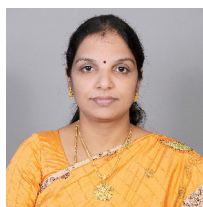


**EATING ATTITUDE AMONG ADOLESCENTS IN SELECTED COLLEGE****K.SILAMBUSELVI * ¹, M.RAMYA RATHI DEVI ² AND M.HEMAMALINI ³**^{1,2,3}*SRM College Of Nursing, SRM University, Kattankulathur, Chennai, Tamilnadu,India.***ABSTRACT**

Adolescents frequently develop eating disorders and have major public health impact . Screening for eating disorders helps in early identification and earlier treatment. This study was conducted in SRM College of Nursing, Kattankulathur. Quantitative approach and Descriptive Cross sectional design was adopted for the present study. The sample size includes 160 adolescents who were studying B.sc Nursing in SRM College of Nursing. Non-probability Purposive sampling technique was adopted to select the samples for the study. The study variable includes eating attitude whereas the demographic variables includes age, gender, type of family, dietary pattern, religion, Mothers education and family monthly income. 5 point rating scale was used to assess the eating attitude among adolescents. The reliability of the tools was established by split half method for eating attitude scale. The results of the study revealed that 84.4% of the adolescents reported good eating attitude, none of them reported poor and very poor eating attitude. No significant association was observed between the eating attitude and the demographic variables of adolescents. The study concluded that adolescents have good eating attitude and are more sentient about their health and importance of taking proper nutrition.

KEY WORDS: *Adolescents, Eating attitude, Eating disorder, Nutrition.***K.SILAMBUSELVI***SRM College Of Nursing, SRM University, Kattankulathur,
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INTRODUCTION

An eating pattern represents the summation of what individuals habitually eat and drink, and these dietary components act synchronously, in relation to health.. Adolescence is a transition period during which individuals gradually take over the responsibility for their own eating habits .The physical, cognitive, social, and lifestyle changes during adolescence create profound changes in their eating patterns. Adolescents frequently develop eating disorders and have major public health impact.¹ Data's shows that 95% of those with eating disorders are between the ages of 12 and 25 (SAMHSA).Eating patterns and behaviors of adolescents are influenced by many factors, including peer influences, parental modeling, food availability, food preferences, cost, convenience, personal and cultural beliefs, mass media, and body image.² The most common eating disorders among adolescents are anorexia, bulimia and binge-eating disorder. Eating disorders are serious and potentially life-threatening mental illnesses. Many people with an eating disorder do not realize they have a problem. Adolescents with eating disorder have high risk to develop consequences, such as anxiety disorder, cardiovascular symptoms, chronic fatigue and pain, depressive disorder, limitation in activity related to poor health, infectious diseases, insomnia, neurological symptoms, and suicidal attempts in their early adulthood³. Adolescent nutrition predicts the nutrition status of adults and offers an important window of opportunity to prevent the risk factors for diet-related non-communicable diseases, which can be tracked later into adulthood.⁴ Screening for eating disorders is based on the assumption that early identification can lead to earlier treatment, thereby reducing serious physical and psychological complications or even death. Eating attitude test has been extremely effective in screening for anorexia nervosa in many populations.⁵ Early diagnosis and primary prevention of eating disorders, by improving self-esteem, body image and empowerment of eating attitudes can be an important solution .⁶ So this study was done to assess the eating attitude of college students.

MATERIALS AND METHODS

The study was conducted in SRM College of Nursing

,Kattankulathur . Sample consisted of adolescents who were studying B.sc .Nursing in SRM College of Nursing. Non-probability Purposive sampling technique was adopted to select the samples. The sample size for the present study was 160 and there was no dropouts. Descriptive cross sectional design and Quantitative approach was adopted in this study. Adolescents studying in SRM College of nursing and willing to participate in the study was considered as inclusion criteria and adolescents who are not cooperative were excluded from the study. The variables studied are study variable and demographic variables. The study variable is eating attitude whereas the demographic variables includes age, gender, type of family, dietary pattern, religion, Mothers education and family monthly income. The tool used for the data collection comprises of 2 sections. **Section A-** Structured questionnaire to elicit the demographic data of adolescents. **Section B-** 5 point rating scale to assess the eating attitude among adolescents. The reliability of the tools was established by split half method for eating attitude scale. The r value was 0.80 .

Ethical considerations

The study was approved by the dissertation committee of SRM College of Nursing, SRM University, Kattankulathur, Kancheepuram District. Permission was obtained from the Vice Principal, SRM College of Nursing and informed consent was obtained from each participant for the study before starting data collection. Assurance was given to the subjects that anonymity of each individual would be maintained and they are free to withdraw from the study at any time. The investigator explained the objectives and methods of data collection. Data collection was done within the given period of 2 weeks. The data collection was done during the day time. Self-introduction about the researcher and details about the study was explained to the samples and their consent was obtained. Eating attitude was assessed among adolescents by using the 5 point rating scale. The confidentiality about the data and finding were assured to the participants. Statistical analysis was performed using SPSS software version 16. Statistical analysis was performed using SPSS software version 16.p<0.05 was considered to be statistically significant.

RESULTS

Table 1
Frequency and percentage distribution of demographic variables of adolescents N=160

Demographic variables	Category	Frequency	Percentage
Age	17-18 Years	40	25.0
	19-20 Years	81	50.6
	> 20 Years	39	24.4
Gender	Male	5	3.1
	Female	155	96.9
Type of Family	Nuclear Family	137	85.6
	Joint Family	21	13.1
	Extended Family	2	1.3
Dietary Pattern	Vegetarian	15	9.4
	Non Vegetarian	145	90.6
Religion	Hindu	126	78.8
	Muslim	7	4.3
	Christian	25	15.6
	Others	2	1.3
Mother's Education	Illiterate	17	10.6
	Primary School Certificate	41	25.6
	Middle School Certificate	42	26.3
	High School Certificate	36	22.5
	Intermediate Or Post High School Diploma	5	3.1
	Graduate Or Post Graduate	19	11.9
Family Income per month	Rs 1590-4726	21	13.1
	Rs 4727-7877	34	21.2
	Rs 7878-11876	22	13.8
	Rs11817-15753	45	28.1
	Rs 15754-31506	16	10.0
	Rs >31,507	22	13.8

Table 1. reveals that majority of the adolescent girls 81(50.6%) were in the age group of 19-20 years , 155(96.9%) adolescents were females. Majority 137(85.6%) of the samples belong to Nuclear family and 145(90.6%) were Non vegetarians. Majority of the adolescents were Hindus. Considering education majority of their mothers educational status were primary and middle school level. Majority (45(28.1%)) samples family monthly income was between Rs.11817/- and 1575/-.

Table 2
Assessment of eating attitude among adolescents

Eating attitude	Frequency	Percentage
Very Poor Eating Attitude	0	0
Poor Eating Attitude	0	0
Moderate Eating Attitude	14	8.7
Good Eating Attitude	135	84.4
Very Good Eating Attitude	11	6.9

Table 2 shows that maximum adolescents 135(84.4%) reported good eating attitude and 11(6.9%) were having very good eating attitude and none of them reported poor and very poor eating attitude.

Graph 1
Levels of eating attitude among adolescents

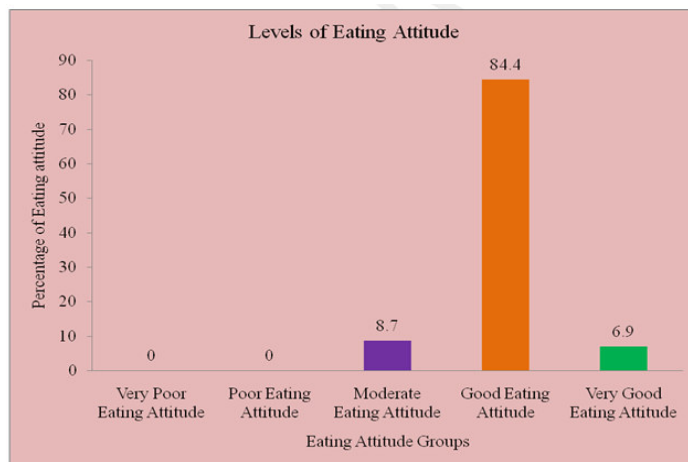


Table 3
Eating attitude among adolescents with their demographic variables

Demographic variables		Eating attitude				Chi Square Value	P Value
		Moderate Eating Attitude N (%)	Good Eating Attitude N (%)	Very Good Eating Attitude N (%)	Total N (%)		
Age	17-18 Years	4(28.6)	31(23.0)	5(45.5)	40(25.0)	3.123 Df = 4	0.537 NS
	19-20 Years	6(42.8)	71(52.6)	4(36.3)	81(50.6)		
	> 20 Years	4(28.6)	33(24.4)	2(18.2)	39(24.4)		
Gender	Male	0(0)	4(3.0)	1(9.1)	5(3.1)	1.757 Df = 2	0.415 NS
	Female	14(100)	131(97.0)	10(90.9)	155(96.9)		
Type of Family	Nuclear Family	11(78.6)	115(85.2)	11(100)	137(85.6)	2.904 Df = 4	0.574 NS
	Joint Family	3(21.4)	18(13.3)	0(0)	21(13.1)		
	Extended Family	0(0)	2(1.5)	0(0)	2(1.3)		
Dietary Pattern	Vegetarian	1(7.1)	14(10.4)	0(0)	15(9.4)	1.377 Df = 2	0.502 NS
	Non Vegetarian	13(92.9)	121(89.6)	11(100)	145(90.6)		
Religion	Hindu	10(71.4)	108(80.0)	8(72.7)	126(78.8)	5.334 Df = 6	0.502 NS
	Muslim	2(14.3)	5(3.7)	0(0)	7(4.4)		
	Christian	2(14.3)	20(14.8)	3(27.3)	25(15.6)		
	Others	0(0)	2(1.5)	0(0)	2(1.3)		
Mother's Education	Illiterate	2(14.3)	14(10.4)	1(9.1)	17(10.6)	11.864 Df = 10	0.294 NS
	Primary School Certificate	3(21.4)	38(28.1)	0(0)	41(25.6)		
	Middle School Certificate	5(35.7)	35(25.9)	2(18.2)	42(26.3)		
	High School Certificate	1(7.1)	30(22.2)	5(45.5)	36(22.5)		
	Intermediate Or Post High School Diploma	1(7.1)	4(3.0)	0(0)	5(3.1)		
	Graduate Or Post Graduate	2(14.3)	14(10.4)	3(27.3)	19(11.9)		
Income	Rs 1590-4726	7(50.0)	38(28.1)	0(0)	45(28.1)	16.884 Df = 10	0.077 NS
	Rs 4727-7877	3(21.4)	30(22.2)	1(9.1)	34(21.3)		
	Rs 7878-11876	1(7.1)	20(14.8)	1(9.1)	22(13.8)		
	Rs11817-15753	2(14.3)	17(12.6)	2(18.2)	21(13.1)		
	Rs 15754-31506	1(7.1)	12(8.9)	3(27.3)	16(10.0)		
	Rs >31,507	0(0)	18(13.3)	4(36.4)	22(13.8)		

P<0.05 is considered to be statistically significant

The above table depicts that there was no significant association between Eating attitude and their Demographic variables.

DISCUSSION

Eating behaviour is now a days marginally normal in the case of individuals not suffering from any Eating disorder.^{7,8} Gender-related differences used to be more extreme in females, who exhibited eating disorders more often than males and it has been found that Eating disorders usually originate in adolescence.^{9,10} The results of this study shows that maximum adolescents 135(84.4%) have good eating attitude and 11(6.9%) (Table 2) were having very good eating attitude and none of them reported poor and very poor eating attitude. Majority of the adolescents 81(50.6%) were in the age group of 19-20 years and 155 (96.9%) adolescents were females. Majority 137(85.6%) of them belong to Nuclear family and 145(90.6%) samples were Non vegetarians. Majority of the adolescents were Hindus. Considering education majority of their mothers educational status were primary and middle school level. Majority (45(28.1%)) samples family monthly income was between Rs.11817/- and Rs.1575/- (Table 1). Results of this study also shows that there was no significant association between Eating attitude and the Demographic variables of adolescents (Table 3). The study is in consistent with study done by Alvarenga Mdos S et al 2012.¹¹ They compared eating attitudes of university students from different regions of Brazil and investigated possible associations and correlations with nutritional status, age, individual income and parental education. 2489 female university students in the area of health answered the Eating Attitude Scale--evaluated by total score and 5 sub-scores. The eating attitudes were compared by means of an analysis of covariance. A logistic regression was conducted to evaluate which

variables were associated to the scale score. The Northeast presented more restrictive and compensatory practices and the North and Northeast presented less positive feelings about food and worse ideas about normal eating. The score on the scale did not present strong correlation with any of the variables studied, but nutritional status and age were associated with the total score. Similar results was observed in the study conducted by Bahram Pourghassem Gargari, et al 2011.¹² In their cross-sectional study, 1887 high school girls were selected. Eating Attitude Test-26 and socio economical questionnaires were used. Statistical association was found between eating attitude and region of residence at $p<0.05$ level, where as there was no statistical association found with the other remaining variables.

CONCLUSION

The study concluded that 84.4% of the adolescents reported good eating attitude, none of them reported poor and very poor eating attitude. No significant association was observed between eating attitude and the demographic variables of adolescents. The results of the study shows that adolescents have good eating attitude and are more aware about the importance of taking proper nutrition. Healthy eating and regular exercise helps adolescents to prevent progression to an eating disorder.

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CONFLICT OF INTEREST

Conflict of interest declared none.

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