



Study To Assess The Prevalence Of Eating Problems Among Adolescent Girls From Selected Junior Colleges

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Abstract

Introduction: Adolescence is a transformative stage marked by physical, psychological, and social changes, often accompanied by challenges like eating problems. These issues significantly impact the overall well-being of adolescents.

Aim: This study assesses the prevalence of eating problems among adolescent girls from selected junior colleges and examines associations with demographic variables.

Methodology: A quantitative, descriptive research design was employed, involving 1,000 adolescent girls selected through convenient sampling. Data were collected using a demographic questionnaire (Part I) and the EAT-26 standardized screening tool (Part II) with reliability ranging from 0.84-0.89.

Results: Findings indicate a prevalence rate of eating problems at 35.8%, with 65% in the low severity category, 6.6% in moderate, and 28.4% experiencing severe problems. Statistical analysis revealed significant associations between eating problems and demographic variables, including age, weight, height, and BMI. Girls aged 16 years, with low weight (33-42 kg), and severe/mild thinness BMI categories exhibited higher risk levels.

Conclusion: The study highlights the substantial prevalence of eating problems among adolescent girls and the significant influence of demographic factors. Targeted interventions and further research are essential to mitigate these challenges and promote healthier adolescent development.

Introduction

Adolescence is a critical period marked by significant physical, psychological, and social changes. Among these, eating problems are a major concern that can affect the overall well-being of adolescents. This study aims to assess the prevalence of eating problems among adolescent girls from selected junior colleges.

Problem Statement

"Study to assess the prevalence of eating problems among adolescent girls from selected junior colleges."

Research Objectives

- To assess the prevalence of eating problems among adolescent girls.
- To associate the findings with selected demographic variables.

RESEARCH METHODOLOGY

Research Approach: Quantitative approach

Research Design: Descriptive design

Study setting: Selected junior colleges

Population: adolescent girls from selected junior colleges.

Sample: Adolescent girls who meet the screening criteria

Sampling technique: Convenient sampling

Sample size: 1000

TOOL

PART 1- Demographic variables

PART II

- EAT-26-Standardized screening tool for eating behaviors and food attitude. Reliability-0.84-0.89 for anorexia nervosa group.

Operational Definition

1. Eating problems-

These are the intentional avoidance of food due to emotions of negative self-image, feeling low mood, fear of weight gain, and low self-esteem present among adolescent girls.



2. The Adolescent girls

Girls who are 16-17 years of age.

Results

Section I - Prevalence of Eating Problems

Prevalence = Number of people in the samples with the characteristic of the interest / Total Number of people in the sample.

Prevalence = 358 /1000. (35.8%)

Section II - Demographic Data of Participants

SECTION I - Assess the prevalence of eating problems among adolescent girls of all 1000.

Table no.1 N=1000

Demographic Variables	F	%
1.Age		
a.16 Years	314	31.40
b. 17 years	196	19.60
c. 18 years	490	49.00
2. Weight		
a. 33 - 42 kg	425	42.50
b. 42.1 - 51 kg	219	21.90
c. 51.1 - 60 kg	336	33.60
d. 60.1- 69.1 kg	20	2.00
3. Height		
a. 133- 140 cm	61	6.10
b. 141 -148 cm	319	31.90
c. 149- 156 cm	492	49.20
d. 157-164cm	128	12.80
4. BMI		
a. Severe thinness (<16)	163	16.30
b. Mild (16-17.9)	187	18.70
c. Normal (18- 25)	463	46.30
d. Overweight (25.1-30)	174	17.40
e. Obese I (30.1-35)	13	1.30

The demographic data reveals that the participants' ages were distributed as follows: 31.40% were 16 years old, 19.60% were 17 years old, and the majority, 49.00%, were 18 years old. In terms of weight, 42.50% fell within the 33–42 kg range, followed by 21.90% in the 42.1–51 kg category, 33.60% in the 51.1–60 kg range, and a small proportion, 2.00%, in the 60.1–69.1 kg group. Height distribution showed that 6.10% of participants were between 133–140 cm, 31.90% were 141–148 cm, 49.20% were 149–156 cm, and 12.80% measured between 157–164 cm. Regarding BMI, 16.30% were classified as having severe thinness (BMI <16), 18.70% were mildly thin (BMI 16–17.9), 46.30% had a normal BMI (18–25), 17.40% were overweight (BMI 25.1–30), and 1.30% were classified as obese class I (BMI 30.1–35). This data provides a comprehensive overview of the participants' physical characteristics.



Section III – Eating Problems

SECTION IB – Data related to eating problems among adolescent girls.

LEVEL SEVERITY OF EATING PROBLEMS	F	%	Mean	SD
LOW (0 - 26)	650	65	31.46	15.98
MODERATE (27-52)	66	6.6		
SEVERE (53-78)	284	28.4		

The analysis of the level of severity of eating problems among participants reveals distinct patterns across three categories: low, moderate, and severe. Most participants, 65% (650 individuals), fall into the low level of severity eating problems category, with scores ranging from 0–26. This group has a mean score of 31.46 and a standard deviation of 15.98, indicating some variability within this category. The predominance of low scores suggests that most participants experience minimal eating problems. In contrast, only 6.6% of participants (66 individuals) are classified in the moderate category, with scores ranging from 27–52, suggesting that few individuals exhibit moderate symptoms. However, 28.4% of participants (284 individuals) are in a severe category, with scores between 53–78, representing a significant portion of the population facing intense emotional dysregulation due to eating problems.

Table no 3: Find

Demographic Variables	Selected	Not Selected	Chi square value	p- value	Result
1.Age	F	F			
a.16 Years	121	193	8.297	0.016	significant
b. 17 years	79	117			
c. 18 years	150	340			
2. Weight					
a. 33 - 42 kg	346	79	580.854	0.00001	significant
b. 42.1 - 51 kg	04	215			
c. 51.1 - 60 kg	0	336			
d. 60.1- 69.1 kg	0	20			
3. Height					
a. 133- 140 cm	0	61	105.183	0.00001	significant
b. 141 -148 cm	67	252			
c. 149- 156 cm	196	296			
d. 157-164cm	87	41			
4. BMI					
a. Severe thinness (<16)	163	0	545	0.0001	significant
b. Mild (16-17.9)	187	0			
c. Normal (18- 25)	0	463			
d. Overweight (25.1-30)	0	174			
e. Obese I (30.1-35)	0	13			

the association with demographic variables

The table presents the findings from Chi-square tests examining the relationship between various demographic factors and the prevalence of eating problems among adolescent girls.

Age: The Chi-square value for age is 8.297 with a p-value of 0.016, indicating a statistically significant relationship between age and the likelihood of experiencing eating problems. Specifically, 16-year-olds (121



selected, 193 not selected) are more likely to face eating issues compared to those in the 17- and 18-year-old age groups.

Weight: The Chi-square value for weight is 580.854 with a p-value of 0.00001, which is highly significant. This suggests a strong correlation between weight and eating problems. Adolescent girls with a weight between 33-42 kg (346 selected, 79 not selected) are at a significantly higher risk of developing eating disorders, underlining the importance of weight as a key factor in the prevalence of such issues.

Height: The Chi-square value for height is 105.183 with a p-value of 0.00001, also indicating a significant association. Girls in the height ranges of 133-140 cm and 157-164 cm (combined 67 selected, 252 not selected for 141-148 cm) are more likely to be selected for eating problems. This may reflect body image concerns related to their physical development during these particular height stages.

BMI: The Chi-square value for BMI is 545 with a p-value of 0.0001, which is statistically significant. The results reveal a strong connection between BMI and the prevalence of eating problems, especially among girls in the severe thinness and mild thinness categories (163 and 187 selected, respectively). The absence of girls in the normal and overweight BMI categories in the selected group further emphasizes the association between low BMI and eating issues.

In summary, the analysis indicates that age, weight, height, and BMI are all significantly related to the prevalence of eating problems among adolescent girls. Girls who are younger (16 years old), have lower weight and BMI (severe and mild thinness), and belong to certain height categories are at a greater risk of developing eating disorders.

Discussion

The study reveals a significant prevalence of eating problems among adolescent girls, with considerable variations in demographic characteristics. The analysis of eating problems levels highlights the need for targeted interventions to address severe emotional dysregulation.

Conclusion

The study provides valuable insights into the prevalence of eating problems among adolescent girls from selected junior colleges. Further research is recommended to explore effective interventions and support mechanisms for addressing these issues.