private religiosity, rather than religion’s social dimensions, support wellbeing for immigrants, likely owing to their relative lack of social resources (Klokgieters, van Tilburg, Degg, and Huisman, 2019). This anomaly further highlights the need to explore the religion – SWB relationship *in situ*,

additionally indicating the appropriateness of a qualitative analysis to capture its nuances.

SWB, social capital and spiritual capital

Such lack of literature in sociology is likely owing to the fact that sociology is concerned with collectives more than individual experiences (Veenhoven, 2008). However, SWB clearly has important communal social dimensions, not least as it is shaped by social capital (Almakaeva, Moreno, & Wilkes, 2021). Social capital – and spiritual capital – can be used for either achieving or maintaining social status (Guest, 2007b). They have often been seen as exclusivist resources that favor the elite. Within this paradigm, social capital “is the aggregate of . . . resources” accrued via social networks for excluding others and consolidating power (Bourdieu, 1986, p. 247). Social networks contribute to an individual’s habitus – the accumulation of their habits, dispositions and skills which become ingrained over time – because it is shaped by one’s social context (Bourdieu, 1977). Persons engage with the established social order through social practices that result from habitus, particularly hierarchical sociocultural relationships (Dillabough, 2004). This process can lead to symbolic domination from those who consume cultural resources through their social network whilst denying such resources to those beyond the network (Bourdieu, 1986). However, social capital need not be exclusivist and can strengthen community (Putnam, 2000). In this functionalist paradigm, bonding social capital is the exclusivist approach, whereas bridging social capital is the sharing of social resources beyond the group (Putnam, 2000) and it is found within church communities (Smidt, 2003; Unruh & Sider, 2005).

Quantitative research has shown that social capital fosters SWB (Pang, 2018; Ramos, Erkanli, & Koenig, 2018). Indeed, social networks shape well-being (Furstenberg & Hughes, 1995) and in Belgium and Canada social capital is a predictor of SWB (Helliwell & Huang, 2010; Hooghe & Vanhoutte, 2011). In high and middle-income nations, social capital predicts higher levels of SWB, whereas in low-income nations this is true for only some aspects of social capital (Calvo et al., 2012). Communities with higher levels of social capital are also more likely to maintain higher levels of wellbeing during economic crises (Helliwell, Huang, & Wang, 2014).

Nevertheless, there is little research on the inter-relationship of wellbeing, religiosity and social capital. One rare study in this area found that, in China, social capital is irrelevant to the religion – wellbeing relationship as much religiosity is non-congregational (Chen & Williams, 2016). However, social capital mediates the relationship between religion and health (Yearly, Ounpraseuth, Moore, Bursac, & Greene, 2012) and interconnectedness amongst devotees is a predictor of fewer depressive symptoms (Holt, Clark, Wang, Williams, &

Schulz, 2015). Social capital therefore offer access to resources that support well-being in religious contexts. Research on how this manifests in socio-economically deprived communities is lacking, though. It is thus necessary to study the religious contexts in which behaviors related to social capital and wellbeing take place, specifically the everyday settings and activities of individuals as such capital is embedded within social networks, occurring at the micro-social level (Morrow, 1999), to tap into lived accounts of wellbeing.

Whilst social capital is a broader, economic leveling metaphor, spiritual capital recognizes a perceived relationship with the supernatural and the memory of a community's tradition in attaining social status (Casson, 2010). Verter (2003) developed Bourdieu's framework of capital in his theory of spiritual capital, which consists of: religious knowledge, competencies and symbolic preferences. Spiritual capital has three components: (i) the embodied state (i.e., habitus); (ii) the objectified state, the consumption of "material and symbolic commodities" (p. 159) for habitus; and (iii) the institutionalized state, the context where spiritual capital manifests as provided by religious institutions. Accumulated spiritual capital, in the Bourdieusian model, enables individuals to either maintain or improve their position within religious spheres and is accrued via socialization (Verter, 2003). Nevertheless, more recent research has shown that Verter's three-tiered conception of spiritual capital can be transmitted in the bridging approach noted by Putnam in relation to social capital (Fry, 2021; Guest, 2007b), indicating the validity of the functionalist approach to understanding spiritual capital.

Research on spiritual capital and wellbeing also indicates a positive relationship between these two phenomena. However, there is no consensus on spiritual capital's definition. Veerasamy, Sambasivan, and Kumar (2015), for instance, define it as dimensions of personal wellbeing, spirituality and religiosity, with little recognition of how contested each of these terms are. Wortham and Wortham (2007), drawing on Iannaccone (2003), have defined it as a multidimensional concept that is a combination of social and cultural capital, encompassing beliefs, behavior, religious instruction and participation in religious activities. Hefner (2010) understands spiritual capital to be a combination of religious and cultural values, reinforced within a community, that shape other forms of capital. Verter's (2003) definition, however, has been well evidenced in the UK context in recent years (Fry, 2021; Page, 2017), including in its functionalist form (Guest, 2007b; Fry, 2021) and so is the conception adopted here.

The study

This article explores the social processes that afford access to resources for SWB via religious communities in areas of socio-economic deprivation. It examines the inter-relationship between SWB, religiosity and social and

spiritual capital. Consequently, it advances theoretical knowledge on the religion – wellbeing relationship by: (i) providing an *in situ* identification of social processes that enable resources for SWB through religious community participation; (ii) applying and sharpening Putnam’s conception of social capital in light of (i); (iii) applying and developing spiritual capital via the same means, highlighting its role in enabling SWB and its potential for widespread applicability for understanding the religion – SWB relationship; and (iv) thus shedding light on the contribution that these sociological lenses can make to understanding SWB in areas of deprivation.

Data and methods

This study focuses on North East England as many areas in the region are amongst the most socio-economically deprived nationally (Church of England: Commission on Urban Life and Faith, 2006). This has been compounded by the 2008 financial crisis and subsequent government-led austerity (Parmar, Stavropoulou, & Ioannidis, 2016). Since 2010, the percentage of children in the North East living below the poverty line has increased, the majority of whom lack at least two basic “child necessities”; in County Durham, over 36% of children live below the poverty line (North East Child Poverty Commission, 2020). The number of people with long-term chronic health conditions pre-retirement has increased (Jagger, 2014), and much of the region has the highest levels of death in England during the winter months, resulting from fuel poverty (Equality statistics, research and information, 2017). It also has the highest unemployment rate in England (Watson, 2018) and in 2018 there were more suicides per person in the region than elsewhere in England (Office for National Statistics, 2019b).

Research was conducted amongst two church communities in two villages in County Durham because some of its villages are amongst the top five per cent of deprived communities in England. Focus was given to Church of England (CofE) communities because Anglicanism is the largest affiliated religion in the region (Office for National Statistics, 2019a). One village had around 3,000 inhabitants and the other, 5,000 according to the most recent census. They were selected because: (i) they shared a vicar who could provide access to potential participants; (ii) congregants reflected something of the diversity of the region, spanning the adult age range, had different employment statuses, included men and women, and most had grown up in different parts of the North East – they were demographically identical to the surrounding villages and to each other; (iii) a high proportion of congregants exhibited low levels of wellbeing, as well as having congregants with higher levels, as indicated by self-reported medical diagnoses (e.g., anxiety, depression, mobility impairments); (iv) they are ex-mining communities that have suffered hardship with the closure of coal mines, reflecting the context of many smaller,

ex-industrial communities across the UK; and (v) both churches collectively provided a potential participant pool of 45–50 persons, 12 of which were interviewed.

Semi-structured interviews were conducted and discussed: (i) family upbringing; (ii) involvement with the church community; (iii) their religious beliefs and practices; and (iv) difficult and positive life experiences. This was complemented with interviews with the priest and two trainee ministers to discuss the topics that emerged during congregant interviews, offering the perspective of those providing pastoral support to them. From the congregations, seven women and five men were interviewed, were between the ages of 30–90 and were white, reflecting the gender ratio, age range and ethnicity of the congregations. In keeping with the demographic, most participants were aged 50 or over. Some had histories of poor mental health whereas others had been healthy most of their lives. Six were born locally whereas the other six had moved to the villages from elsewhere. Each church held weekly services and both met together monthly. Some of those living in one of the villages regularly attended the church in the other, meaning that the community boundaries were somewhat fluid. All names provided below are pseudonyms.

Ethnographic observations were also conducted; the researcher used local shops and public transport and made observations in participants' homes during interviews, taking notes (e.g., on the cost of living (e.g., bus fare) and on the local economy (e.g., vacant shops)), to inform additional interview questions. Participant observations were also undertaken, attending church services over five months. This involved taking notes on worshippers' responses to different aspects of the services and on their social interactions. Thematic analysis was employed to interpret the data. Specifically, descriptive, pattern and focused coding were utilized and the codes that emerged were combined – to create themes – when their language or concepts were related (see Saldaña, 2009).

Participant observations were undertaken to become better integrated into the worshipping community as a matter of research ethics; it was important that the congregations did not feel “studied” by an outsider, particularly a tertiary-educated, white male working in an elite sector. Given that the research asked participants to discuss deeply personal and challenging events for analysis, it was necessary to attend to the risk of reproducing hierarchical sociocultural relations. The congregations' religious tradition was different from the researcher's and so the latter did not have normative habitus in that context. Whilst the congregations were historically “high church” (formal and traditional), the researcher is “low church” (informal and contemporary). Thus, by deferring to the religious rituals and customs of the community, the researcher was reducing the risk of possessing “soft power”. This manifested in physical symbols, such as kneeling with the congregants for Communion as those distributing it stood over them at the altar, helping

address the power balance. As a corollary, participants were open in their discussion of their life experiences and willing to accept an invitation for interview.

This context shaped the approach to engaging with the community prior to the interviews. For example, the invitation distributed to the congregations was written in a manner accessible to those with varied levels of literacy. On the gatekeeper's advice, the researcher also wrote a short message about the research and included a picture of themselves for the church magazine so that they become something of a known quantity to the communities. The research consequently became a discussion point amongst them, leading to increased interest in the research and readiness to participate. The researcher locates himself as an Anglican with experience of the breadth of the CofE and who hails from a family that has historically been working-class, but whose immediate family is middle-class, the consequence of his parents' social mobility. Bias resulting from researcher subjectivity was reduced in multiple ways. Firstly, through the employment of semi-structured interviews, enabling the researcher to capture participants' subjective interpretations of the questions and steer the answers in a way that they find appropriate. Secondly, data were triangulated through the collection of different types, minimizing the possibility of the researcher projecting their assumptions onto a narrow sample of data. Thirdly, coding the data with participants' own language (i.e., descriptive coding) highlighted their personal perspectives on the topics explored.

Findings

Three themes are relevant for discussion and were chosen because they provide a window into participants' experiences of wellbeing as they intersect with their religiosity, social networks and perceptions of support.

Theme 1: Church community

Participants spoke of their sense of belonging to a community within the congregations. Jillian said:

When you come into the church you feel warm and loved ... and always welcomed ... we're always there for each other for prayers especially The peace is a lovely thing ... I always hug ... and [give] a kiss.

The congregation express sentiments of peace toward each other before Communion. Usually in the Anglican tradition, this is done by shaking hands. However, participants reported giving and/or receiving kisses and hugs. Participant observations showed that this was commonplace amongst both congregations. Jillian had always lived in one of the villages but had been attending

church regularly for five years. She started to attend after meeting the minister in the village, who had been affirming Jillian by telling her that she was loved by God. Jillian felt welcomed into the church when she began attending and reported that this has been the case since entering the church community.

Sandra said:

[People were] very welcoming . . . and they . . . said to me, “Would you like to stay for tea and coffee?” I . . . said, “. . . I won’t” because . . . I wanted to get home to tell [my husband] all about it . . . I was really, really excited . . . I skipped home thinking, “I can’t wait until next week” . . . It was like something just said, “Come on in . . . you’re home now” . . . I knew I belonged.

Similarly, the researcher was welcomed by several congregants during participation observations, including by those who had not yet become aware of his reason for attending. Congregants introduced themselves, asked the researcher about himself, and whether he wanted to be included in Communion, a central component of the service.

Such social phenomena reveal resources that foster SWB; the experience of being “always welcomed” and that they were “home” indicates a social network and constancy of belonging (Durkheim, 1964 [1912]). Indeed, that participants feel they are “always there for each other” and that they “belonged” highlights the feeling of solidarity they experience within their network. This is juxtaposed with perceptions of tangible and emotional support as other participants mentioned practical examples of help (e.g., driving other congregants to church services) as well as offers of prayer that followed listening to others’ life challenges. Participants reported numerous experiences of sharing resources within the church community and to those who were not yet regulars but who found themselves visiting the church. This is indicative of the sharing of social and spiritual capital that extends beyond the bonding approach. Moreover, those who had joined later in life found that it offered them access to support unavailable prior to joining the church and those who struggled to attend regularly found the extent of their support more limited when compared with previous times in life when they had attended regularly.

The divide between bonding and bridging capital is therefore blurred as there is an openness to unestablished members of the churches where invitations into community activities are offered regardless of commitment, but capital is accessed via participation in the community. To understand this nuance, there are three things to consider here. First, the CoFE is an established denomination rather than a partisan organization. So, the symbolic boundaries between it and wider society are blurred (Fry, 2023), meaning that “membership” is not a prerequisite of belonging. Second, although this does not preclude the possibility of individual CoFE congregations drawing such boundaries (see Guest, 2007a), parish churches play a clear social function in the communities explored. The

ministers explained that children are regularly baptized and that the churches are the primary providers of funerals and marriage ceremonies, indicating the cultural impact of the CofE's established status in the villages. Third, the villages are small and isolated communities, being semi-rural with little (and expensive) public transport (making it difficult to leave regularly), where many of those living there grew up and remained in them, creating a stronger sense of social cohesion. Nevertheless, the congregation consists of established congregants who were not born and raised in the villages. Alongside the culture of Anglican establishment, this appears to foster an openness to others.

Moreover, spiritual capital in the objectified state is exhibited as the communities regularly pray for each other. In the services, there was always a list of individuals who were prayed for publicly, regardless of their religious participation. As with social capital, the divide between its bonding and bridging expressions was unclear. Communion, for instance, is a commodity for consumption and was offered to the researcher at both churches on their first visit. Equally, prayers for others during challenging times were accompanied by established relationships that were frequently forged within the church community.

Social and spiritual capital thus shape participants' experiences of wellbeing. That they "feel warm and loved" and find their experiences of being welcomed "wonderful" is indicative of positive feelings. This is partly owed to shared meaning (their Christian worldview – see Krause, 2009). Equally, Sandra's initial account of positive feelings referred to a sense of belonging. Whilst this occurred within the context of a shared worldview, it was the former element that was central to her experience of SWB. Nevertheless, shared meaning is a component of group processes; groups with shared identities negotiate shared beliefs (Sani, 2005), meaning that social belonging and religious beliefs are overlapping facets of wellbeing.

Capital also contributes to habitus given the reported impact on disposition that the feelings of warmth and love have (e.g., hugs and skipping). Hence, participants possess social capital in the embodied state. In fact, before the start of services congregants sought each other out, made affirming physical contact (e.g., hugs) and asked after each other; these churchgoers had mastered the social dispositions appropriate to the community, evidenced in the mutuality of such interactions, showing that habitus can offer a visible manifestation of SWB. Social capital also contributes to SWB through the church community's collective action in a more nuanced way. They run a food bank for those in the villages who cannot afford food, but the minister explained that some won't use the food bank publicly out of shame. Instead, the minister allows people to use it after it has closed for

the day. This is to avoid negative feelings and is facilitated by bridging social capital.

Theme 2: Sacred practices and sacred space

Participants' actions during church services were positive experiences. Barbara said:

I like the readings ... I don't follow them in the book ... I like to listen and think about what I'm hearing ... The readings ... and sermons ... make me think more about ... how I go about my day-to-day life.

Literacy levels varied amongst the congregations and having biblical texts and a sermon read to them aided reflection on participants' worldview and its application to their lives. This required a certain amount of literacy and confidence from other congregants and the confidence to construct and deliver a sermon on the part of church ministers.

Francesca, who has anxiety and a physical disability, said:

Just ... sitting and thinking about things and try[ing to] get some sort of perspective in my head, rather than [it being] manic and messy ... I feel really calm ... It's as if a peace comes over me ... my husband and my kids say I'm a lot calmer when I get back [home from church].

Being in the church buildings is a source of comfort for participants, particularly when they can sit in silence and reflect on life. The buildings are nineteenth century with a traditional feel inside, with wooden pews and some religious imagery, creating a sense of timelessness. Equally, these buildings are symbols of important life events, being the place where children are baptized, couples married, and funerals taken. Moreover, whilst the housing in the villages varied, it is typically small, terraced housing, organized in rows across both sides of a street and there are few places facilitating quiet reflection. Hence, Francesca's comment that she finds her sense of peace gradually eroding during the week; she does not feel peace when she does not attend church. Undertaking rituals during services therefore involves social phenomena that support wellbeing – positive life evaluations and positive feelings. This helps bring the complex nature of social and private/individual dimensions to religiosity to the fore. The extent of interaction throughout a church service is more limited than in other social contexts as there is much listening and reciting liturgy whilst facing forward. However, this is facilitated by church leaders and volunteers, whether it be to open the church, preach, or manage the relevant technology (e.g., the microphones and sound desk). It is these activities that facilitate the positive experiences of wellbeing. Hence, some of

the more individual/private components of these activities are dependent on a social network.

Spiritual capital is manifest within service rituals, with individuals using their abilities to benefit others in the objectified state. It is also offered in the institutionalized state as people open the church buildings, enabling individuals to reflect away from the distractions and challenges of everyday life. Spiritual capital therefore fosters life reflections, leading to positive feelings. Again, the nature of the spiritual capital is ambiguous. It is received by those who have gathered for worship and provided with the expectation that it is consumed by those holding the Christian worldview. On the other hand, anyone can attend the service and receive the spiritual capital on offer given the openness to participating in the service experienced by the researcher and by participants, including those who had more recently moved into the villages being explored.

This further evidences that habitus informed by spiritual capital can manifest as evidence of SWB. Barbara's reflections inspire the way she lives in the day-to-day, indicating that this leads to ingrained habits and dispositions. This is also the case with Francesca but more ambiguously, as her peace is temporary, but it is experienced regularly and impacts her interactions. Due to her physical disability, Francesca struggles to attend church on a regular basis and so does not benefit from the regularity of the spiritual capital on offer to those who attend weekly.

Theme 3: Faith in God

All participants identified as Christians and reported individual religiosity. Andrew said:

I just sort of chat to God . . . It doesn't have to be anything big, just, 'Thank you that we've got a crocus that's come into bloom' . . . He's always been a companion on the journey – a saviour in time of distress . . . And ultimately, I look forward to having a chat closer to home, as it were.

God is seen as a source of support during challenging circumstances and the provider of things that help facilitate happiness, as indicated by the gratitude for nature.

Helena said:

Jesus knows me inside out . . . so [I'm] just . . . honest about everything and what I need help with and what I'm thankful for . . . It makes me feel like I'm doing something to help other people . . . I think there must be some power . . . for people to feel like that because of God.

Andrew is apparently less frightened by the prospect of death (indicating positive life reflections) than may otherwise be the case, given that he is

looking forward to communicating with God “closer to home”, a euphemism for his belief in an eternal existence beyond death. Helena mentions the source of support but adds that God is seen as a source of power, enabling one to make a difference for others. This shows participants’ belief that God is a source of physical (e.g., plants) and symbolic (e.g., power) commodities that positively impact their outlook on life and fosters positive feelings. Andrew’s gratitude sits alongside reflections on his mortality and eternity and in Helena’s case there is also the feeling of empowerment – spiritual capital in the objectified state. That this shapes the embodied state is clear from the sense of confidence that Andrew exhibited during the interview; his tone was calm and his speech articulate, despite speaking of his own mortality as someone with health problems, nearing the age of life expectancy for men in the UK, having already lived beyond the local life expectancy for men. Helena had described how her anxiety had improved since becoming part of the church community, and one of the ministers has noticed this progress since Helena started going to church.

However, spiritual capital was not present in the institutionalized state. There was a belief in a direct relationship with God that did not entirely depend on mediation (e.g., Andrew) through the institutional Church. The sphere in which spiritual capital is expressed here is – what I shall refer to as – the immanent state, to borrow the language of immanence, used by theologians to describe the presence of God/god(s). One shortcoming of Verter’s (2003) understanding of spiritual capital is that it is derived from Bourdieu’s writing on religion, influenced by his French context where Roman Catholicism has been the dominant tradition. The UK, however, has been predominantly Protestant for half a millennium. A key tenet of the Reformation was the rejection of the priest’s necessity for obtaining salvation as one has direct access to God. This helps explain the more individualized manifestation of spiritual capital here. This additional aspect of spiritual capital is well suited to other cultures where religiosity is less congregational and less institutionalized. It is also relevant to contemporary western culture where there has been a rise in eclectic forms of religiosity where individuals integrate components from different belief systems into their own worldview, independent of formal religious authorities (see Lyon, 2000). It thus serves to extend the existing conception of spiritual capital adopted here.

Discussion

The depth of this qualitative study enhances theoretical understanding of the wellbeing – religiosity relationship in socio-economically deprived communities. It shows that churches provide social resources that shape how individuals feel and think about their lives. It has also shown that these are accessed by a (primarily) bridging approach to resource sharing, which is consistent with the fact that those

of higher status are more likely than others to exclude those beyond their social group from resources (e.g., see Fry, 2019). This indicates that groups of lower social status may better resource others' pursuit of wellbeing for those beyond their immediate community than more privileged groups. Indeed, one did not need to have come from the local area nor have the same habitus as the congregation to be readily welcomed and provided with social and spiritual capital, as the interviews and participant observations showed. There are multiple factors shaping participants' openness to others, but the public nature of church activities and the social cohesion that accompanies belonging to a small, isolated community offer social resources that can positively shape SWB, especially when churches are involved in significant life events. The difference between Verter's observations and those in the present study may therefore be related to the social status of those with spiritual capital to share, with higher status groups predisposed (but not predetermined) toward bonding capital. This is a possible avenue for further inquiry via a comparison of different status religious groups.

Whilst much of the literature to date has indicated that social capital more often positively shapes SWB in affluent contexts, this study has shown that social capital positively shapes experiences of wellbeing in areas of socioeconomic deprivation. That is, the social status of a community does not dictate *whether* social capital can foster wellbeing, even if it influences *the extent* to which it fosters wellbeing. Hence, in practical terms, the UK's most deprived communities can still benefit from a social resource pool because they are consumed less exclusively (as with spiritual capital). Although this is not necessarily a surprising finding, it has practical implications for fostering higher levels of SWB in socio-economically deprived communities. The detailed, *in situ* description offers depth and texture unavailable via quantitative means. This provides a foundation for other research to explore how effective interventions can be made that are based on the needs and opportunities found within deprived communities.

Whilst social capital is a useful heuristic model for exploring the nature of social resources for wellbeing, the bonding/bridging divide is ambiguous. Although social groups do exclude others from their resources, the present study highlights that the utility of dividing approaches to social capital into discrete categories is context dependent. Again, the combination of strong social ties in the villages and the function of the local church within an established denomination, including the public nature of many of its activities (and possibly the lower status of the group), appear to be factors contributing to this ambiguity. The use of social capital for evaluating SWB in religious spheres thus needs to understand the limits of employing a heuristic model such as this. It is better to conceive of bonding/bridging approaches as on a continuum. Whilst this too may not be a surprising find, it sharpens the conception of social capital in a way that has been lacking explicitly in the literature. Again, the same is true of spiritual capital.

Furthermore, this study develops understanding of spiritual capital that can more readily be applied cross-culturally. It has also shown that spiritual capital is

the route by which resources for wellbeing that pertain to religiosity are transmitted (in the objectified state) and the context in which they are transmitted (in the institutionalized and immanent states). Hence, it teases out the distinct, constituent elements of spiritual capital and highlights how they operate differently. In addition to this, the present study shows that religiosity shapes habitus through the intersection between place (the historic church building), participating in religious services (cultural performance) and community belonging.

The study also shows that social capital is the route by which social (but not exclusively religious) resources for wellbeing are transmitted. Both forms of capital also provide resources for consumption, meaning that spiritual and social capital consist of the processes of transmission of symbolic and social commodities and the commodities themselves; in the context of SWB, they offer resources for wellbeing *and* the route by which they are accessed. This is because the availability of the resources are dependent on the agents providing them.

Moreover, Verter's three-tiered account of spiritual capital has enabled a detailed exploration of its role in individuals' experiences of wellbeing but its development here provides greater potential for its applicability to non-congregational forms of religion. Additionally, discussion of habitus has highlighted that indicators of wellbeing can be deduced from an individual's ingrained disposition, habits etc. Further studies could therefore explore habitus as a way into understanding individuals' SWB given that its expression is shaped by the resources that have been accumulated over time.

Furthermore, the distinction between private/individual and social forms of religiosity in quantitative studies on SWB are shown to be somewhat artificial. The second theme evidences that even apparently private acts of religiosity often require input from others. Public acts like Bible readings facilitated wellbeing at a private level as participants reflected individually and in silence. The boundary between these types of religiosity is therefore porous. The third theme shows that even during highly individualized, private religious activities (e.g., personal prayer), spiritual capital functions as it does in social contexts as there is a perception of a relationship with God with the corollary that wellbeing is fostered in ways similar to the second theme, where others' words are impactful. Whilst it is legitimate to isolate variables to explore in detail their relationship to other social phenomena, there is a risk of imposing labels on social phenomena that do not accurately correspond to their manifestation in people's daily lives. It is therefore necessary for studies on SWB and religiosity to pay more attention to the particular contexts in which different expressions of religiosity manifest and use this to inform the categories employed.

The importance of collaboration with religious leaders, often gate keepers within their communities, has been underscored, as has the importance of reflexive embodiment on the part of the researcher. This combination has led to the rich data and advancement of the literature. Future qualitative studies on religiosity and wellbeing should consider how

co-operating with religious leaders and addressing power dynamics can enhance the research process. They should also consider how those who do not participate in church communities, but have experience of church, have had their SWB shaped by that experience. This could shed further light on why some with church backgrounds elect not to remain involved in church life, despite the benefits to the wellbeing of those who do remain.

Conclusion

This article has qualitatively explored the presence of processes that enable resources for SWB in socio-economically deprived areas. It has argued that social capital and spiritual capital provide both commodities that foster wellbeing, and a network of transmission for their consumption; they thus contain and enable transmission of resources for SWB. These theoretical lenses have been employed critically in this study, refining how they may be conceptualized to more accurately reflect how they manifest *in situ* via engagement with different methods of data collection, enabling a more panoramic and detailed perspective. It has also argued that the culture of such communities facilitates an openness to others that enables resource sharing, thereby allowing transmission of capital that consists of resources for wellbeing.

Moreover, the nuanced way in which private/individual and social aspects of religiosity occur in day-to-day life has been shown, highlighting the need for future studies to conceptualize their relationship in a less binary fashion. Collectively, this demonstrates the need for qualitative enquiry into SWB given that it is effectively fostered via communal religiosity, particularly social networks. Hence, SWB is a thoroughly social phenomenon. Future research should also direct its attention toward a more detailed analysis of the specific resources that religion can offer for fostering SWB and of the components of SWB discussed. Finally, consideration should be given to the ways in which local churches can help foster SWB in areas of socio-economic deprivation given the current socio-economic milieu across Europe.

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ORCID

Alex D. J. Fry  <http://orcid.org/0000-0002-7731-7992>

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