

## Psychometric profiles in Italian Hare Krishna Movement. Affiliation and membership.

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*The authors have tested 70 Italian Hare Krishna in the temples of Florence and of Albetone (Vicenza) on the MMPI and on the Autoevaluation Questionnaire on Hare Krishna Movement Belonging. According with the findings described by Ross [1], our study does not reveal evidence of any important mental disorder, although members of the long-term group (after 3 years) in the movement, particularly men, have shown lower mean scores at Pd (psychopathic deviate) scale than members of the short-term one (less than 3 years). Moreover, examining individually the profiles, it seems that a lasting stay in the group affects as a protective factor, some psychological aspects, even if alternative explanations are discussed. However this protective factor has a poor significance on personalities which present more serious indications of psychopathology.*

*Key words:* Hare Krishna, psychopathology

### Introduction

It is a very dramatic event, for parents, to see their son, after membership, dressed in traditional (for Hindu) robes called *dhotis* (really very strange for us) and eating Krishna *prasadam* (spiritual vegetarian food). The perception of family about a sudden change may support the brainwashing interpretation and the cult litigation.

For Balch [2] there is a deceit by appearance. Family infers total commitment from behaviour of new converts, but probably these young Krishna devotees are still with an effort to convert themselves.

As at the beginning of Hare Krishna Movement (HKM) many devotees were drug-addicted youths, coming from counterculture ambients, there is the popular view that many Hare Krishna are alienated youth and mentally disordered.

For this reason a particular interest of psychiatrists and psychologists has met HKM.

### *Historical background of the Hare Krishna Movement*

The roots of HKM are tied to Hindu faith, with the Chaitanya reform. Chaitanya, deified by the devotees as an incarnation of Krishna himself, lived in the sixteenth

century. He preached a religious reform according to that Krishna, one of the main incarnations (*avatar*) of Vishnu (divinity that with Brahma and Shiva constitutes the Hindu triad), is the deity of spell and beauty, that charms and seduces to carry the souls to his kingdom of happiness, but only “free-souls” can hear him. To be “free” the devotees must be pure, to avoid any kind of drugs, smoking and excitants. They must eat vegetarian foods and control their sexuality, not game of chance, and sing and chant the *mantra* Hare Krishna, Hare Krishna, Krishna-Krishna... with the holy names of god not only before the *murti* (images of god), but also in the streets, loving him unconditionally, to understand the real meaning of life.

In 1966 Bhaktivedanta Swami (often referred to as “Prabhupada” by HK), a guru of Brahmin caste, founded in New York the International Society for Krishna Consciousness (ISKCON). In Italy the Hare Krishna are present from 1973, when an Italian girl, joined in the HKM in the year before in France, and other two devotees, were charged with opening the first temple in Rome [3].

Actually the Community of Villa Vrindavana, near Florence, has a population of 70 members but about 250 devotees refer to it.

### *Characteristics of HKM members*

In cult litigation, the dispute between the families and the adepts and the controversial cults, some authors (sometimes they have lumped generically non traditional or non-western religions) argued that a form of manipulation (brainwashing or thought reform) was employed and that a high percentage of psychopathy was among the followers [4,5].

Judah [6], inquiring into Berkeley’s and San Francisco’s communities and studying particularly counter-cultural and anti establishment aspects, found that the subjects, searching new meanings in life, wanted to satisfy above all three wishes: community, engagement and dependence. 85% of Hare Krishna young devotees (on the average 25 years old), had tried drugs, had detached from their families and refused current social values.

These findings were confirmed by Daner [7], who observed in Boston, New York, London and Amsterdam Temples, and found alienation from the surrounding society. She read ISKCON as a total institution in Erving Goffman’s [8] sense.

Ross in a first study (1983) tested the entire population (42 members) of the Hare Krishna Temple in Melbourne on the Minnesota Multiphasic Personality Inventory (MMPI), the General Health Questionnaire, and the Eysenk Personality Questionnaire psychometric indices. He did not note differences in mental health of the devotees in comparison to general population. These findings have been confirmed by studies of Italian authors [9,10]. The first Italian psychometric study, by Di Fiorino (1991), regarded a 32 members group of San Casciano Val Di Pesa community. They were tested on the MMPI and on the Italian version of *An Inventory for Assessing Different Kinds of Hostility* by Buss and Durkee (1957) for the study of aggressiveness: the findings were not different from those obtained testing the general population. In 1996 Fizzotti et Al. tested 70 members of the same community on the MMPI and the

*Purpose in Life Test* (PIL test) by Crumbaugh and Maholick (1964). Although from the PIL test scores came out maturity for existential orientation, the MMPI mean scores were in the normal range.

In a second study Ross [11], retesting on MMPI the same sample of the first study, noted a marked improvement in mental health of those subjects.

Poling and Kenney [12] examined social and personality characteristics of the future followers of the Movement, and specified eight predisposition factors: a middle class family, an early conflict with the family, the tendency to consider himself a “world redeemer”, the refusal of the authority and of parental values, the use of drugs, the tendency to consider the material world without meaning, the vegetarianism, the re-search of a new identity in Eastern religions.

Weiss in 1987 tested 226 devotees with the *Mental Health Inventory* (MHI): he found that the women didn't differ from general population, but the men had higher scores on the scales “psychological well-being” and “positive feelings”. Men, however, referred anxiety and depression in a percentage similar to the standard sample, even if they told to be happier.

Weiss and Comrey [13,14], in the same year, involving a group of devotees and sympathisers, analysed personality factors among Hare Krishna by the *Comrey Personality Scales* (CPS): the variance of the scores for the factor “social time-serving” versus “rebellion” was considerably reduced in comparison with other groups. This observation outlined that Hare Krishna group is more homogeneous than other groups for this character.

Later, in a complicated study on the effects of acculturation on mental health, Weiss and Mendoza [15] by an autoevaluation scale of 53 items that estimates the level of immersion in the religion (nutritional and sexual habits, involvement in the prayer, son's names, drugs used, style of dressing, music and readings) and by tests as the Mental Health Inventory and the Comrey Personality Scales, didn't find a correlation between the level of acculturation and personality disorders. However, women showed differences in comparison with the average of American women in compulsivity and trust, while men showed a significant increase in the psychological well-being score, correlated with a higher acculturation.

### Material and methods

To repeat the study of Ross, we have extended our investigation including, in addition to the Temple of Villa Vrindavana (Florence), the community of Albettono (Vicenza). This community has been established more recently and shelter devotees who are in the HKM for a comparatively short time. In this study we examined 70 Italian subjects (42 M, 28 F) members of the HKM, tested on the Italian version<sup>1</sup> of MMPI (357 items in the reduced form) adapted by Nencini and Banissoni, and on the Autoevaluation Questionnaire on Hare Krishna Movement Belonging. This is a 15

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<sup>1</sup> We have accepted the standard range of 30-70 scores recognized of “normality” for general population. Standard data of basic scales are those of the Italian adjustment [16].

item questionnaire that examines register data, education level, occupation and characteristics of belonging to the religious group (since the subject knows the movement of which he is a member, how he has known it, the time between the knowledge of the faith and the adoption of life style suggested, the time of belonging to the movement, the stay in a movement community, the family attitude when the family has known that the subject has become a follower of HKM, if the family has considered this conversion a form of “brainwashing”, if it has suggested “deprogramming practices” and which is the family’s attitude at the time of the interview, the religiousness of the member before he entered the cult and his satisfaction in life). With regard to MMPI, we considered all valid profiles (validity indicators: L, F, and K scales).

The present sample included the members who completed in random order the MMPI and the Autoevaluation Questionnaire on HKM Belonging.

### Results

The Autoevaluation Questionnaire on Hare Krishna Movement Belonging.

The mean age is 34.19 years (SD +/- 10.8), higher than in other studies [6, 17]. Subdividing the general sample into 5 age groups, from 16 to 61 years, resulted in subjects being mostly included in the age range between 22 and 41 years (47 subjects).

Other examined data, such as education level and marital status show a group with a good level of education (high school and over), according with the studies of Levine and Salter, and “single” in a percentage not much prevailing (35 single, 29 married, 2 separated, 1 divorced).

With regard to occupation we obtained a prevalence of subjects that are occupied (31) and professional men (11), in addition to a large group completely dedicated to religion (18 ministers of cult).

The sample was split by the time in which the subjects have been in the movement (more or less than 3 years).

The motivation of the choice of a time period of 3 years as the cut-off point is that in our sample only such subdivision has resulted convenient to find two groups statistically comparable.

We have investigated, like other authors [1], if there are significant differences between the followers at 3 years of membership, the percentage of mental disorders

Table 1

Age, sex and membership at 3 years

< 3years: No 24	Mean age Tot: 31.71 (SD: 9.21)	M 7	Mean age 33.19	F 17	Mean age 27.6
> 3years: No 44	Mean age tot: 33.14 (SD: 11.23)	M 24	Mean age 36.23	F 20	Mean age 32.35

among the devotees and how acculturation and stay in the movement influence followers mental health.

Our sample, like that described by Ross [1], includes a predominance of men (42 men and 28 women), while in other studies [6] women are prevalent.

Mean age is higher for men, even if in the long-term group the mean age is higher for both sexes in comparison with the short term one.

The sample is homogeneous with regard to some variables that value the perception of being a member of the group, the family attitude, the level of personal satisfaction and the religiousness before joining to the movement.

About 78.5% of the subjects say to know the movement since over 3 years thanks to a member of the family or a friend (57.1%). It is interesting to note that 41.4% say to have been contacted in the street or to have heard of the Hare Krishna faith on the radio or to have read of that in the papers, emphasising the importance of propaganda.

As resulted in the study of Fizzotti et al. [10] also in our sample the time between the first approach and the adhesion to the movement only in 40.5% of the cases has been over 3 years, showing so a longer deliberation in comparison with about 53% that have waited only some months or weeks.

With regard to family attitude towards the decision of the subject to become a follower of Hare Krishna Movement, the sample appears equally subdivided: in 51% has prevailed a hostile or detached attitude, but in 49% of cases the relatives have shown respect or even sympathy and sharing. Also about the family opinion of a “manipulation” of the subject by the group, we have obtained an almost fair subdivision: in 41.3% the family had thought possible the “brain-washing”. As supposed in the mentioned study of Fizzotti, probably also in this case it is possible that negative reactions from the family would be connected generally to the fear of a manipulation by the Movement. However, almost in all the cases (86%) the family has not interfered and has abstained from talking about deprogramming practices (only in 11% the answers have been affirmative).

Later family attitude has improved in 70% of cases, has remained unchanged in 26%, but never has got worse.

As regard to the religiousness of the members before they entered the cult, about 73% of the interviewed subjects were searching a faith or didn't have religious value systems, and 10% have said to be atheist or agnostic. Similarly 71% declared to have been not satisfied in life before conversion.

These data result from the comparison between the mean values (standard corrected T scores) obtained in MMPI scale for men and women, taking into account the time of belonging to the Movement.

Furthermore we have examined the attempt to “look good” by the mean F-K ratios<sup>2</sup> obtained from row scores.

Our results don't indicate attempts of simulation because F-K ratios are low.

It is possible to note in our sample how in short-term group men show Pd (psychopathic deviate) and M/F (a measurement of masculinity/femininity in the ambit of interests) scores significantly higher than in women. In long-term group there are

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<sup>2</sup>F-K ratio is a Dissimulation Index [18]. For this Author when F is very high and at the same time K is very low, there is an evidence of a tendency to amplify symptoms and to invalidate the test.

significant results for the F scale (a high score indicates unconventionality and not conformity, and when it exceeds the 70th percentile suggests emotional disorders, that can influence behaviour; this is not a scale of personality) that are however within the normal range. Contrary, if we consider the comparison between members of the same sex belonging to short-term and to long-term group, only Hs scales (hypochondria)

Table 2

MMPI scores of 70 Italian Hare Krishna

MMPI Scale	MEN N= 16		WOMEN N= 8		MEN N= 26		WOMEN N= 20	
	Mean	SD	Mean	SD	Mean	SD	Mean	SD
L	55.42	12.21	48.56	11.64	49.73	9.57	56.28	16.52
F	53.81	11.21	51.46	10.39	57.34	13.76	47.56	9.03
K	57.33	10.97	51.13	7.63	54.10	10.33	56.90	10.62
HS	62.24+	7.33	57.06	4.14	56.52	8.39	57.84	10.39
D	58.01	7.49	59.85	9.79	57.03	9.86	53.57	14.18
H <sub>1</sub>	63.31	5.98	60.05	4.63	59.78	10.28	60.92	11.48
H <sub>2</sub>	66.34	13.46	53.42	8.88 **	59.20	13.06	56.00	14.62
MA	63.89	7.58	48.69	23.13 *	54.56	22.75	45.50	13.93
Pa	53.09	5.83	49.92	4.97	48.31	8.37	48.45	8.16
Pt	57.75	6.97	52.11	6.11	52.40	11.17	51.68	11.62
Sc	60.83	9.51	54.59	10.72	57.51	11.51	50.96	11.45
Ma	55.48	11.05	51.79	7.57	51.74	12.52	47.62	9.91
S <sub>1</sub>	51.51	7.46	52.49	9.93	53.71	9.07	51.12	12.33

Length of time as members

Less than 3 years N = 24

Longer than 3 years N = 46

\* t=2.07 p<0.05 \*\* t=2.33 p<0.05

◦ t=2.7 p<0.05 + t=2.15 p<0.05

	Men <3years	Women <3 years	Men >3years	Women >3 years
F/K ratio	6.47	+5	3.85	8.75

show significant differences: hypochondriacs are more frequent in the short-term group for men, while there aren't statistically significant differences for women.

Furthermore we have examined the 70 MMPI profiles individually to realise better if there are indications of psychopathology inside the Movement. So we have verified that in men belonging to the short-term group there are two profiles probably denoting personality disorder and in one profile there is an evidence of a serious psychopathology (psychosis?). In women of the short-term group we have noted only a profile

that indicates non-psychotic depression. Contrary, in men of the long-term group five subjects presented a Pd scale score that exceeded 71 T.

Three women of the long-term group presented a high Pd scale score, while one woman shows serious depression.

### Discussion

With the limits of a research under conditions where the cult leadership can influence the choice of subjects [19], we discuss our conclusions. Hare Krishna are very distant from the old stereotype of strange and mentally ill.

Our sample includes a predominance of men, mean age is about 34 years, and the socio-cultural level of the group is middle-high.

Three conclusions can be drawn from this study on the basis of the data presented:

- a) About 73% of the interviewed subjects were searching for meaning before “conversion”.
- b) 71% declared to have been not satisfied in life before “conversion”.
- c) 70% of the devotees feel that family attitude toward membership improves with the time.

It is interesting to observe that during the period immediately preceding conversion, ISKCON devotees were found in a state of “identity crisis” [20] and that reported extremely problematic relationship with their parents, particularly with the father [21].

It may be that these observations denote a “protective” value of the group. The means of the profiles on the MMPI showed that the subjects have a general good level of psychosocial integration.

Particularly in men it seems that a lasting stay in the group affects much more as a protective factor on some psychological aspects, in fact we have found more frequently hypochondriacs attitude (Hs), psychopathic deviate (Pd) in the subjects of short term group. However, if we examine the MMPI profiles individually, this protective factor has a poor significance on personalities, which present more serious indications of psychopathology. A psychiatrist who did not participate in this study, examining individually the profiles, found four cases of more serious psychopathology.<sup>3</sup>

According to the concept of Galanter [22] of the “relief effect”, the adherence to the ideological framework enhances psychological wellbeing. Yet, our sample is within the normal range of psychological adjustment also before the membership. So it would

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<sup>3</sup> The first man of the short-term group presents (T scores) F scale 81 and Sc (schizoidism) 84, showing serious emotional disorders, strange attitude and thoughts, with poor judgment ability; the second man with scores F 79, Pd 103, Sc 83, a profile that indicates bizarreness, impulsiveness, irritability, on the whole a borderline syndrome that can become a psychosis; the third man with scores D (depression) 78 and Pt (psychasthenia) 72, those indicate depression, vulnerability to real or imaginary threats, broodings, anancasm; finally a woman with scores Hs (hypochondria) 81, D 100, Hy (hysteria) 82, Pt 75 and Sc 73, showing a serious depression.

be possible to conclude that more frequently, cultural aspects and mechanisms of the group exercise a protective outcome that, however, doesn't influence subjects who present more serious psychological disorders.

However, we have to consider two real possibilities about the relationship between mental health and belonging to the movement: in fact it may be that: a) the mental health of recent members was more disturbed at the time they joined than the mental health of members who joined three years ago, and b) members with poor mental health may be more likely to leave the movement than members who have no mental state abnormalities at the time of joining.

The only way to investigate these factors is through a longitudinal study that we are planning now.

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