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Exploring the preponderance of eating disorders among undergraduate females of University of Delhi: A comprehensive study

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Abstract

Eating disorders are renowned behavioral problems defined as a significant and persistent disruption in eating behaviors as well as disturbing thoughts and emotions. Bulimia nervosa, anorexia nervosa, binge eating disorder and other specific feeding and eating disorder, are among the several types of eating disorders. The main aim of the present study is to find out the prevalence of eating disorders among undergraduate females. Total number of around forty five undergraduate females of 18-23 age groups from colleges within University of Delhi, have been randomly selected. To measure the eating disorder, the questionnaire namely 'Eating Attitude Test (EAT 26)' by Garner, Garfinkel, Bohr, Olmsted (1982) has been used. The questionnaire had been administered through Google form to the selected undergraduate females as per their feasibility and convenience. After scoring of all 26 items/questions of the EAT-26 Test according to the scoring system, Descriptive statistics measures such as: Mean and Standard Deviation and also percentage have been calculated. Based on the result analysis, it has been found that majority of 75% undergraduate females of University of Delhi, have low EAT-26 scores (Below 20). Considering that 75% of low EAT-26 scores (below 20), it is apparent that most of the female students have healthy eating habits and behaviors and do not participate in disordered eating behaviors such as: Going on eating binges, inducing vomiting, or using laxatives, diet pills, or diuretics to control weight or shape.

Keywords: Eating disorders, undergraduate females, anorexia nervosa, bulimia nervosa

Introduction

An abnormal focus on food and weight is a hallmark of eating disorders. Compared to men, women are far more likely to experience eating problems. This is caused by the perception in society that men should be "bulked up" and women should be "Slender". Women may feel pressured to be "picture perfect" as a result, and eating disorders may develop as a result of the stress of failing to meet unrealistic expectations associated with this ideal. All ages are affected by eating problems, but college students are especially susceptible. The following data on eating disorders among college students is cited by the Massachusetts Eating Disorders Association (Iyer & Shriraam, N.D.).

- 15% of women aged 17 to 24 suffer from eating disorders.
- Eating disorders affect 40% of female college students today.
- Dieting has been tried by 91% of female college students to control their weight.

According to experts, there is a growing prevalence of eating problems among male college students also. In 1987 research by Johnson and Connors, the etiology and treatment of bulimia nervosa found that 1% to 7% of college males and 5% to 20% of college females suffer from eating disorders.

Operational definition

What is eating disorder: A disorder is a sick physical or mental state; it is a malfunction or anomaly of function. Eating disorders are behavioral problems defined as a significant and persistent disruption in eating behaviors as well as disturbing thoughts and emotions.

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These can be extremely dangerous conditions that interfere with social, psychological and bodily functions. Bulimia nervosa, anorexia nervosa, binge eating disorder avoidant restricted food intake disorder, other specific feeding and eating disorder, pica, and rumination disorder are among the several types of eating disorders (What Are Eating Disorders?, N.D.).

Significance of the study

By exploring the preponderance of eating disorders among undergraduate females of University of Delhi, an outline and valuable insights have been obtained about the areas which require amendments and therefore explicit intervention strategies have been formulated to correct the same.

Objectives

1. To explore the preponderance of eating disorders among undergraduate females.
2. To find out the presence of eating disorders risk based on feelings, attitudes and behaviors associated to eating habits among undergraduate females.
3. To offer suggestions, recommendations, develop initiatives and strategies to improve the eating disorder among undergraduate females.

Methodology

Selection of the subjects: For the purpose of the present research work, total number of around forty-five undergraduate females of 18-23 age groups from colleges within University of Delhi have been randomly selected for data collection and statistical analysis. The subjects have been selected on voluntarily acceptance basis so that their schedule should have no hindrance.

Criterion measure: The independent variable eating disorder have been measured by the questionnaire namely 'Eating Attitude Test (EAT 26)' by Garner, Garfinkel, Bohr, Olmsted (1982) [5].

Description of the questionnaires: This test is said to be reliable as it has been used in many studies.

Administration of the questionnaire: The subjects have been contacted and the purpose of the study was explained to them to determine willingness to respond questionnaire. They voluntarily agreed to extend full cooperation. The survey questionnaires had been administered through Google form to the selected undergraduate females as per their feasibility and convenience. Instructions and objectives of the research have been explained. Following this process, the researcher was able to collect the valid and reliable data on eating disorders. The responses of each questionnaire have been converted into scores with the key as per the description given below:

EAT-26 Test Scoring: Score the 26 items/questions of the EAT-26 Test according to the below mentioned scoring system. Add the scores for all 26 item¹.

Scoring for items/Questions 1-25	Scoring for items/Question 26
Always = 3	Always = 0
Usually = 2	Usually = 0
Often = 1	Often = 0
Sometimes = 0	Sometimes = 1
Rarely = 0	Rarely = 2
Never = 0	Never = 3

Firstly sum the scores of all 26 items/questions, then the total score (Between 0 and 78) gives an overall risk score, where higher scores indicate greater risk of an eating disorder and total scores 20 or above are considered to be in the clinical range.

Further, this EAT-26 scale has three subscales as:

1. Dieting
2. Bulimia and Food Preoccupation
3. Oral Control

The scores on the three subscales can also be examined to assertion the focus of disordered eating (Eating Attitudes Test-26 (EAT-26), 2021) Calculate the three subscale scores by summing the scores of below mentioned items/questions numbers within each subscale such as.

1. Dieting includes items/questions no: 1, 6, 7, 10, 11, 12, 14, 16, 17, 22, 23, 24, and 26.
2. Bulimia and Food Preoccupation includes items/questions No: 3, 4, 9, 18, 21, and 25.
3. Oral Control includes items/questions no: 2, 5, 8, 13, 15, 19, and 20.

Statistical techniques used for analysis of data: For analyzing the quantitative data, descriptive statistical technique have been employed. In descriptive statistics measures such as: Mean and Standard Deviation have been calculated. Thereafter Nominal data has been presented through Table, Percentage, and pie chart and bar diagram etc.

Results and Discussion

Table 1: Descriptive statistics of the three subscales scores of the responses given by the undergraduate females of University of Delhi

S. No.	Three subscales	Mean	S.D.
1.	Dieting (Questions No: 1,6,7,10,11,12,14,16,17,22,23,24,26)	8.6	9
2.	Bulimia and Food Preoccupation (Questions No: 3,4,9,18,21,25)	2.4	4.2
3.	Oral Control (Questions No: 2,5,8,13,15,19,20)	4.6	5.1

S.D. = Standard Deviation

Table 2: Percentage distribution of the responses by the undergraduate females of University of Delhi by adding the scores of all 26 items/questions

S. No.	Score Range	Percentage Responses (%) of undergraduate females
1.	Low Scores (Below 20)	75%
2.	Highest Score (20 or Higher)	25%

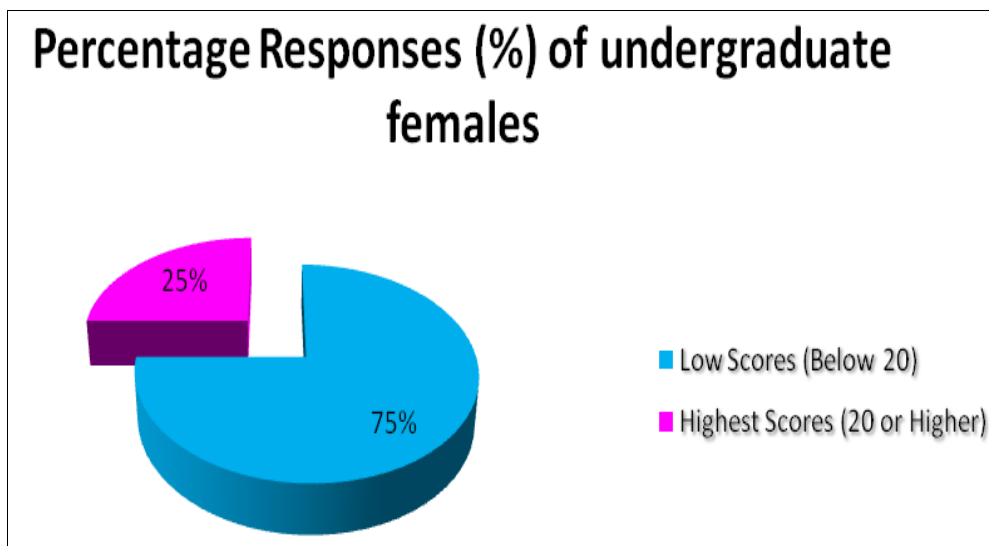


Fig 1: Percentage responses of 26 items/questions by the undergraduate females of University of Delhi

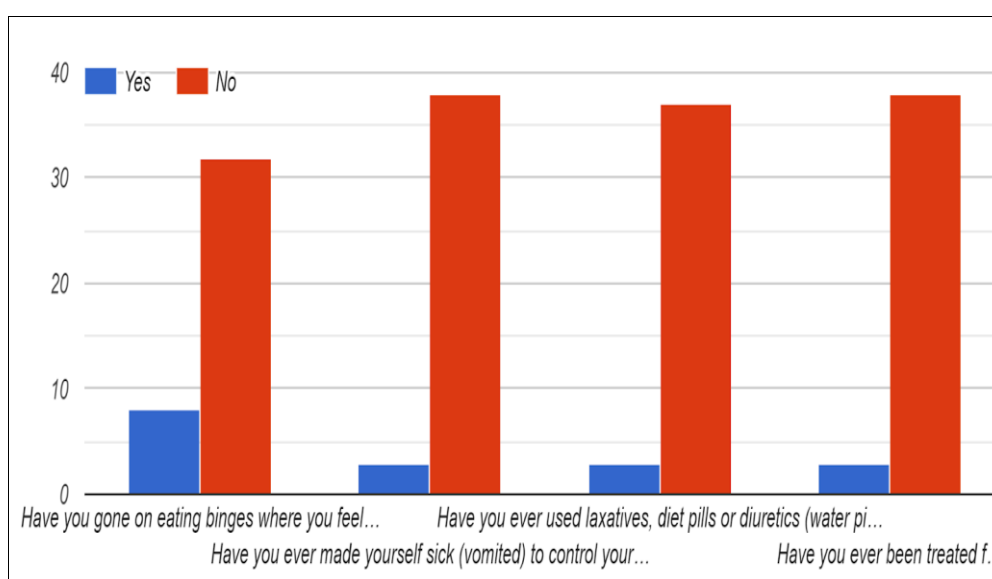


Fig 2: Percentage responses to behavioral questions related to eating symptoms and weight loss

Conclusion

Based on the data analysis, Eating Attitude Test (EAT-26): Majority of 75% undergraduate females of University of Delhi, have low EAT-26 scores (Below 20) which clearly shows that this group generally have a positive relationship with food and body image. Further, 25% of undergraduate females have high EAT-26 scores of 20 or higher which indicate a need for further investigation by a qualified professional and also point out concerns regarding body weight and shape and eating. It is advised that the females having a score of 20 or higher, they should necessarily seek the advice of a qualified mental health professional who has experience with treating eating disorders. Descriptive statistics measures for the scores of three subscales of responses given by the undergraduate females of University of Delhi, has also been applied to analyze the data. As a result, the mean and standard deviation of subscale namely "Dieting" is 8.6 and 9. The mean and standard deviation of "Bulimia and Food Preoccupation" are 2.4 and 4.2 and 4.6 and 5.1 is the mean and standard deviation of subscale namely "Oral Control".

Behavioral Questions: Majority of undergraduate females of University of Delhi, have negative answers or responses to the

behavioral questions that indicates that they are disagree as they don't use of these behaviors like: Majority of females have not gone on eating binges and have never made themselves sick (vomited) to control their weight or shape. Majority of females have never used laxatives, diet pills or diuretics to control their weight or shape and also have never been treated for an eating disorders.

In conclusion, the results of analysis of undergraduate females of University of Delhi's Eating Attitudes Test-26 (EAT-26) scores show that eating attitudes and behaviors are generally favorable among this group. Considering that 75% of females have low EAT-26 scores (Below 20), it is apparent that most of the female students have healthy eating habits. This suggests that a large proportion of undergraduate females does not participate in disordered eating behaviors like: Going on eating binges, inducing vomiting, or using laxatives, diet pills, or diuretics to control weight or shape. Further, it is also significant to acknowledge the minority of 25% undergraduate females who have moderate to higher scores on the EAT-26 which suggests that this group should seriously seek evaluation by a qualified professional for their health. More support services, educational initiatives, or treatments to address any new issues pertaining to eating attitudes and behaviors would be beneficial for this smaller population.

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