Interdisciplinary Journal of Research on Religion

Volume 17 2021 Article 4

Confucian Values, Depression and Suicidal Ideation Among Rural Chinese

Jie Zhang*

Central University of Finance and Economics School of Sociology and Psychology, China
State University of New York College at Buffalo

Shuo Dong

Central University of Finance and Economics School of Economics, China

David Lester

Stockton University

Copyright © 2021 *Interdisciplinary Journal of Research on Religion*. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, without the prior written permission of the publisher. The *Interdisciplinary Journal of Research on Religion* is freely available on the World Wide Web at http://www.religjournal.com.

^{*} Correspondence should be directed to Professor Jie Zhang, Ph.D., Department of Sociology, State University of New York College at Buffalo, 1300 Elmwood Avenue, Buffalo, New York 14222, USA. Phone: 716-878-6425; FAX: 716-878-4009; Email: zhangj@buffalostate.edu.

Confucian Values, Depression, and Suicidal Ideation Among Rural Chinese[†]

Jie Zhang

Central University of Finance and Economics School of Sociology and Psychology, China
State University of New York College at Buffalo

Shuo Dong

Central University of Finance and Economics School of Economics, China

David Lester

Stockton University

Abstract

The relationship between religion and psychopathology is an understudied topic, especially in Chinese societies. Previous studies in the West have indicated that religious involvement is negatively related to depression and suicide, but Western religious beliefs are uncommon in China, and Confucian values guide behaviors, especially in rural areas. In this study we examined whether there is a connection between Confucian values and depression and suicidal ideation in China in 1,618 Chinese rural adults who were recruited for a face-to-face structured interview. An inventory to measure Confucian values (Filial Piety, Harmony, and Female Subordination) and the Center for Epidemiological Studies Depression Scale were employed. It was found that, among women, harmony and female subordination were related to depression and suicidal ideation. This correlation was not observed among men.

[†] The research was supported by the United States National Institute of Mental Health (NIMH): R01 MH68560.

The relationship between religion and psychopathology is an understudied topic (Schnittker, 2001), especially in Chinese societies. Durkheim proposed that religion and religiosity serve as a buffer for individual mental disorders as well as many other deviant behaviors (Durkheim, 1951 [1897]). Although Durkheim primarily considered this association at the societal level of analysis, later researchers have applied this association at the individual level of analysis (Longo and Kim-Spoon, 2013).

Previous studies indicated that religious involvement is negatively related to depression (Koenig, King and Carson, 2011). While most of these previous studies have focused on Western societies dominated by Christianity and Judaism, little attention has been given to non-Western, Asian societies (Elliott and Hayward, 2009; Koenig, King and Carson, 2011). Nevertheless, there has been a growing concern that the relationship between religion (or spiritual beliefs) and individual psychopathology may not always be negative, and the outcome may depend on the social and economic functions of religious institutions and the cultural and political circumstances in the society (Elliott and Hayward, 2009; Suhail and Chaudhry, 2004). Therefore, achieving a comprehensive understanding of the association between religion and mental illness requires extending the research beyond Western cultures (Liu, Koenig and Wei, 2011). A recent study (Liu, Schieman and Jang, 2011), for example, suggested that religion is related to negative mental health outcomes in certain Asian societies. In that study, religious-based supernatural beliefs (including belief in God[s], heaven and hell, reincarnation and the existence of souls) were found to be positively associated with more psychological distress in Taiwan's polytheistic society.

Religion, as an institutionalized belief in a supernatural being, is not yet popular in mainland China in comparison with many other societies in the world. The word "religion" is essentially a Western concept, and is only a recent concept in Chinasince 1890 (Yang, 2007). Although there has been an increase of the religious population in China in the past few decades (following economic reforms and the open-door policy in the 1980s) only a relatively small percentage of the population claim to be religious believers (less than 15%) (Yang, 2010). In such a context, believing in a religion is considered to be deviant compared to other nations.

China has been regarded as a non-religious country. The Chinese government advocates atheism. The only religious system that originated in China, namely Taoism (or Daoism), is rather a philosophical system which emphasizes living in harmony with the rhythms of the universe. However, Confucian teachings have been dominant for the past two thousand years and can be considered to be the major influence on people's values, beliefs, and behaviors. Indeed, scholars have debated whether Confucianism can be considered to be the dominant religion in China.

Confucian values influence Chinese social life in many areas including the family, society, and gender roles. Some major Confucian teachings are: (1) children must respect parents and abide by the orders of their parents (filial piety), (2) people should avoid conflict and seek peace (harmony) in society, (3) women should be subordinate to men. Thus, in both family and society, Confucianism imposes strict requirements and heavy burdens on women (Hsu, 1967; Yang, 1959). In the traditional Confucian family a young woman assumes an inferior status below that of men and senior family members. Her central responsibilities include (but are not limited to) accepting an arranged marriage, bearing a son to continue her husband's family's heritage, and serving her husband and the senior family members. Moreover, a woman is encouraged to cultivate virtue by not developing her talents and by not receiving more education. She is also denied opportunities for social participation outside the home.

According to Slote (1998), the Confucian value of female subordination, along with other Confucian values, is characterized by authoritarianism that creates intrapsychic conflict in young women. Thus, the Confucian value of female subordination can be seen as an ideological source of social coercion that ultimately causes mental disorders among Chinese women (Ikels, 2004; Miller, 2004; Slote, 1998; Yang, 1959). Contrary to the conventional wisdom that marriage is generally beneficial for psychological well-being, marriage in the Confucian family fails to function as a protective factor against suicide (Zhang, 2010), and the Confucian value of female subordination is positively associated with suicides (Zhang and Liu, 2012). Taking into account the fact that major depression is one of the most prevalent mental disorders in China (Lee et al., 2009), it can be assumed that Confucian values, such as filial piety, harmony, and female subordination, may play a positive role in psychopathology, including depression, in Chinese populations.

Depression, anxiety, and suicidal ideation are symptoms commonly measured for psychopathologies in general populations (Kessler et al., 2006). The aim of the present study was, therefore, to explore whether the Confucian values of harmony, filial piety, and female subordination are associated with depression and suicidal ideation in Chinese rural individuals.

METHOD

Participants

The data for the study were obtained from a large project investigating suicide risk factors in the population of rural China. Three provinces in China were chosen for the study: Liaoning, an industrial province located in Northeast China, Hunan, an agricultural province in Central South China, and Shandong, a province with economic prosperity in both industry and agriculture located on the east coast of

China mid-way between Liaoning and Hunan. Sixteen rural counties were randomly selected from the three provinces (6 from Liaoning, 5 from Hunan, and 5 from Shandong).

A total of 1,618 subjects were recruited from the 16 counties and three provinces, about half of them being the informants for suicide cases and the other half being the informants for the community controls in the psychological autopsy (PA) study. The informants were asked a set of questions about themselves. The following three guidelines were used to recruit informants for each group (suicide and control).

First, suicide informants were recommended by the village head and the village doctor and then selected by the research team based on familiarity with the subject's life and circumstances and on their availability for and willingness to consent to inperson interviews. The control group informants were recommended by the controls themselves and then selected by the research team with similar criteria.

Second, for both suicides and controls groups, the first informant was always a parent, spouse or another important family member, and the second informant was always a friend, co-worker or neighbor.

Third, wherever possible, we avoided recruiting husbands and in-laws of those female suicides associated with family disputes. Interviewing these people could result in very biased reports if marital infidelity and family oppression were possible causes of the suicide. Similarly, in selecting the male suicide informants and the control informants we tried to avoid this type of biased informant when family disputes were noted beforehand.

As for interviewing procedures, informants were first approached by the local health agency or the village administration using a personal visit. Upon their agreement by written informed consent, the interview was scheduled between two and six months after the subject's suicide incident. Interviews with informants regarding living control subjects were scheduled as soon as the control targets and their informants were identified. Each informant was interviewed separately by one trained interviewer, in a private place in a hospital, clinic, or in the informant's home. The average time for each interview was 2.5 hours. [Further details of the study on suicide can be found in (Zhang et al. (2010)].

Two samples were involved in the current study: (1) 786 informants who had some close relationship with a suicide victim, and (2) 832 community living control informants who had no relationship with any of the suicides under study. The response rates were excellent in both samples. All of the informants for the suicides participated. For the community living control sample, only two out of the 832 selected individuals declined. Both samples covered respondents with a wide range of ages.

MEASURES

Confucian Values

Measures of Confucian values were first described by Zhang and Liu (2012). Two scales were devised for the present study (see Appendix 1). The first, with ten items, assesses acceptance of the role of men in the society. The second, with fourteen items, assesses acceptance of the role of women in the society.

Confucian harmony consists of three items: (1) the individual being harmonious with family and friends; (2) self-discipline; and (3) endurance. Subjects were asked to indicate how strongly they agreed or disagreed with these statements. The three items tapping harmony were summed so that higher scores indicate the target person's stronger agreement with the Confucian value of harmony. Cronbach alpha for the present sample was 0.53.

Four items were designed to tap filial piety. Subjects were asked to indicate how strongly they agreed or disagreed with the following statements: (1) filial piety to parents; (2) closeness to parents; (3) body and hairs are given by parents, and no hurt should be brought to them; and (4) do not die earlier than parents. We summed all of the four items so that higher scores indicate the target person's stronger agreement with the statements. Cronbach alpha for the present sample was 0.55.

The scale for female subordination included eight items: women should (1) "stay at home," (2) "care for her husband and kids," (3) "bear a son," (4) "keep marriage without divorce," (5) "follow Three Obediences," (6) "participate in no social activities," (7) "work at home only," and (8) "assume a less important role than a man in the family." We summed all of the eight items so that higher scores indicate the target person's stronger agreement with the statements. Cronbach alpha for the present sample was 0.79.

The CES-D Scale

The full version of the Center for Epidemiological Studies Depression Scale (CES-D) (Radloff, 1977) was employed. Subjects were asked to indicate the frequency of the symptoms using a 4-point scale: 0=less than a day, 1=1-2 days, 2=3-4 days, and 3=5-7 days against a time frame of the past week. The total score consists of the sum of all 20 items and ranges from 0 to 60, after recording the negatively phrased items (items 4, 8, 12 and 16). A Chinese version was obtained by translation and back translation to minimize discrepancies between the English and Chinese measurements. Bilingual members of the research team met frequently for any disputed items in the translation until consensus was reached. Reliability and validity tests were performed on the Chinese version with good scores. This is

an established instrument to measure depressive mood among general populations in China (Zhang, Kong and Zhou, 2009).

Suicidal Behavior

Suicidality was measured by the NCS scale for suicidal behaviors (Kessler et al., 2005). The subjects were asked whether they had thought about dying by suicide in their lifetime and in the past year, and whether they had attempted suicide in their lifetime and in the past year. Too few participants had attempted suicide in the past year (0.2%) or lifetime (1.2%) for meaningful statistical analysis, and so the analysis was restricted to suicidal ideation.

Interviewers

Interviewers were trained professionals who were either faculty members or graduate students. Before data collection began, each received systematic and intensive training in interviewing people with all of the psychological measures.

Statistical Analyses

Cronbach alphas, Pearson correlations, t-tests and multiple regressions were used to analyze the data, using SPSS version 26.

RESULTS

Descriptive data on the scales are shown in Table 1. The Cronbach alpha reliabilities were moderate, but in line with the number of items in each scale. The scale for female subordination had eight items and the highest internal reliability. The men and women in the sample were compared for their scores on the four scales, and there were no significant differences. Correlations between the scale scores were calculated for men and women separately (see Table 2).

Table 1: Descriptive statistics

	Mean	SD	Cronbach alpha
CES depression	16.54	7.74	0.78
Confucian values			
Harmony	12.39	1.66	0.53
Piety	14.56	2.65	0.55
Female subordination	19.66	5.22	0.79
Age	40.04	13.85	

Table 2: Gender differences in scores

Table 2a

	Females	Males	t (df=1616)
CES depression	16.94 (7.83)	16.23 (7/65)	1.57
Confucian values			
Harmony	12.32 (1.65)	12.45 (1.67)	1.65
Piety	14.65 (2.58)	14.47 (2.71)	1.33
Female subordination	19.67 (5.33)	19.65 (5.11)	0.06
Age	39.36 (13.57)	40.75 (14.12)	2.02*

Table 2b

		Females	Males	Chi-square (df=1)
Suicio	dal ideation			
	Lifetime	15.8%	8.8%	18.18***
	Past year	8.8%	5.6%	6.11*
*** p<.001	** p<.01	* p<.05		

The correlations between CES depression scores and the three Confucian values are shown in Table 3 for men and women individually. In Table 4, the Confucian value scores are entered into linear multiple regressions to predict CES depression scores. Then, Confucian value scores and CES depression scores are entered into binary logistic regressions to predict past year and lifetime suicidal ideation.

Table 3: Correlates of suicidal behavior

	Suicidal ideation		
	Lifetime	Past year	
Females			
CES depression	+0.342***	+0.379***	
Confucian values			
Harmony	-0.048	-0.042	
Piety	+0.054	+0.076*	
Female subordination	+0.129***	+0.177***	
Males			
CES depression	+0.342***	+0.320***	
Confucian values			
Harmony	+0.019	+0.016	
Piety	-0.011	-0.015	
Female subordination	+0.020	+0.029	

Table 4: Predicting depression and suicidal ideation

Table 4a

	Females	Males
CES depression (betas shown)		
Harmony	0.007	0.009
Piety	0.108**	0.040
Female subordination	0.208***	0.078*
R^2	0.065	0.009

Table 4b

	Females		Males	
	В	SE	B	SE
Ideation prior year				
CES depression	+0.116***	0.015	+0.114***	0.016
Harmony	-0.198*	0.095	+0.037	0.104
Piety	+0.059	0.067	-0.042	0.020
Female subordination	+0.055*	0.026	-0.004	0.032
Constant	-4.325***	1.144	-4.881***	1.413
Nagelkerke R ²	0.250		0.192	
Lifetime ideation				
CES depression	+0.096***	0.012	+0.109***	0.014
Harmony	-0.150*	0.071	+0.038	0.086
Piety	+0.034	0.049	-0.036	0.066
Female subordination	+0.027	0.020	-0.009	0.027
Constant	-2.710***	0.027	-4.203***	1.164
Nagelkerke R ²	0.174		0. 184	

It can be seen that Confucian values played a stronger role in predicting depression and suicidal ideation for women than for men. For the prediction of past year suicidal ideation, the Confucian value of female subordination played a significant role in the prediction only for women.

Adding the age of the participants to the regressions indicated that age played a role in the predictions (with increasing age associated with higher depression scores and a higher probability of suicidal ideation) but did not change the role of the Confucian values.

DISCUSSION

Confucianism has been a cultural mainstay for Chinese societies. Confucian values have a great impact on Chinese people especially those in rural China and so may play an important role in their mental health. Previous research has consistently shown that the major religions (Christianity and Judaism) are generally a protective factor for depression and suicidal behavior in the West. Christianity plays a minor role in the lives of people in China which may be considered to be an atheistic society. Instead, especially in rural China, Confucianism plays a major role in shaping people's values and behavior.

The present study explored whether the Confucian values of harmony, filial piety, and female subordination are associated with depression and suicidal ideation in Chinese rural individuals. For Chinese rural men, these Confucian values were not associated with depression scores. In contrast, for Chinese rural women both adherence to piety and female subordination were associated with higher depression scores.

As might be expected, depression scores were associated with recent (past year) and lifetime suicidal ideation for both men and women. Confucian values were not associated with *lifetime* suicidal ideation for women or men. However, recent (past year) suicidal ideation for women was associated with their scores for female subordination. The stronger the women agreed with this value, the more likely they were to have experienced suicidal ideation in the past year. Interestingly, their support for the Confucian value of harmony was associated with a lesser likelihood of suicidal ideation in the past year.

One reason why Confucianism is less likely related to Chinese people's mental health, especially for Chinese women, may be that it creates psychological strains in a modern society. The Confucian value of female subordination limits the possibilities of Chinese rural young women to achieve their aspirations and may create psychological strains that result in depression and suicidal ideation (Zhang, 2010). The results of the present study may contribute to an explanation of why suicide rates were higher for Chinese women than for Chinese men in the 1990s (Zhang et al., 2010), and why the overall suicide rates dropped rapidly with even more decrease for Chinese women (Zhang, 2019). At that time, China was the only major country where the suicide rate of women exceeded that of men. He and Lester (1997) noted that family conflict was a frequent precipitating factor for suicide in young Chinese women, including conflict with their parents, husband and in-laws. In recent years, perhaps as a result of the increasing urbanization of China and migration to the major cities, the suicide rate of men began to exceed the suicide rate of women (Sun and Zhang, 2015), although to a lesser extent in rural China.

A limitation of the present study is that other risk factors for suicidality, such as loneliness, pain, and lack of social support, were not included. Future research

should also explore the generality of the present results in urban populations and in elderly populations.

REFERENCES

- Durkheim, Émile. 1951 [1897]. *Suicide: A Study in Sociology*. New York: The Free Press (Original work published in 1897).
- Elliott, Marta, and R. David Hayward. 2009. "Religion and Life Satisfaction Worldwide: The Role of Government Regulation." *Sociology of Religion* 70(3):285-310.
- He, Zhao Xiong, and David Lester. 1997. "The Gender Difference in Chinese Suicide Rates." Archives of Suicide Research 3:81-89.
- Hsu, Francis L. K. . 1967. *Under the Ancestors' Shadow: Kinship, Personality and Social Mobility in Village China*. New York: Doubleday.
- Ikels, Charlotte. 2004. "Introduction." Pp. 1-15 in *Filial Piety: Practice and Discourse in Contemporary East Asia*, edited by Charlotte Ikels. Stanford, California: Stanford University Press.
- Kessler, Ronald C, Patricia Berglund, Guilherme Borges, Matthew Nock, and Philip S Wang. 2005. "Trends in suicide ideation, plans, gestures, and attempts in the United States, 1990-1992 to 2001-2003." *Journal of the American Medical Association* 293(20):2487-95.
- Kessler, Ronald C, Sandro Galea, Russell T Jones, and Holly A Parker. 2006. "Mental illness and suicidality after Hurricane Katrina." *Bulletin of World Health Organization* 84(12):930-39.
- Koenig, Harold G, DE King, and VB Carson. 2011. *Handbook of Religion and Health,* 2nd ed. . New York: Oxford University Press.
- Lee, S., A. Tsang, Y.-Q. Huang, Y.-L. He, Z. R. Liu, M.-Y. Zhang, Y.-C. Shen, and R. C. Kessler. 2009. "The epidemiology of depression in metropolitan China." *Psychological Medicine* 39(05):735-47.
- Liu, Eric, Scott Schieman, and Sung Jang. 2011. "Religiousness, Spirituality, and Psychological Distress in Taiwan." *Review of Religious Research: The Official Journal of the Religious Research Association* 53(2):137-59.
- Liu, Eric Y., Harold G. Koenig, and Dedong Wei. 2011. "Discovering a Blissful Island: Religious Involvement and Happiness in Taiwan." *Sociology of Religion* 73:46-68.
- Longo, Gregory S., and Jungmeen Kim-Spoon. 2013. "Homesickness in college students: the role of religion in combating depression." *Mental Health, Religion & Culture* 16(5):489-500.
- Miller, Eric T. 2004. "Filial Daughters, Filial Sons: Comparisons from Rural North China." Pp. 34-52 in *Filial Piety: Practice and Discourse in Contemporary East Asia*, edited by Charlotte Ikels. Stanford, California: Stanford University Press.
- Radloff, L.S. 1977. "The CES-D Scale: A self-report depression scale for research in the general population." *Applied Psychological Measurement* 1(3):385-401.
- Schnittker, Jason. 2001. "When is Faith Enough? The Effects of Religious Involvement on Depression." *Journal for the Scientific Study of Religion* 40(3):393-411.

- Slote, Walter H. 1998. "Psychocultural Dynamics within the Confucian Family." Pp. 37-51 in *Confucianism and the Family*, edited by Walter H Slote and George A De Vos. Albany, New York: State University of New York Press.
- Suhail, Kausar, and Haroon Rashid Chaudhry. 2004. "Predictors of Subjective Well-Being in an Eastern Muslim Culture." *Journal of Social and Clinical Psychology* 23(3):359-76.
- Sun, Long, and Jie Zhang. 2015. "Potential years of life lost due to suicide in China, 2006–2010." *Public Health* 129(5):555-60.
- Yang, Ching Kun. 1959. *Chinese Communist Society: The Family and the Village*. Boston, MA: The M.I.T. Press.
- Yang, Fenggang. 2010. "Glance at China's Religious Situation: A Preliminary Report of Questionnaire Survey." *Center on Religion and Chinese Society* 3:1-8.
- Yang, Qingkun. 2007. Religion in Chinese Society: A Study of Contemporary Social Functions of Religion and Some of Their Historical Factors. Shanghai, China: Shanghai People's Publishing House.
- Zhang, J., W. Wieczorek, Y. Conwell, X. M. Tu, B. Y. W. Wu, S. Xiao, and Jia C. 2010. "Characteristics of young rural Chinese suicides: a psychological autopsy study." *Psychological Medicine* 40(4).
- Zhang, Jie. 2010. "Marriage and Suicide among Chinese Rural Young Women." *Social Forces* 89(1):311-26.
- —. 2019. "Suicide Reduction in China." *American Journal of Public Health* 109(11):1533-34.
- Zhang, Jie, Yuan Yuan Kong, and Li Zhou. 2009. "Reliability and Validity of the Center for Epidemiologic Studies Depression Scale in Rural Populations." *Chinese Journal of Behavioral Medicine and Brain Science* [中华行为医学与脑科学杂志] 18(4):372-74.
- Zhang, Jie, and Eric Yang Liu. 2012. "Confucianism and Youth Suicide in Rural China." *Review of Religious Research: The Official Journal of the Religious Research Association* 54(1):93-111.

Appendix 1

Confucian values

- 1. How important does s/he think *Xiaoshun* (filial piety to his parents) is in her/his life?
- 2. How important does s/he think *Keji Fuli* (restraining oneself in order to make doing things according to a certain etiquette) is in her/his life?
- 3. How important does s/he think *Xiao Buren Ze Luan Damou* (if one can't bear small things, he won't make the large things better) is in her/his life?
- 4. How important does s/he think *Fumu Zai Bu Yuanyou* (staying at home while parents are still alive) is in her/his life?
- 5. How important does s/he think *Bu Xiao You San, Wu Hou Wei Da* (without a son is a No.1 of three unfilialnesses to his parents) is in her/his life?
- 6. How important does s/he think *Shenti Fafu, Shou Zhi Fumu* (Body and hairs are given by parents and shouldn't be hurt by herself/himself) is in her/his life?
- 7. How important does s/he think *Baifa Bu Song Heifa* (White hairs do not attend the funeral of black hairs: A man cannot die before his parents) is in her/his life?
- 8. How important does s/he think *Jiating Hemu*, *Linli Xiang Rang* (harmony in the family and among neighbors) is in her/his life?
- 9. How important does s/he think that in the society and family, men have more responsibilities than women?
- 10. How important does s/he think *Mian Zi* (face is more important than life) in her/his life?

Female role

- 1. How important does s/he think "women staying and working at home" is in her/his life?
- 2. How important does s/he think "caring for her husband" is in her/his life?
- 3. How important does s/he think "bearing a son" is in her/his life?
- 4. How important does s/he think "staying widowed" is in her/his life?
- 5. How important does s/he think "women should keep marriage without divorce in any condition" is in her/his life?
- 6. How important does s/he think "polygamy (polyandry)" is in her/his life?
- 7. How important does s/he think "arranged marriage" is in her/his life?
- 8. How important does s/he think *San Cong Si De* (three obedience of women) is in her/his life?
- 9. How important does s/he think *Nvzi Wu Cai Bian Shi De* (no education for women) is in her/his life?
- 10. How important does s/he think "women should have no social life" is in her/his life?

- 11. How important does s/he think *Nv Zhu Nei Nan Zhu Wai* (Women at home and men outside) is in her/his life?
- 12. How important does s/he think "a woman should not exceed her husband in education" is in her/his life?
- 13. How important does s/he think generally *Nan Zun Nv Bei* (a man is more important than a woman) is in her/his life?
- 14. How important does s/he think that a woman should be widowhood when her husband is dead?