

Volume 9, Issue 5, May 2021

International Journal of Advance Research in Computer Science and Management Studies

Research Article / Survey Paper / Case Study

Available online at: www.ijarcsms.com

Bulimia Nervosa: A growing eating problem among adolescents

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(Acknowledge the ICSSR-IMPRESS and MHRD New Delhi)

Abstract: *The adolescents are becoming of more conscious of their body image and wants to look slim ,they have of gaining more weight if they eat more food and generally after eating they do excessive exercise or compel oneself to vomit. This study was undertaken to study this growing problem and tendency among the college students. The sample of 913 students was selected and standardised test was administered. The findings showed that females are having stronger association with Bulimia nervosa than males.*

Keywords: *Bulimia nervosa, adolescents.*

I. BULIMIA NERVOSA

People suffering from bulimia go through episodes of binge-eating, which are followed by purging (forceful vomiting), excessive exercise or use of laxatives and diuretics, or long fasting periods to get rid of the weight gained. They do this because their self-esteem is strongly linked to their feelings of control over food.

Signs of Bulimia Nervosa

People with bulimia nervosa have episodes of eating large amounts of food (called bingeing) followed by purging (vomiting or using laxatives), fasting, or exercising excessively to compensate for the overeating.

Unlike anorexia, people with bulimia are often a normal weight. But they have the same intense fear of gaining weight and distorted body image. They see themselves as “fat” and desperately want to lose weight. Because they often feel ashamed and disgusted with themselves, people with bulimia become very good at hiding the bulimic behaviours.

II. RATIONALE OF THE STUDY

The bulimia nervosa problem is the most common problems among the adolescents and adults .To feel slim and look slim has become a fashion tag for the youth .The problem of self image of looking slim and thin if left untreated, bulimia can result in long-term health problems such as abnormal heart rhythms, bleeding from the oesophagus due to excessive reflux of stomach acid, dental problems, and kidney problems. The study was undertaken to know the percentage of the youth suffering from this eating disorder problem.

III. OBJECTIVES

- 1) To study the problem of Bulimia Nervosa among the girls adolescents.
- 2) To study the problem of Bulimia nervosa among the Boys adolescents.

3) To compare the problem of Bulimia nervosa among the male and female adolescents.

Hypothesis: There is no significant association between male and female for Bulimia nervosa.

IV. RESEARCH METHODOLOGY

The survey method was used for data collection .The data was collected from 13 Junior colleges from Aurangabad city. The EDI-3 Eating Disorder Inventory-3 by **David M. Garner** was administered to a sample of 913 students of junior colleges. The sample consisted of 362 male and 551 females. The test was administered by a trained person individually and the data was collected, tabulated and analysed for further results.

Sampling technique: Random sampling technique was used for data collection

Sample size: 913 junior college students from Aurangabad city.The sample consists of 362 males and 551 females.

Tools: A standardised tool, The EDI-3 Eating Disorder Inventory-3 by **David M. Garner**

Variables: Anorexia nervosa-independent variable

Discussion of Result and Interpretation:

Table-1 Table showing the male and female percentage of adolescents involved in bulimia nervosa:

Bulimia Nervosa Cross Tabulation					
Gender			Bulimia Nervosa		Total
			Low	Moderate	
Male	Count		171	191	362
		% with Bulimia Nervosa	44.9%	34.9%	39.6%
	Female	Count	210	341	551
		% with Bulimia Nervosa	55.1%	64.1%	60.4%
Total	Count		381	532	913
	% with Bulimia nervosa		100%	100%	100%

Hypothesis -1 There is no significant association between male and female for Bulimia Nervosa.

Table -2 Table showing association between Bulimia nervosa of male and female adolescent.

Chi Square Test					
	Value	df	Asymptotic significance (2-sided)	Exact Sig.(2-sided)	Exact sig.(1-sided)
Pearson chi square	7.481 *	1	.006		
Continuity correction	7.111	1	.008		
Likelihood ratio	7.462	1	.006		
Fisher exact test				.007	.004
Linear by linear association	7.473	1	.006		

N of valid cases	913			
a) 0 cells(0.0%) have expected count less than 5.The minimum expected count is 151.06%				
b) Computed for only 2x2 table				

The value of the Chi-Square is 7.481 ($p = .000$) and the Fisher Exact Test exact significance value is .007. Both are being rejected as null hypothesis and concluded that there is a significant association between gender category of the respondents and Bulimia Nervosa among adolescents. Female adolescents have a stronger association with Bulimia Nervosa than male adolescents.

V. FINDINGS

In a total sample of 931 adolescents. The 44.9% of male found to be low and 34.9% with moderate bulimia nervosa problem. Whereas 55.1% females with low and 64.1% found to be with moderate Bulimia nervosa problem. Adolescent with high bulimia nervosa problem is not found in a sample of 931 adolescents.

VI. SUGGESTIONS

- 1) bulimia can be treated successfully through cognitive-behavioral therapy, certain anticonvulsant medicines, antidepressants, or combinations of these therapies. It's important to seek help if you think someone you care about has bulimia.
- 2) Managing compulsive behaviors. Compulsive binge eating may be triggered by a number of different factors. Identifying the trigger issues in each patient and learning how to better handle those problems without resorting to binge eating is another main goal of treatment.
- 3) Daily exercise and yoga can help to maintain a normal BMI level.
- 4) Nutritional counselling by a nutritionist should be taken .
- 5) Avoid eating restaurant food or junk food.
- 6) Avoid taking laxatives.
- 7) Drink more water.

References

1. Khan Zeenat M.(2019).Learning Disability-diagnosis,prognosis and Intervention for Inclusion . Kanishka Publication Daryaganj ,New Delhi 239pp
2. Kothari C.R.(2005) .Research Methodology .New Age International Pvt Ltd publishers New Delhi,491pp.
3. Best John w (2003) .Research in Education. Prentice hall of India pvt ltd New delhi 498pp
4. Gupta K.R.(2016). Statistical Methods in Education and Psychology.Atlantic Publishers and Developers Pvt ltd New delhi.
5. Dr.Valmiki A.Dr.Shirish P.S(2020) . Constructivist Paradigm of teaching Learning Theory and research . Neelkamal Publications pvt ltd hyderabad.
6. Dr.Narayan C.P Panda K.C(2021). Handbook on Intellectual Disability . Neelkamal Publications Pvt ltd Hyderabad.356pp
7. James E.Ysseldyke,Algozzine Bob (2016).Special education . Kanishka Publication Pvt ltd new delhi 1148pp.
8. Smitha Bhandari(2020) Bulimia Nervosa .<https://www.webmd.com/mental-health/eating-disorders/bulimia-nervosa/mental-health-bulimia-nervosa>
9. Goals for bulimia treatment (2018) <https://futuresrecoveryhealthcare.com/blog/4-goals-of-bulimia-treatment/>