The analysis of variables predicting eating habits of university students

Ali Çekiç, Eyyüp Özkamali, Ahmet Buğa

Gaziantep University, Turkey

Abstract

In recent years, obesity has become widespread in many countries, and individuals come face to face with various psychopathological problems because of eating habits. At this point, researches investigating the solution of problems about obesity and eating habits focus on environmental and individual factors that affect eating habits and the reasons affecting the eating habits and obesity. The aim of this study is to determine the variables predicting the eating habits of university students, and investigate the relationship between the demographic variables and eating habits. This study was carried out among 291 university students (141 females, 150 males). Research data has been obtained by Rosenberg Self-Esteem Scale (RSES), Life Satisfaction Scale, Multidimensional Scale of Perceived Social Support Scale and Social Emotional Loneliness Scale. Correlation and logistic regression were used to analyze the data. Although there is no significant relationship between Eating Attitudes Test scores and dating relationship within the last year and gender, perceived parental attitudes and body mass index have significant relationship. As a result of the logistic regression analysis, according to the Life Satisfaction Scale (p<.01) being in high or low group based on the Eating Attitude Test scores, there is a significant relationship between the lower dimension of "social support from a friend (p<.05) or a special one (p<.05)" of Multidimensional Scale of Perceived Social Support Scale and the lower dimension of "emotional loneliness in romantic relationships" (p<.05) of Social Emotional Loneliness Scale. The findings show that there is a significant relationship between students' perceptions of parental attitudes and body mass index. In addition, life satisfaction, social support from a friend or a special one with the emotional loneliness in romantic relationships give some clues for determining the problems of university students' eating habits. For the corrective and preventive studies on eating problems, programs can be developed conducted to the attitudes of parents. To strengthen the social support of a friend or a special friend and to reduce the emotional loneliness in romantic relationships may be helpful for the treatment of students' eating disorders.

1. Introduction

According to the World Health Organization, in the last fifty years there has been a noticeable increase in eating disorders. To give an example, in the USA anorexia nervosa is the third most common health problem among female adolescence. (WHO, 8 May, 2011). In Turkey, the current state is most common among female adolescence aged between 12-18. (Kocabaşoğlu, 2011). Furthermore, according to the World Health Organization obese population doubled. According to the 2008 parameter, %10 of males and %14 of females were obese between 1980-2008. This rate was higher in developed countries. For example, in the USA and Europe, 50% of total population

Corresponding Author: Ali Çekiç Tel: 0212355554
E-mail: elicekic@gmail.com
were obese and excessively overweight. (WHO, 2012). In Turkey, according to the Ministry of Health, obese rate is 21.2% for males and 41.5% for females (Ministry of Health, November, 2012). This rate is above the world average.

The studies held previously indicated that eating disorders were related to other psychiatric disorders (Hantaş, 2003; Sart, 2008; Erol & Friends, 2002) and obesity (Hadjigeorgiou and friends, 2012; Goldschmidt and friends, 2008). In the present study, different variables which influenced eating habits and power of regression were studied.

2. Methods

The aim of this study was to investigate the relationship between eating habits and family, perceived social support from friends or a special person, social and emotional loneliness, self-respect and life satisfaction and other demographic variables.

3. Findings and results

First of all, the relationship between demographic variables and eating attitude test scores was investigated. There was a significant difference between eating attitude test scores and gender and dating relationship in the last year. In addition, there was a significant difference in eating attitude test scores in terms of university students’ perception of family attitudes which were democratic, authoritarian, and irrelevant. To find out for which group this difference was favorable, the Scheffe’s test was performed. According to the Scheffe’s test scores, it was found that eating attitude test scores were higher for authoritarian family attitudes than democratic and irrelevant family attitudes. There was a negative significant relationship between body mass index and eating attitude test scores for university students.

To establish the power of regression of university students’ Multidimensional Scale of Perceived Social Support, Social and Emotional Loneliness Scale, Rosenberg Self-Esteem Scale and Life Satisfaction Scale scores for low and high Eating Attitude Test Scores logistic regression analysis was performed. According to eating attitude test scores, in order to determine low and high groups, 0.5 standard deviation values of the median of scores which were got on the scale were identified as the cut-points.

Table 1: Logistic regression analysis results related to how scores got from university students’ self-esteem, life satisfaction, sub-scales of multidimensional scale of perceived social support, social and emotional loneliness scale predict eating attitudes

| Variable               | Beta  | Std Error | Wald  | Sd   | P     | Exp(β) |
|------------------------|-------|-----------|-------|------|-------|--------|
| Self-Esteem            | -.048 | .044      | 1.176 | 1    | .278  | .953   |
| Life Satisfaction      | .106  | .037      | 8.051 | 1    | .005**| 1.112  |
| MSPSS-Family           | -.013 | .046      | .078  | 1    | .780  | .987   |
| MSPSS-Friend           | .124  | .053      | 5.575 | 1    | .018* | 1.132  |
| MSPSS-Special          | -.069 | .034      | 4.068 | 1    | .044* | .933   |
| SELSA-Emotive(Family)  | -.021 | .036      | .338  | 1    | .561  | .979   |
| SELSA-Emotive(Romance) | .064  | .030      | 4.608 | 1    | .032* | 1.066  |
As a result of logistic regression analysis, it was revealed that the model which covered all independent variables according to the beginning model predicted grouping of low and high eating attitude scores better. The model which covered all predictive variables accounted for 17% of eating attitudes. According to the Hosmer and Lemeshow’s logistic regression model, data obtained from eating attitude test model were satisfactory. As a result of analysis of the test model, it was found that the model classified 17 out of 48 students with low eating attitude test scores and 72 out of 85 students with high eating attitude test scores correctly.

Another test model for the logistic regression analysis is Walt Statistics which is to investigate every variable’s contribution to the model. At the end of the analysis model, according to the eating attitude test scores which groups had low and high scores were determined by Life Satisfaction, Multidimensional Scale of Perceived Social Support’s “Perceived Friends Social Support” and “Perceived Special Person Social Support” and “Emotional Loneliness In Dating Relationship” sub-dimensions of social and emotional loneliness scales.

4. Conclusions and recommendations

According to the findings, there was a significant relationship between students’ perception of parent attitudes and body mass index. In addition, Life Satisfaction, Perceived Friends Social Support and Perceived Special Person Social Support, and Emotional Loneliness in Dating Relationship predicted eating problems of university students. The most predictive variable for eating attitudes was life satisfaction. In other words, individuals’ eating attitudes which were pathological or normal have an important effect on their life satisfaction.

A lot of studies suggested that there was a significant relationship between eating attitudes and mental health. For instance, Gargari and friends (2010) in their study with women who were going to the fitness center found that predicting variables of pathological eating attitudes were high anxiety of social physical appearance and low self-esteem. Goldschmidt and friends (2008) in their study mentioned that eating disorder and pathological behaviors were more common in adolescence, and overweight adolescents have more risk factors than other adolescents. Also, Eker (2006), in his study found that adolescents who had eating disorders were more vulnerable to self-destruction and suicide.

Previous studies suggested that there was a relationship between eating attitudes, high obesity and psychological health of individuals. Therefore, studies on the individuals with eating disorders and individuals’ psychological health must be supported and protected. In future research on eating problems with therapeutic and constructive variables, programs can be performed for the parent attitudes. In treatment of the eating disorders of students; perceived social support from friends and special people can be supported, and helping behaviors to decrease the emotional loneliness in dating relationship can be taught to students. Thus, individuals can learn solution techniques for different problems derived from obesity and eating disorders.

References

Çeçen, A.R. (2007). The Turkish Short Version of The Social and Emotional Loneliness Scale for Adults (SELSA-S): Initial Development and Validation. School Behavior and Personality, 35(6), 717-734.
Çuhadaroğlu, F. (1986). Self-esteem in Adolescence. Unpublished Master’s Thesis. Department of Psychiatry. Ankara University, Ankara.
Eker, E. (2006). An evaluation of eating attitudes of adolescents studying at secondary schools in Istanbul in 2005 and a comparison of their behaviors regarding self-destruction and suicide. Unpublished Master’s Thesis. Graduate School of Social Sciences. Istanbul University, Istanbul.
Erol, A., Toprak, G., & Yazeici, F. (2002). Predicting factors of eating disorders general psychological symptoms in female college students. *Turkish Journal of Psychiatry, 3*(1), 48-57.
Gargari, B. P., Khadem-Hagnighian, M., Taklifi, E., Hamed-Bezhad, M. & Shahraki, M. (2010). Eating attitudes, self-esteem and social physique anxiety among Iranian females who participate in fitness programs. *Journal of Sports Medicine and Physical Fitness. 50*(1), 79-84.

Goldschmidt, A. B., Aspen, V. P., Sinton, M. M., Tunoisky-Kraff, M., & Wilfley, D. E. (2008). Disordered Eating Attitudes and Behaviors in Overweight Youth. *Obesity. 16*(2).

Eker, D., Arkar, H., & Yaldız, H. (2001). Factorial Structure, Validity, and Reliability of Revised Form of the Multidimensional Scale of Perceived Social Support. *Türk Psikiyatri Dergisi 12*(1), 17-25.

Hadjigeorgiou, C., Tornaritis, M., Savvas, S., Solea A., & Kafatos A. (2012). Obesity and Psychological Traits Associated with Eating Disorders Among Cypriot Adolescents: Comparison of 2003 and 2010 Cohorts. *Eastern Mediterranean Health Journal, 18*(8).

Hantaş, Y., Maner, F., Erkiran, M., Turan, F., & Gökalp, P. (2003). A Review of Eating Attitudes and Eating Disorders of Women Suffering Alcohol-Substance Usage Disorder. *Düşünen Adam, 16*(1), 24-27.

Kocabaşoğlu, N. (2001). Eating disorders. *Yeni Sempozyum Dergisi. 39*(2), 95-99.

Köker, S. (1991). A Comparison of life satisfaction level of normal and abnormal adolescents. Unpublished Master’s Thesis. Graduate School of Social Sciences. Ankara.

Ministry of Health (2012). Retrieved from http://www.beslenme.gov.tr/index.php?lang=tr&page=40

Sart, C. (2008). Predicting University Students’ Eating Attitudes In Terms of Some Variables. Unpublished Master’s Thesis. Graduate School of Social Sciences. Ege University. İzmir.

Savaşır, İ., Erol, N. (1989). Eating attitude test: Anorexia nervosa symptoms index. *Journal of Psychology, 7*, 19-25.

WHO (2011). Retrieved from http://www.who.int/mental_health/evidence/en/prevention_of_mental_disorders_sr.pdf

WHO (2012). World Health Statistics 2012. World Health Organization. France.