ROLE OF RELIGIOUS COPING ON DISORDERED EATING IN YOUNG WOMEN

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Abstract

- Disordered eating remains pervasive among young women in the United States.
- Religious coping is a significant yet less widely researched factor in women's risk for eating disturbances. A review of the literature was conducted to investigate the role of religious coping on disordered eating in young women.
- It appears that positive religious coping protects against disordered eating, while negative religious coping heightens the risk for eating pathology. Self-esteem appears to mediate the latter correlation, such that higher self-esteem negates the effects of negative religious coping.
- These results may be used to tailor spiritual-based interventions for young women with eating disturbances.

Introduction

- Eating disorders are a prevalent form of chronic illness in U.S. for female adolescents and young adults (Wade et al., 2011)
- Disordered eating represents a continuum of maladaptive eating behaviors (Dancyger & Garfinkel, 1995)

Mild eating disturbance

Moderate disordered eating pathology

Clinical eating disorder

Contextual Factors in Young Adulthood

- Young adulthood provides the greatest opportunity for identity formation related to one's worldview (Arnett, 2000)
 - Increasingly examining and owning belief systems, including those of religion and spirituality (Fowler, 1981)



 Disordered eating is correlated with an unstable sense of self and uncertainty of religious beliefs and values during this time (Boyatzis & McConnell, 2006; Potterton et al., 2020; Shawel Abebe et al., 2013)

Religious Coping

Religious coping: Attachment to God/Higher Power during times of difficulty or transition; involves search for meaning and identity (Pargament et al., 2011)



Consists of two elements:



Uncertain relationship with a Higher Power during difficult times; reflects deeper spiritual struggle

Q Research question: How would religious coping affect disordered eating in young women, given their identity transformation and increased risk for disordered eating during this period?

Effects of Positive Religious Coping

- Studies generally show an inverse trend between positive religious coping and disordered eating in young women (Goulet et al., 2017; Jacobs-Pilipski et al., 2005; Latzer et al., 2015)
- Factors associated with positive religious coping:



*Appearance investment is defined by the reliance on outward appearance as a measure of self-worth (Goulet et al., 2017)

Effects of Negative Religious Coping

Negative religious coping is significantly associated with the following disordered eating factors (Buser & Bernard, 2013; Latzer et al., 2014; Lemmon & Homan, 2014):



Explanation of Findings

Consistency with previous research

- Significant association between negative religious coping and depression, anxiety, and trauma, as well as better psychological adjustment among those who engaged in positive religious coping (Bryant-Davis & Wong, 2013)
- Holistic benefits of positive religious coping
 - Young women with a secure attachment to a spiritual power were found to believe in the sacred quality of their bodies, which in turn appeared to create more appreciation of their physical bodies and a greater ability to recognize their internal states (Homan & Cavanaugh, 2013)



- Role of punishment in negative religious coping
 - Feeling punished by a spiritual power, an element of negative religious coping, can negatively affect self-esteem and thus increase risk for disordered eating (Latzer et al., 2014)

Significant Role of Self-Esteem



- Self-esteem was found to completely mediate the correlation between negative religious coping and disordered eating, such that the association between negative religious coping and disordered eating was no longer significant when including level of self-esteem (Latzer et al., 2014)
- Lower self-esteem may pose a significant risk factor for disordered eating

Clinical Implications

- Findings may be applicable to a substantial group of college-age women
 - High percentage of college students report using religion as a coping tool, and a large portion of freshman college students endorse a belief in God and an interest in spirituality (Higher Education Research Institute, 2004; Pargament et al., 2000)



- Clinicians may utilize relevant spiritual-based interventions in their therapeutic work with religious and/or spiritual clients (Buser & Bernard, 2013)
 - Help explore the ways in which religious coping style can lead to disordered eating behaviors
 - Use of cognitive therapy to deal with negative religious and/or spiritual beliefs may be beneficial (Buser & Bernard, 2013)

Discussion

- Research on religious coping style has increased understanding of the relationship between disordered eating and religious beliefs, as well as the potential benefits of incorporating religious beliefs as part of the therapeutic treatment
 - Limitations and future directions
 - Research has been correlational, so it cannot be assumed that negative religious coping causes disordered eating, or that positive religious coping prevents it
 - Consideration of newer forms of disordered eating are needed in future studies (i.e. binge-eating disorder, orthorexia nervosa)
 - Future studies should incorporate more **diverse samples** for generalizability of findings (Akrawi et al., 2017)

Conclusion

- Negative religious coping style may be one factor into clients' disordered eating symptoms
- For individuals with a secure attachment to a Higher Power, developing coping skills related to their religion and/or spirituality may serve as a protective mechanism against disordered eating
- The significant role of self-esteem should be considered with clients with disordered eating
- It is recommended that clinicians address religious coping styles with clients who endorse religious and/or spiritual beliefs and engage in disordered eating

References available upon request Contact: channani@alliant.edu