

## A COMPRESSION OF EATING DISORDERS BETWEEN FEMALE ATHLETES AND NON ATHLETES OF G.G.V BILASPUR



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### Short Profile

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### ABSTRACT:

The purpose of the present study was to compare eating disorders between female athletes and non-athletes of Guru Ghasidas Vishwavidyalaya, Bilaspur, C.G. The subjects for this study (N=50) female were 25 each from athletes and non-athletes of Guru Ghasidas Vishwavidyalaya, Bilaspur, Chhattisgarh. The age of the subjects were ranging from 18-26 years. For the acquisition of Eating Attitude Test (EAT-26) questionnaire developed by Garner D.M. et.al

(1982) was used. The independent 't' test was used to analyze data. Results indicated that there is significant difference between female athletes and non-athletes.

### KEYWORDS

*Eating disorder, Anorexia nervosa, Bulimia nervosa, Athletes, Non-Athletes.*

## INTRODUCTION:

Eating disorders are psychological disorders characterized by severe disturbances in eating behaviour. Eating disorders are serious, but treatable illnesses with medical and psychiatric aspects. The eating disorders most commonly known to the public are anorexia and bulimia. There are also other eating disorders, such as binge eating disorder. Some eating disorders combine elements of several diagnostic classifications and are known as "eating disorder not otherwise specified." Eating disorders are a mental illness and have little to do with food, eating, appearance, or beauty. This is indicated by the continuation of the illness long after a person has reached his or her initial 'target' weight. Eating disorders often coexist with a mental illness such as depression, anxiety, or obsessive-compulsive disorder. People with an eating disorder typically become obsessed with food, body image, and weight. The disorders can become very serious, chronic, and sometimes even life-threatening if not recognized and treated appropriately. Eating disorders occur mainly in adolescent and adult females, especially in female athletes, female students, fashion models. Although a vast body of research on eating disorders exists, many studies show major methodological limitations such as lacking a prospective design and control groups.

In 1873, Sir William Gull was first time introduced the term "anorexia nervosa" in the medical literature (Gull, 1873). Anorexia nervosa is primarily psychiatric disorders characterized by severe disturbances of eating behaviour. While anorexia mostly affects girls and women (85 - 95 percent of anorexics are female), it can also affect boys and men. It was once thought that women of colour were shielded from eating disorders by their cultures, which tend to be more accepting of different body sizes. Eating disorders are most prevalent in the Western cultures where food is in abundance and for females attractiveness is equated with thinness.

Bulimia nervosa was initially described as distinct from anorexia nervosa by Russell in 1983. Since that time, Bulimia Nervosa has emerged as an important diagnostic entity with well-recognized medical, psychological, and social comorbidities and complications. Much is now known about its associated features, complications, and course. Risk factors and appropriate treatments are also increasingly well understood.

## METHODOLOGY

### Selection of Subjects

For the purpose of present study fifty female subjects (25 athletes and 25 non- athletes) from Guru Ghasidas Vishwavidyalaya, Bilaspur were selected randomly as the subjects for the study. The age of the subjects were ranging from 18 – 25 years.

### Tool Used

The criterion measure chosen to test the hypothesis was the scores obtain in Eating Attitude Test (EAT-26) questionnaire developed by Garner D.M. et.al. (1982) was used to check eating attitude level between female athletes and non- athletes.

## Administration of Test

The eating attitude questionnaire was distributed to subjects. Subjects were oriented and explained regarding the purpose and the procedure of the questionnaire. Eating Attitude Test (EAT-26) developed by Garner D.M. et al (1982) was used to check eating attitude level between female athletes and non- athletes. In this questionnaire there were 26 questions and subjects were asked to give their response by choosing one option out of six via; "Always", "Usually", "Often", "Sometimes", "Rarely", "Never". By using the scoring key, scores were obtained for each subject.

## Scoring of EAT-26

Eating Attitude Test (EAT-26) developed by Garner D.M. et al (1982) consists of total 26 statements. Scores obtained for each statement was added up which represent an individual's total score on Eating Attitude Test (EAT-26). Then the EAT-26 score was analysed.

Table 1: Eating Attitude Test-26 Score

EAT-26 Score	Scoring System for the EAT-26					
	Always	Usually	Often	Sometimes	Rarely	Never
Score for questions 1-25	3	2	1	0	0	0
Score for question 26	0	0	0	1	2	3

## Statistical Analysis

Descriptive Statistic, Mean, Standard Deviation, Standard Error and Independent t-test was applied to compare the degree of Eating Attitude level between female athletes and non- athletes. The level of Significance was set at 0.05.

## RESULTS AND FINDINGS

The scores were obtained by using the key developed by Garner D.M. et.al (1982). All the individual EAT-26 score was used to judge the level of eating disorder.

Table 2: The Comparative and descriptive table of female athletes and non- athletes in relation to Eating Attitude

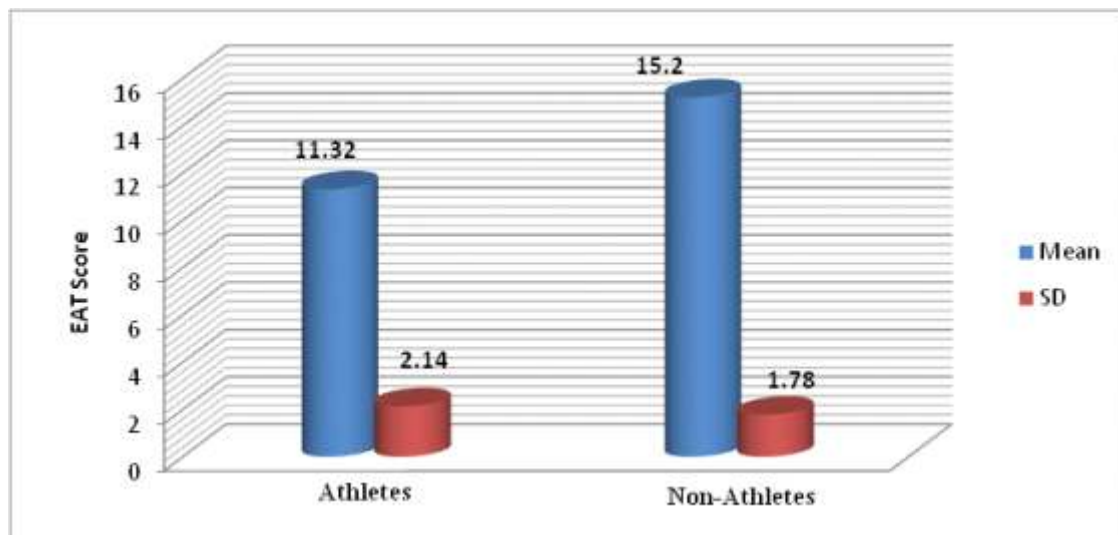
Groups	N	Mean	SD	S.E	t-value
<b>Athletes</b>	<b>25</b>	<b>11.32</b>	<b>2.14</b>	<b>0.4270</b>	<b>7.9132*</b>
<b>Non-Athletes</b>	<b>25</b>	<b>15.20</b>	<b>1.78</b>	<b>0.3559</b>	

\*Significant at 0.05 level, t-value at 48df =2.00

Table 2 shows the comparison of eating disorders between female athletes and non- athletes that participating in any physical or sports activities. The mean value of female athletes was found to be 11.32 and female non- athletes was found to be 15.20. Standard deviation of female athletes was found to be 2.14 and female non- athletes was found to be 1.78. The t-value testing the significance of mean

difference came out to be 7.9132, which is significant at 0.05 level according to the table value. Hence it may be interpreted that eating disorders in female athletes is significantly lower in than female non-athletes who never participate in any physical or sports activities. So, the hypothesis which states that there will be a significant difference of eating disorders in the mentioned two groups is accepted.

Fig. 1: Graphical representation of Mean and SD of female athletes and non-athletes in relation to Eating Attitude



## DISCUSSION OF THE FINDINGS

The result of the study showed that athletes who were participating on a regular basis in sports activities were less eating disorder as comparison to non-athletes who had never participating any type of sports activities. The t value testing the significance of mean difference revealed that eating disorders in athletes who participating in different sports activities were significantly lower than non-athletes who never participating in any sports activities. Those subjects who had secured more than 20 points in Eating Attitude Test (EAT-26) developed by Garner D.M. et. al. (1982) which indicate that they seek some expert advice from doctor or psychiatrist. Result of this study agrees with the studies of Taub, et. al. (1992), Sands, et al (1997), McDonald, K. and Thompson, J.K. (1992) that problem of eating attitude among adolescent is complicated and there are no easy solutions.

## CONCLUSION

The following conclusions were drawn on the basis of the analysis of the present data:

1. Significant difference was found between the female athletes and Non-athletes of Guru Ghasidas Vishwavidyalaya, Bilaspur, Chhattisgarh in relation to Eating Attitude.
2. Female athletes were having lower Eating Disorders level than female Non-athletes.

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