

Race/Ethnicity and Longitudinal Relationships Between LOC Eating and Mood in Adolescents

Melissa Santos, PhD^{1,2}; Anna Vannucci¹; Christine McCauley Ohannessian^{1,2}; Tessa R. Fagle¹; Sonja Gagnon¹; Melissa Cotter Chapps¹
¹Connecticut Children's, ²University of Connecticut School of Medicine

INTRODUCTION

- Loss of control (LOC) eating puts youth at greater risk of weight gain, poor health outcomes and is linked to markers of psychosocial distress.
- However, few studies have considered these relationships while examining the potential protective, or vulnerability role, of race/ethnicity.

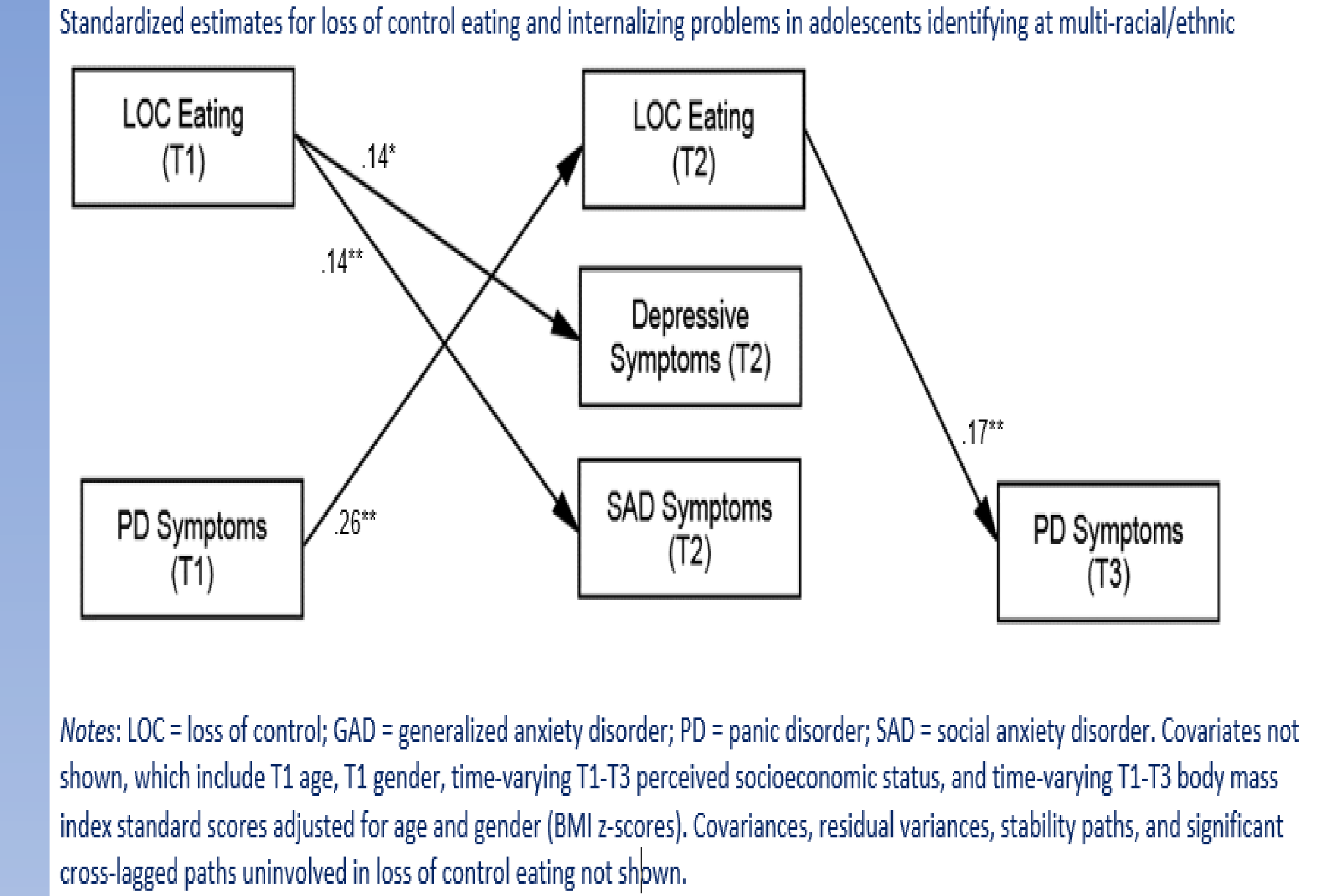
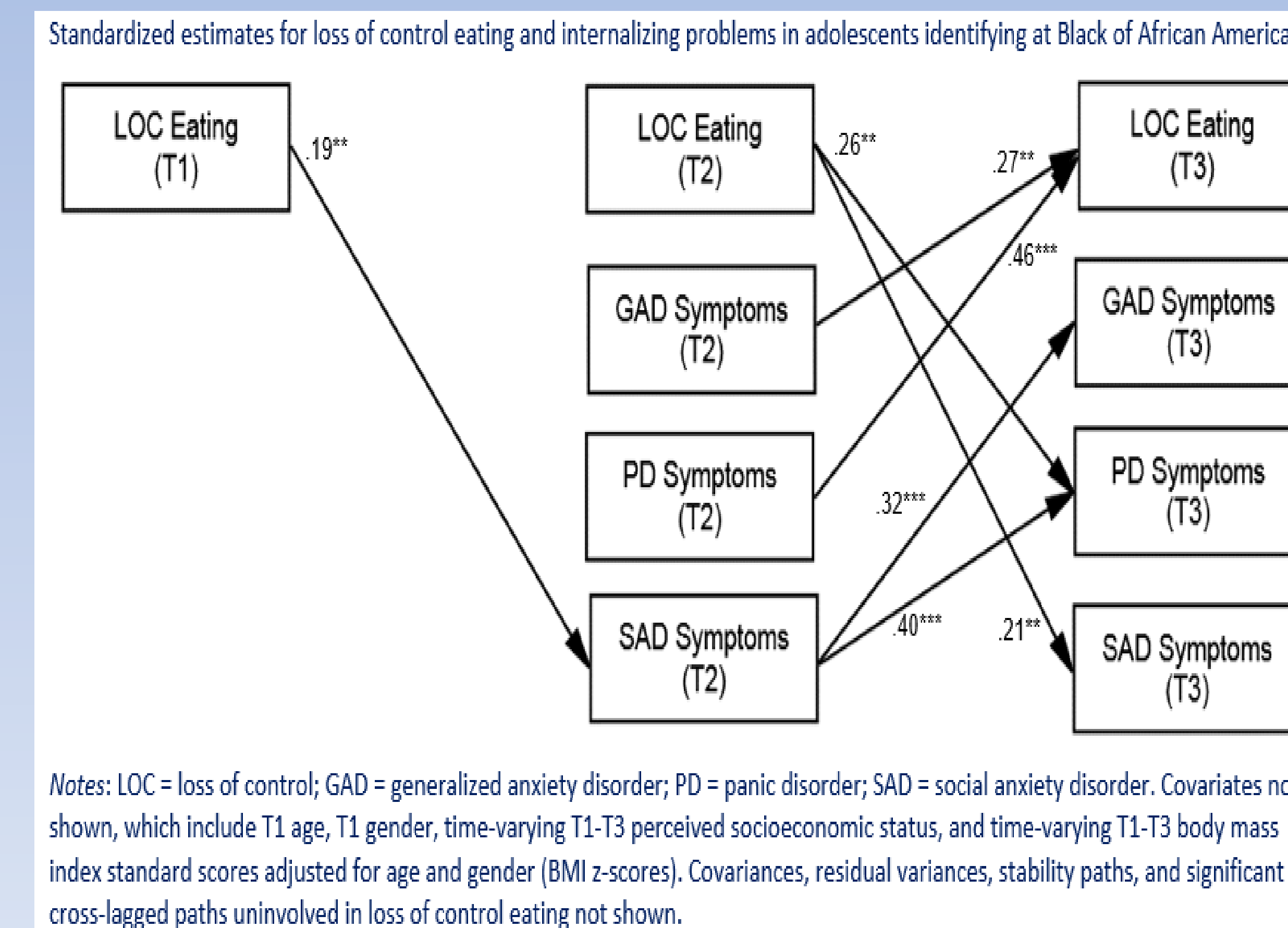
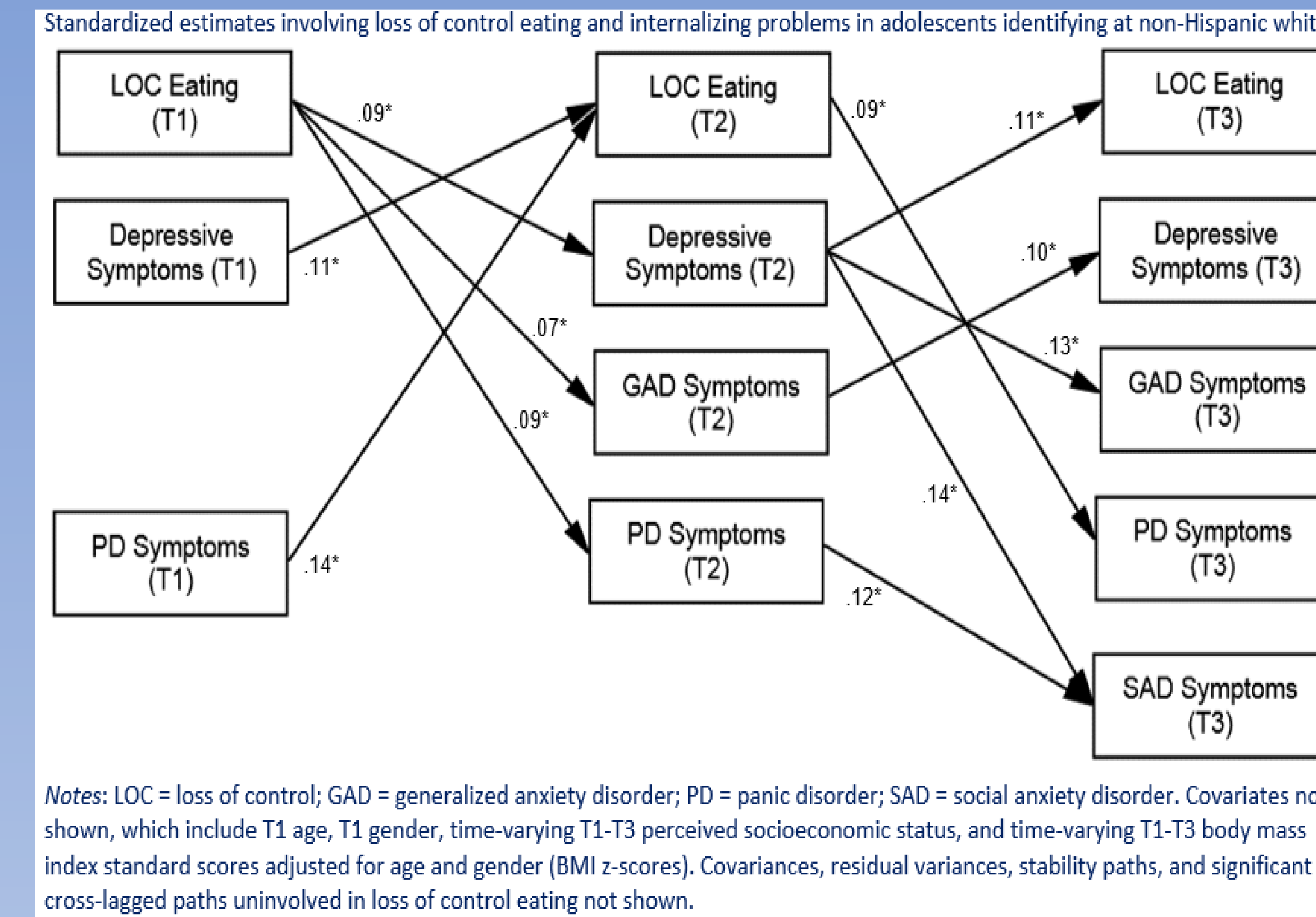
METHODS AND MATERIALS

- Participants were 1,285 U.S. adolescents (11-14 years; 51% girls) identifying as non-Hispanic White (54%), Hispanic/Latinx (21%), Black (10%), or Multi-Racial/Ethnic (15%)
- Validated questionnaires were administered during school in Fall 2016 (T1), Spring 2017 (T2), and Fall 2017 (T3)
- LOC eating (The Brief Loss of Control Eating Scale: α s=.93-.94)
- Anxiety (The Screen for Child Anxiety and Related Disorders: α s=.87-.91) and
- Depressive symptoms (The Center for Epidemiological Studies Depression Scale for Children: α s=.91-.93)

RESULTS

- Multiple group analyses of autoregressive cross-lagged path models indicated the presence of differences in all parameters for White, Black, and Multi-Racial/Ethnic adolescents ($ps < .01$), with no differences between White and Hispanic/Latinx adolescents ($ps > .05$).
- Models fit the data well (CFIs=.96-.98; RMSEAs=.04-.06), and adjusted for age, gender, socioeconomic status, and BMI-z.
- Among White and Hispanic/Latinx adolescents, positive, longitudinal associations were found between LOC and depressive symptoms (β s=.09-.11, $ps < .05$), as well as LOC and panic disorder symptoms (β s=.09-.14, $ps < .05$), from T1 to T2 and T2 to T3.
- The bidirectional associations between LOC and panic disorder symptoms also were found among multi-racial/ethnic adolescents, but with more robust effects (β s=.17-.26, $ps < .01$).
- Among Black adolescents, more frequent LOC at T1 and T2 predicted greater increases in social anxiety disorder symptoms at T2 and T3, respectively (β s=.19-.21, $ps < .01$).

RESULTS



CONCLUSIONS

- These findings stress that the relationships between LOC eating and internalizing symptoms are distinct among most racial/ethnic subgroups. While some research has suggested a protective role that racial/ethnic minority status could have against LOC eating, these findings show no such protection.

FUTURE RESEARCH

- Future research should examine further aspects of race and ethnicity including:
 - Years in the United States/acclulturation
 - Other minority groups including Asian, Hawaiian or Pacific Islander and Native American/indigenous groups