



## Research Article

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### Journal of Advances in Developmental Research

ISSN: 0976-4704 (Print), e-ISSN: 0976-4844 (Online)  
J.Adv.Dev.Res. Volume 1, No.2, December 2010

# Comparative Study of Eating Disorder in Professional, Academic and Selected Sports Females

Arvind C Rami<sup>1\*</sup>, Pratik B Dabhi<sup>1</sup> and Mohammad Hasam Dhupli<sup>2</sup>

<sup>1\*</sup> Corresponding author, M.D.S.S. Mahavidyalay, Gujarat Vidyapith- Sadra, District- Gandhinagar, Gujarat

<sup>2</sup> Adhyapak Sahayak, Nizar Arts and Commerce College, South Gujarat University, Nizar, District- Tapi, Gujarat

## Abstract

The purpose of this study was to compare of eating disorder in professional, academic and selected sports female personality in Gandhinagar district (Gujarat). 75 girls studying in professional course, 75 girls studying in academic course and 75 selected sports personality were selected randomly from different colleges of Gandhinagar district for the purpose of the study. The age group was between 17 to 25 years. Questionnaire method was employed to collect the relevant data. The criterion measure for testing the hypothesis in this study was the scores obtained in the eating disorder questionnaire. Scholar circulated the questionnaire to the subjects of various categories then he explained the purpose and description of the questionnaire. To find out the comparison of eating disorder in girls of professional course, academic course and selected sports personality "F" test (one way analysis of variance) was applied in statistical procedure. Comparing the entire groups mean we find that there is significant difference between academic mean (25.53) and selected sports female personality mean (25.77) while there is high significant differences in professional mean (28.96) compared to academic and selected sports female personality. Therefore we can say that there is a high eating disorder problem in professional group in comparison of other two groups' i.e. academic and selected sports female personality. Data found from the LSD after comparing the mean of the three groups it was found that, the LSD of academic and selected sports female personality is less significant but when professional group mean was compared with academic and selected sports female personality group a very high significant difference was found. From this we found that the percentage of eating disorder is very high in professional group compared to academic and selected sports female personality group in Gandhinagar.

**Key words;** Anorexia nervosa, bulimia nervosa, stress.

## Introduction

Eating disorder means Anorexia Nervosa and Bulimia Nervosa. Anorexia Nervosa literally means 'loss of appetite through nervous reasons' and Bulimia Nervosa is characterized by compulsive

binge eating, accompanied by self-induced vomiting, period of starvation and excessive exercise, and purging with laxative to avoid weight gain and alleviate guilt. Most women in the western world have a distorted body image, perceiving themselves

to be fatter than they really are. Many consequently spend a lifetime in pursuit of a leaner, lighter body. While some resort to the drastic measure of cosmetic surgery, most choose to focus on exercise and food intake. However, diet lead to an obsessive preoccupation with weight and calories, and eventually to disordered eating. The media may be a significant influence on eating disorders through its impact on values, norms, and image standards accepted by modern society. Both, societies' exposure to media and eating disorders have grown immensely over the past decade. Researchers and clinicians are concerned about the relationship between these two phenomena and finding ways to reduce the negative influence that thin-ideal media has on women's body perception and susceptibility to eating disorders. The dieting industry makes billions of dollars each year because consumers continually buying products in an effort to be the ideal weight. Hollywood displays an unrealistic standard of beauty that makes the public feel incredibly inadequate and dissatisfied and forces people to strive for an unattainable appearance. Research from a family systems perspective indicates that eating disorders stem from both the adolescent's difficulty in separating from over-controlling parents, and disturbed patterns of communication. When parents are critical and unaffectionate, their children are more prone to becoming self-destructive and self-critical, and have difficulty in developing the skills to engage in self-care giving behaviors. Such developmental failures in early relationships with others, particularly maternal empathy, impairs the development of an internal sense of self and leads to over-dependence on the environment. When coping strategies have not been developed in the family system, food and drugs serve as a substitute. There is no one cause of eating disorders because many things contribute to them. If you have low self-esteem, that can be a big contribution. Some other causes of these disorders could simply be feeling helpless, using it as a way to handle stress and concerns, or just wanting to have control over something in your life. For other people, the main cause might be just being fearful of becoming over weight. But some people do not have much of a choice when it comes to eating disorders, because genetics play a big part. If an

eating disorder runs in your family, then that may also be a main cause. In some families, the mother is extremely concerned about her daughter's weight, and that concern can lead to the child becoming over concerned as well, which then can laid to an eating disorder. Also in families, sometimes the father or brothers make comments or suggestions having to do with the daughter's weight, which can then make her wish to look as thin as she can so that the rest of her family is satisfied.

The most commonly known cause of eating disorders is the social pressure to be thin. The average American model is 5'11" and weighs only 117 pounds, while the average American women is 5'4" and 140 pounds. That statistic shows that most models are thinner than 98% of American women. Maybe that is why 80% of American women are not happy with what they look like. People have been starting to think that models are having a severe negative impact on eating disorders, and there are even more statistics that may prove that assumption. About 42% of first, second, and third grade girls want to be thinner, 81% of ten year olds are afraid of becoming fat, and 51% of nine and ten year old girls feel better if they are on a diet. There are many diseases, disorders, and problem conditions involving food, weight and eating, but in everyday conversation, the term eating disorders is used. An eating disorder is a compulsion to eat, or avoid eating, that negatively affects both one's physical and mental health. While most children who develop eating disorders are between 11 and 13, studies have shown that 80% of 3rd through 6th graders are dissatisfied with their bodies or their weight and by age 9 somewhere between 30 and 40% of girls have already been on a diet. Between ages 10 and 16, the statistic jumps to 80%. Many eating disorder experts attribute this behavior to the effect of cultural expectations. Stress is also considered to be a factor in the development of eating disorders. In the Indian context, typical anorexia is reportedly less prevalent. Indian culture lays little emphasis on dieting and food is a symbol of nurturance. However, this milieu is clearly changing and emaciated models are as much in vogue here, as they are in the West. As a result, generation seems to be caught in a weighty predicament. In some sports, disordered eating even

seems to be regarded as a natural part of being an athlete, compared to non athletes, is at increased risk for developing eating disorder because of the focus on low body weight as a performance enhancer, comments from coaches and the pressure to perform. In addition to the pressure to reduce weight, athletes are often pressed for time, and they have to lose weight rapidly to make or stay in the team. As a result they often go on extreme diets or experience weight cycling. Weight cycling has been suggested as an important risk or trigger factor for the development of eating disorders in athletes. Some factors which may indicate an eating disorder are as- an excessive fear of becoming fat, feels a social pressure to change body weight, avoids eating despite hunger, eats without being able to stop, cannot recognize true physical hunger, vomiting after binge-eating, exaggerated interest in healthy living, eating and exercise, abnormally thin or overweight.

Anorexia nervosa, a form of self-starvation, is an eating disorder characterized by low body weight (less than 85 percent of normal weight for height and age), a distorted body image, amenorrhea (absence of at least three consecutive menstrual cycles when otherwise expected to occur in women), and an intense fear of gaining weight. The cause of anorexia nervosa is not known. Anorexia usually begins as innocent dieting behavior, but gradually progresses to extreme and unhealthy weight loss. Symptoms of anorexia nervosa are- low body weight (less than 85 percent of normal weight for height and age); intense fear of becoming obese even as individual is losing weight; distorted view of one's body weight, size, or shape; sees self as too fat, even when very underweight; expresses feeling fat, even when very thin; refuses to maintain minimum normal body weight in females; absence of three menstrual cycles without another cause; excessive physical activity in order to promote weight loss; denies feelings of hunger; preoccupation with food preparation; bizarre eating behaviors etc. The following are the most common physical symptoms associated with anorexia - often which result from starvation and malnourishment however, each child may experience symptoms differently- dry skin that when pinched and released, stays pinched; dehydration; abdominal pain; constipation; lethargy;

dizziness; fatigue; intolerance to cold temperatures; emaciation; development of lanugos (fine, downy body hair); yellowing of the skin etc.

Bulimia Nervosa is characterized by a highly secretive cycle of binge eating followed by purging. Bulimia includes eating large amounts of food (more than most people would eat in a meal) in a short period, then getting rid of the food and calories through vomiting, excessive exercise, or laxative abuse. Research suggests that about four percent or four out of one hundred, college-aged women have bulimia. About 50% of people who have been anorexic develop bulimia or bulimic patterns. Because people with bulimia are secretive, it is difficult to know how many older people are affected. Bulimia is rare in children. Symptoms may include, recurrent episodes of binge eating, a sense of lack of control over eating during the episode (e.g., a feeling that one cannot stop eating or control what or how much one is eating); recurrent inappropriate compensatory behavior in order to prevent weight gain, such as self-induced vomiting; misuse of laxatives, diuretics, enemas, or other medications; fasting; or excessive exercise; self-evaluation is unduly influenced by body shape and weight; preoccupation with food, hoarding, hiding; stealing food; fear of gaining weight or becoming fat; depression, isolation and loneliness; difficulty in expressing feelings; possible sexual orientation and gender identity issues; low self-esteem; people-pleasers; perfectionist standards; fatigue; weight fluctuations; edema; dental problems; electrolyte imbalances etc.

## Experimental

### Purpose of the study

The purpose of this study was to compare of eating disorder in professional, academic and selected sports female personality in Gandhinagar district (Gujarat).

### Hypothesis

It was hypothesized that there is significant difference between professional, academic and selected sports female personality in eating disorder.

### Methodology

75 girls studying in each of professional and academic course and 75 sports personality were selected randomly from different college of Gandhinagar district for the purpose of the study. The age group was between 17 to 25 years. Questionnaire methods were employed to collect the relevant data. The criterion measure for testing the hypothesis in this study was, the scores obtained in the eating disorder questionnaire (David CN, 1990). Scholar circulated the questionnaire to the subjects of various categories then he explained, purpose and description of the questionnaire of eating disorder. Then he took consent of the subjects to fill-up questionnaire, subjects were ensured that the responses given by them would strictly keep confidential and would not be revealed to anyone. Subjects were in college during free time together all the subjects in sufficient place and then explained the purpose of the study. Research scholar distributed questionnaire and dictate subjects to understand about what they were exactly required to read instructions and directions. There was no right or wrong answers. There was no time limit to complete questionnaire but subjects were instructed to tick the right column they felt about the question. All the subjects were instructed to respond independently.

### Statistics

To find out the comparison of eating disorder in girls of professional course, academic course and selected sports personality "F" test (one way analysis of variance) was applied in statistical procedure.

**Table 1.** Mean score of eating disorder checklist in professional, academic and selected sports female personality

Group	Professional	Academic	Selected sports female personality
Mean	28.96	25.53	25.77

**Table 2.** Analysis of variance of the mean for three groups in eating disorder

SV	DF	SS	MSS	F ratio
Between groups	2	29834.03	14917.02	22.73*
Within groups	222	145698.97	656.30	

\*Significant at 5% level of confidence

**Table 3.** Comparison of means of three groups

Professional	Academic	Selected sports female personality	CD
28.96	25.53	25.77	12.72

## Results and Discussion

Mean values of eating disorder in professional, academic and selected sports female personality are shown in Table 1. Comparing the entire groups mean we find there is significant difference between academic mean (25.53) and selected sports female personality mean (25.77) while there is high significant differences in professional mean (28.96) compared to academic and selected sports female personality (Table 2 & 3). Therefore we can say that there is a high eating disorder problem in professional group in comparison of other two groups i.e. academic and selected sports female personality. Data found from the LSD after comparing the mean of the three groups it was found that, the LSD of academic and selected sports female personality is less significant but when professional group mean was compared with academic and selected sports female personality group a very high significant difference was found. From this we found that the percentage of eating disorder is very high in professional group compared to academic and selected sports female personality group in Gandhinagar. The hypothesis i.e., there is significant difference between professional, academic and selected sports female players in eating disorder stated earlier in the study was accepted.

## Conclusion

The ideal female shape has changed dramatically according to the trends of contemporary fashion. From the reubenesque curve of the 15<sup>th</sup> century to the wasp waist and emphasized posteriors of the seventeenth and nineteenth centuries, women have resorted to assets, bustles and boning to conform to the fashionable shapes. The fashions dictates of the 20<sup>th</sup> century have, however, proven the most demanding. Women generally have a more negative body image than men. They frequently over-estimate their body size and are preoccupied with their weight, tend to aspire to unrealistic goals for weight loss and are more likely than man to engage in destruction behavior to attain their ideal weight. The fitness and sports environment puts women under great pressure to attain a low body weight and body fat percentage. Those in 'thinness demand' and weight category sports tend to have a poorer body image. The desire to look lean or thin often exceeds the desire to win or train well. Many women take an excessive amount of exercise in order to pursue their obsession with weight loss. A significant number of females use dieting and try to meet their goals using harmful, though ineffective, weight-loss practice such as restrictive eating, vomiting, laxatives, and diuretics.

## References

- Anita B and Peggy W. 2001. *Sports Nutrition for Women*. Alameda, CA, Hunter House publication.
- David CN. 1990. *Fitness and Sports Medicine: An Introduction*. Bull Publication Co., Palo Alto, CA.
- Tamara DJ, Carlos MG and Robin MM. 2000. Teasing history, onset of obesity, current eating disorder psychopathology, body dissatisfaction, and psychological functioning in binge eating disorder. *Obesity Research*, 8: 451–458
- [www.anorexia.nervosa/history.com](http://www.anorexia.nervosa/history.com)
- [www.bulimia.nervosa/history.com](http://www.bulimia.nervosa/history.com)
- [www.indianjournalofpsychiatry.com](http://www.indianjournalofpsychiatry.com)