



P-ISSN: 2394-1685
E-ISSN: 2394-1693
Impact Factor (ISRA): 5.38
IJPESH 2019; 6(5): 150-151
© 2019 IJPESH
www.kheljournal.com
Received: 16-07-2019
Accepted: 18-08-2019

Dr. Sharda Purwar
Physical Education Teacher
Adarsh Vidyalaya, Raipur,
Chhattisgarh, India

Dr. Ajay Karkare
Principal, Rani Laxmibai Mahila
Mahavidyalaya, Sawargaon,
Nagpur, Maharashtra, India

Corresponding Author:
Dr. Sharda Purwar
Physical Education Teacher
Adarsh Vidyalaya, Raipur,
Chhattisgarh, India

International Journal of Physical Education, Sports and Health

A study of eating disorder in Indian women on the basis of their socio-economic status

Dr. Sharda Purwar and Dr. Ajay Karkare

Abstract

Present study assessed eating disorder in Indian women on the basis of their socio-economic status. This study was conducted on 1000 Indian women (Ave. age 33.35 years). Socio-economic status inventory prepared by Agashe and Helode (2010) and eating disorder Inventory prepared by Agashe and Karkare (2007) was used to collect the data. Result reveals that eating disorder in women from high, low and average socio economic status vary significantly with each other. It was concluded that magnitude of disordered eating among India women is influenced by their belongingness to particular socio-economic status.

Keywords: Eating disorder, socio-economic status, Indian women

Introduction

Abnormal eating habits form the basis of eating disorder. The development of abnormal eating habits occurs when a person desires a certain body type. Anorexia nervosa (AN), Bulimia nervosa (BN), Binge eating disorder (BED) and Compulsive Eating are the basic forms of eating disorder. Researchers like Zaimin *et al.* (2005) [6], Cruickshank (2006) [1], Prabha S. Chandra *et al.* (2011) [3], Ganesh and Sridevi (2014), Lal *et al.* (2015) [2] have identified several psycho-social factors which contribute to development of eating disorder in women.

A total combination economic and sociological status can be referred to as socio-economic status. It reflects persons person's status relative to his/her social status, income, education and occupation. Socio economic status often classified as high, middle and low SES. A person's wealth, social status and other demographic factors may be assessed by his/her socio-economic status. Socio economic status as an influencing factor in development of eating disorder is debatable. Rogers (1997) [5] and Reagon (2005) [4] reported that prevalence of eating disorder in high socio-economic status is significantly higher as compared to low and middle socio-economic status. Contrary to this Jones *et al.* (2001) in their study found no significant association between eating disorder and socio-economic status. In view of contradictory opinion about the relationship of socio-economic status with eating disorder, the present study was planned to compare eating disorder among women belonging to high, middle and low socio-economic status category.

Hypothesis

It was hypothesized that eating disorder in women subjects of high, low and average socio economic status will differ significantly with each other.

Methodology

The following methodological steps were taken while conducting the present research work.

Sample

For present study, 1000 Indian women (Ave. age 33.35 years) were selected across Indian territory which includes northern, western, southern, central and eastern parts of India. Random sampling method was used for selection of sample in the present study.

Tools

To assess eating disorder in selected women subjects, Eating Disorder Inventory, prepared by Agashe and Karkare (2007) was used.

This questionnaire comprises in all 25 positive and negative worded questions which measures eating habits of the respondent. The test-retest reliability of the inventory is .82 while the content validity is .72. Higher scores indicate inferior eating behaviour is the direction of scoring.

For measuring socio economic status of the selected subjects, SES inventory prepared by Agashe & Helode (2010) in Hindi was adopted. This inventory consist of 10 items for measuring educational status of family members, occupational status, monthly income, housing condition, households, periodicals used by family, monthly expenditure, participation in social functions, and assessment for opinion of the friends and others about the family. It is highly reliable and valid test.

Procedure

After selection of sample, subjects were assured that their responses will be used only to fulfill the aims and objectives of the study. Inventories chosen for the present study were administered to each subjects with sufficient time interval between the two. The responses given by the subjects were scored off as per author's manual. Q_1 and Q_3 (i.e. percentile values at 25 and 75) statistical technique was used to divide cases into high, low and middle socio-economic status. Subjects whose SES scores fall above Q_3 were grouped in as high SES group; subjects whose SES scores fall below Q_1 were grouped in as low SES group and subjects whose scores fall between Q_1 and Q_3 were grouped into middle SES group. The scores on eating disorder of these identified subjects were tabulated for each group. One way ANOVA technique was used to find out the difference in eating disorder scores between these groups. The obtained results of such statistical analysis are presented in Table 1 and 2 respectively.

Result

Table 1: Effect of Level of Socio Economic Status (SES), on Eating Disorder in a Group of Selected Indian Women (N=1000)

Groups	N	Eating Disorder	
		Mean	S.D.
High SES	342	7.80	4.39
Low SES	344	6.41	4.22
Middle SES	314	6.87	3.92

$F=9.76, p < .01$

Results obtained through One Way ANOVA suggesting that eating disorder in women from high, low and middle socio economic status vary significantly with each other. The F ratio of 9.76, which is statistically significant at .01 level, confirms this finding. This result is also confirmed by Least Significant Difference Test presented in table no. 2.

Table 2: Comparison of Eating Disorder among Indian Women on the Basis of their Socio Economic Status Least Significant Difference Test with Significance Level .05

Mean (I)	Mean (J)	Mean Difference (I-J)
High SES	Low SES	1.39*
	Average SES	.92*
Low SES	High SES	-1.39*
	Average SES	-.46
Middle SES	High SES	-.92*
	Low SES	.46

* Significant at .05 level

Statistical entries in table 1 indicate that eating disorder in women belonging to high socio economic status group was significantly higher as compared to women subjects

belonging to low and middle socio economic status.

It was also observed that eating disorder in women belonging to middle socio economic status group did not differ significantly with women subjects belonging to low socio economic status.

Discussion

Results shows that women from high socio-economic status are more prone to suffer from eating disorder as compared to women belonging to middle and low socio economic status. It may due to the fact women belonging to high socio economic status are stressed and under pressure to be perfect shape all the time and this may have caused more eating disorder in women as compared to their counterparts from middle and low socio-economic status.

Conclusion

On the basis of results it can be concluded that socio economic status of Indian women influences their disordered eating behaviour.

References

1. Cruickshank S. The Relationship between Personality Traits, Body Image, and Eating Behaviours in College Females. Unpublished Honors Thesis, Texas State University – San Marcos, 2006.
2. Lal M, Abraham S, Parikh S, Chhibber K. A comparison of eating disorder patients in India and Australia. *Indian J Psychiatry* [serial online]. 2015; 57:37-42.
3. Prabha S Chandra, Abbas S, Palmer R. Are eating disorders a significant clinical issue in urban India? a survey among psychiatrists in Bangalore, 2011.
4. Reagan PA. Influence of Race, Gender, and Socioeconomic Status on Binge Eating Frequency in a Population-Based Sample. *International Journal of Eating Disorders*. 2005; 38(3):252-256.
5. Rogers L, Resnik MD, Mitchell JE, Blum RW. The relationship between socioeconomic status and eating-disordered behaviors in a community sample of adolescent girls. *Int. J Eat Disord*. 1997; 22(1):15-23.
6. Zaimin W, Nuala MB, Kenardy JA, Hills AP. Influences of Ethnicity and Socioeconomic Status on the Body Dissatisfaction and Eating Behaviour of Australian Children and Adolescents. *Eating Behaviors*. 2005; 6(1):23-33.