

Religion shapes vaccine views—but how exactly? Analysis looks at ideas about God and beliefs about the Bible

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Many scientists and public health officials were surprised that large

swaths of the public were [hesitant or outright hostile](#) toward COVID-19 vaccines. "I never saw that coming," [Francis Collins](#), a former director of the National Institutes of Health, commented in 2022. Even today, three years after the start of the pandemic, [about 1 in 5 Americans](#) have not received a single dose of any COVID-19 vaccine.

What could be the reason for such widespread [vaccine](#) hesitancy? When it comes to skepticism toward vaccines, [religion is often cited](#) as an important factor. As [sociologists researching the role of religion](#) in vaccine attitudes and behaviors, we have found that [the religion-vaccine connection](#) is significant, but much more nuanced than simple stereotypes assume.

Both religious life and vaccine views are complex. A person's religion [cannot be boiled down to just one thing](#). It includes an identity, a place of worship and a variety of beliefs and practices. Each of these components can have its own distinct effect on vaccine attitudes and behaviors.

[Attitudes toward vaccines are complicated](#), as well. Someone's feelings about vaccines in general might differ from their feelings about one specific type of vaccine, for instance.

To help make sense of this complexity, [we surveyed a representative sample](#) of 2,000 U.S. adults in May 2021 about their religious identities, beliefs, behaviors and their attitudes toward [a number of scientific issues](#), including vaccines. This sample included individuals across many [religious traditions](#), as well as people who do not affiliate with any religion. However, Christians represented the bulk of the sample, given their larger share of the American population, and so our research focuses heavily on on their views.

Bible beliefs

One part of religious life that social scientists are often interested in is people's views of the Bible. For example, does someone think of the Bible as the literal word of God; inspired by God, but not literally true; or as an ancient book of legends, history and moral codes that has no divine source?

[We found that](#) respondents who see the Bible as either the "inspired" or "the actual word of God" were less likely to see vaccines in general—not the COVID-19 vaccine in particular—as safe and effective, compared with those who see the Bible as just a book of history and morality created by humans. All else being equal, those who said that the Bible is the literal word of God, for instance, scored 18% higher on our measure of general vaccine skepticism than those who see the Bible as having no divine source or inspiration.

Although such literalist views might be found at higher rates in particular religious traditions, [such as evangelical Protestantism](#), we found that an individual's religious tradition itself did not make much of a difference. An evangelical Protestant and a Catholic, for instance, would be predicted to have similar attitudes toward vaccines if they share the same view of the Bible.

In contrast, when we asked [similar questions specifically about COVID-19 vaccines](#), we found that an individual's religious tradition is what matters the most. Protestants—both those who identify as evangelical and those who do not—express more skepticism toward the COVID-19 vaccines than respondents from other religious traditions and nonreligious respondents.

God and country

In additional studies, we have attempted to identify the reasons for these

patterns. That is, why does one's view of the Bible or one's religious tradition matter when it comes to vaccine attitudes and behaviors?

One factor could be Christian nationalism, which has been increasingly visible in the public sphere [since Donald Trump's rise to the presidency](#). [Christian nationalism is described](#) by sociologists of religion [Andrew Whitehead](#) and [Samuel Perry](#) as an ideology that advocates for the fusion of Christianity with American politics and public life.

For example, Americans who hold a Christian nationalist ideology tend to agree when surveys ask them whether the [federal government](#) "should declare the United States a Christian nation." In our own survey, [we found that](#) individuals' responses to that statement are strongly correlated with their willingness to get the COVID-19 vaccine.

We asked for respondents' level of agreement or disagreement with that statement on a 5-point scale. A 1-point increase in agreement meant someone was 17% less likely to have received or plan to receive the COVID-19 vaccine. Although not exclusive to Protestants, adherence to Christian nationalist ideology [is more prominent among this group](#)—especially among its more conservative or evangelical traditions.

[Another of our studies](#) focused on how people view God. Our data showed that simply believing there is a God, or a higher power that supervises the world, does not make an individual less likely to have received the COVID-19 vaccine. On the other hand, believing that God can and will actively intervene in the world does make a difference. According to our analysis, with all else being equal, we would expect those with the lowest belief in an intervening higher power to be vaccinated, or intend to get vaccinated, 88% of the time. In contrast, we would expect those with the highest belief in an intervening [higher power](#) to be vaccinated, or intend to be, 73% of the time.

In addition, [our data shows](#) that belief in [parareligious phenomena](#)—including New Ageism, occultism, psychism and spiritualism—is also significantly associated with a reduced likelihood of receiving the COVID-19 vaccine. We used a 5-point parareligious belief scale, with a 1-point increase in an individual's belief in parareligious phenomena being associated with a 40% decrease in the likelihood of having received a COVID-19 vaccine.

Once we accounted for higher rates of conspiratorial belief and [distrust in science](#) among respondents who believe in parareligious phenomena, however, this vaccine gap was reduced. This suggests that those underlying factors help explain why more people who believe in parareligious phenomena are skeptical toward vaccines.

All of these studies demonstrate that the link between religion and vaccine attitudes is neither simple nor uniform. Public health campaigns that target faith communities would do well to keep this in mind.

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