

Examining Spirituality's Influence on Negative Health Behaviors

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Abstract

In recent years, college campuses have seen a swell in reported negative health behaviors^{8,12}. These behaviors include activities such as engaging in heavy drinking episodes multiple nights a week and adopting patterns of dieting that could be considered eating disorders. Literature suggests that spirituality and religiosity can be protective against risk behaviors such as these¹⁸. However, it is unknown how ready college students are to change these behaviors. The Transtheoretical Model (TTM) states that there are five stages of readiness to change, and the stages range from individuals who are resisting change to individuals who have previously experienced change and are in the process of maintaining the change². Given that spirituality has been shown to be protective against risk behaviors, it is hypothesized that individuals who are in the later stages of change (i.e., actively expressing their spirituality) will express lower frequencies of engaging in alcohol and eating related risk behaviors. A total of 349 participants completed the online survey. The sample was approximately 73% female respondents and 27% male respondents with an average age of 20.71 years (SD = 3.78). The online survey assessed various demographics and behaviors including alcohol, drugs, sexual, and eating behaviors. Of these participants, 39% were not considering the adoption of spirituality (Precontemplation), 10.9% were contemplating change toward spiritual means in the distant future (Contemplation), 36.7% were preparing to embrace spirituality in the near future (Preparation), and 10.6% identified as actively embracing spirituality in their daily lives (Action/Maintenance). With respect to engagement in alcohol behavior, participants who were actively embracing spirituality (Action/Maintenance) engaged in significantly less consumption of alcohol compared to the other stages of change. However, there was no significant difference across the different stages of spiritual change in regards to negative eating behaviors. Therefore spirituality expression seems to provide some protection against negative drinking behaviors, but not against negative eating behaviors. Implications will be discussed.

Keywords: Spirituality, Negative Health Behaviors, Transtheoretical Model

1. Introduction

Alcohol consumption and eating disorder development are two predominant negative health behaviors on the rise among college students. College students who consume alcohol face many negative consequences as a result of drinking including physical illness, arrests, sexual assault, fights, and property damage and these effects are becoming increasingly prevalent, as drinking rates have been steadily rising in recent years⁸. Eating disorders also have a range of adverse effects including reduced psychological and physical well-being as well as monetary costs for treatment⁹. Studies show that alcohol consumption and eating disorder development are starting as early as adolescence^{5,19}, which is staggering considering the fact that further research shows that the tendency to increase both behaviors rises upon entering college^{1,12}.

Alcohol abuse is considered to be one of the most prominent health problems on college campuses according to college presidents and administrators¹⁰. The college years represent a time of transition, where students have the

opportunity to experiment with lifestyle choices outside of the watchful eye of their parents and often this places them at a high risk for alcohol abuse. Most traditional college students are not even able to legally consume alcohol, yet Wechsler's 2000 Harvard School of Public Health Study at 119 colleges found that 44.4% of college students admitted to engaging in binge drinking (5 or more drinks in a row for males, 4 or more drinks in a row for females) in the last two weeks¹⁷.

Eating disorders are also increasing in prevalence on college campuses. Women are developing symptoms of eating disorders at consistently younger ages and research has shown that a majority of American college women exhibit at least one or more symptoms of disordered eating⁷. Prevalence studies have also shown that as many as 17% of college women meet diagnostic criteria for eating disorders such as anorexia nervosa or bulimia nervosa¹². Literature has found a variety of results regarding affiliations that affect prevalence of disordered eating, suggesting that sports and religious orientation might have an effect of development of eating disorders, but no significance varies based on affiliation¹².

The Transtheoretical Model of Behavioral Change (TTM) is a behavioral model depicting change as a five stages of readiness: Precontemplation, Contemplation, Preparation, Action, and Maintenance. It suggests that an individual progresses and regresses through these stages overtime when seeking change¹¹. Due to the nature of the model as an analytical tool for behavioral change, the TTM is appropriate model for examining the likelihood that spirituality will have an influence in students' involvement in negative health behaviors such as alcohol consumption and disordered eating.

Previous research has shown that spirituality has varying effects on involvement in negative health behaviors, suggesting a significant negative relationship between spirituality and alcohol, but suggesting no significant effect of spirituality on eating disorder tendencies^{3,4}. The current research seeks to utilize the TTM to examine whether past findings are consistent when stages of behavioral change regarding spiritual expression are the means by which participants are classified as spiritual or not. By further defining participants' spirituality based on their desire to change spiritual behaviors, it is hypothesized that participants engaging in either action/maintenance (A/M) of spiritual expression will show significantly lower involvement in both alcohol consumption and eating disorder tendencies.

2. Methodology

2.1 Participants

Participants in this study consisted of 349 students from a mid-sized, Midwestern university in Southwestern Ohio. The participants were gathered by employing a snowball method via social networks and email. Of the participants, 27% were male and 73% were female and the average age of all participants was 20.71 years (SD=3.78).

2.2 Procedure

Participants completed an online survey via Prezza Checkbox that was distributed online through email and social networks by employing a snowball method. The Institutional Review Board of the authors approved all procedures for the study.

2.3 Measures

The online survey utilized various questions regarding drinking behaviors, eating disorder tendencies, and spiritual expression as well as demographics such as age, gender, and ethnicity. Spiritual expression was examined using a single item that asked the participants' intention to engage in spiritual expression. The following was the working definition of Spiritual Expression that was used in the survey:

“Spiritual Expression is an active and deliberate manifestation of beliefs or behaviors, which are sacred in nature. Spiritual Expression comprises activity (e.g. church attendance, prayer/meditation, Bible reading), which is performed to enhance one's spiritual life. Such activity should be a consistent concern and is

selected by choice (i.e. it is not mandatory). Spiritual Expression does not have to consume your day but is done to increase your awareness and growth¹⁶.”

The response options for this item corresponded to the 5 stages of change in the TTM. The items regarding drinking behaviors assessed the quantities and frequencies of the participants’ alcohol consumption. These questions were based on the definition of a standard drink (one 12-ounce bottle of beer, one one-ounce shot of liquor, or a four-ounce glass of wine). Eating disorder tendencies were measured using Garner and Garfinkel’s Eating Attitudes Test (EAT), which consists of 26 questions about the symptoms and concerns that are characteristic of eating disorders⁶. The questions were answered using a six-point scale that assesses the frequency of engaging in specific behaviors and includes the following response options: always, usually, often, sometimes, rarely, and never. A score of 20 or above on the EAT indicates high concern about dieting, body weight, or problematic eating behaviors.

3. Data

On average, 70.4% of students reported drinking at least one day a week and 62.7% of students reported drinking 3 or more drinks on a typical drinking day. Of participants surveyed, 24 participants (6.9%) scored a 20 or above on the EAT and 7 participants (1.8%) reported that they are currently receiving treatment for an eating disorder. In regards to spiritual expression, 39% of students were not engaged in any type of spiritual expression (Precontemplation), 11% of students were considering engaging in acts of spiritual expression (Contemplation), 37% of students were preparing to engage in spiritual expression (Preparation), and 11% of students were engaging in spiritual expression (Action/Maintenance).

Students engaging in spiritual expression were found to engage in significantly less consumption of alcohol than students who were not engaging in spiritual expression, $F(3, 319) = 16.58, p < .001$, thus supporting the hypothesis that engagement in spiritual expression promotes less alcohol use. In regards to eating disorders, no significance was found between students engaging in spiritual expression and those who were not, $F(3, 208) = 4.31, p = .01$.

4. Conclusion

This study utilized a survey to examine various behaviors including spiritual expression and behaviors associated with negative health such as alcohol consumption and eating disorders. After completing an analysis of the data, it was found that students engaging in spiritual expression were less likely to engage in the consumption of alcohol than students who were not actively engaged in spiritual expression. However, these results did not extend to eating disorder tendencies, as no significant difference was found between the students who were engaging in spiritual expression and the students who were not. These results suggest that spiritual expression could play a role in protecting against the participation in some, but not all negative health behaviors.

Previous research suggests that spirituality shows strong links between less favorable attitudes toward alcohol and substance abuse, as well as an increased tendency to engage in health promoting behaviors such as regular checkups and quitting smoking^{13,14}. The increased prevalence of health promoting behaviors among individuals who claim to engage in spiritual expression might suggest that eating disorders would also be protected against. However, the current findings support previous research showing no significant correlation between the two dimensions, even after examining specific stages of behavioral change. Research does show that women are more likely to seek help from friends if they do recognize that they possess symptoms of disordered eating, which is helpful in regards to treatment, but in terms of prevention, successful avenues have yet to be found¹⁵.

Various intervention studies have shown that the TTM has been used successfully to change a variety of negative health behaviors (e.g., smoking, depression). Using the recommendations of the TTM and the relationship between spirituality and alcohol consumption, future interventions among college students could be assisted by the increased knowledge of the beneficial effects of spirituality and the TTM’s framework for behavioral change. The same strategies may not extend to disordered eating for the domain of spirituality, but future beneficial affiliations may yet be determined.

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