

## College Students' Attitudes towards Eating Disorders in Males

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### **Abstract**

*Eating disorders are a prevalent and serious health problem in the United States. Eating disorders are generally associated with young women. However, people are less aware of eating disorders among male; thus, there are fewer studies done on this issue and fewer eating disorder prevention programs for males. This study investigates men's attitudes regarding awareness and knowledge of eating disorders in males by surveying a sample of 28 male students on campus. It was hypothesized that college males would have little knowledge about male eating disorders and less awareness of it being a problem among males. The findings support the hypothesis that college males do not have a clear understanding of male eating disorders.*

### **Introduction**

There are significantly higher rates of suicide attempts, depression, and anxiety among males with eating disorders (Bromon-Bosch, Troop, & Treasure, 2000). However, people are less aware of eating disorders among males and there are less preventive programs for males with eating disorders. According to Eliot and Baker (2001) there is a belief of eating disorders to be a female problem, which leads to misdiagnosis and silence among males who suffer. Although there are findings supporting the prevalence and severity of male eating disorders, American society is still holding to the belief that eating disorders are a female problem and these beliefs need to change. For the purpose of this study, Eating Disorders: "Are characterized by severe disturbances in eating behavior; two specific diagnoses include, Anorexia Nervosa and Bulimia Nervosa" (DSM-IV-TR, 2000). Anorexia Nervosa: "The essential features of Anorexia Nervosa are that the individual refuses to maintain a minimally normal body weight, is intensely afraid of gaining weight, and exhibits a significant disturbance in the perception of the shape or size of his or her body" (DSM-IV-TR, 2000). Bulimia Nervosa: "The essential features of Bulimia Nervosa are binge eating and inappropriate compensatory methods to prevent weight gain" (DSM-IV-TR, 2000).

### **Literature Review**

In researching articles on the attitudes men have towards eating disorders in males, the main theme was that eating disorders in males are just as prevalent as in females. However, in researching the problem, there was little information or studies conducted on male eating disorders and fewer done in the United States. European countries appear to be ahead of the United States in their acceptance of male eating disorders and action that has been taken in providing awareness of this growing problem. International findings concur that males and females suffer similarly from eating disorders and that there is no difference in the degree of

severity (Bromon-Bosch et al., 2000; Eliot & Baker, 2001; Philpott & Sheppard, 1998; Tata, Fox, & Cooper, 2001).

Bromon-Bosch et al. (2000) studied an equal sample of male and female patients in a hospital program for victims of eating disorders to research if there are any gender differences. Overall, the research findings show that there were no differences in the degree of severity between males and females that suffer from eating disorders. Interestingly, males in the study had significantly higher rates of suicidal attempts, depression, and anxiety in comparison to the females. Eliot and Baker (2001) found that the similarity between adolescent females and males suffering from eating disorders was significant. Researchers expressed a need for more information to be provided to males about eating disorders as well as encouraging males to discuss their struggles and thoughts regarding body image and disordered eating. Philpott and Sheppard (1998) conducted a study on adult males who had previously suffered from eating disorders and went through therapy. This study gave men the opportunity to talk freely about their personal struggle and emphasized the need to get rid of stereotypes surrounding eating disorders as well as more focus on an individual approach. Tata et al. (2001) focused their study on gender differences related to excessive exercise, eating disorders, and the difference between the ideal body image projected for males and females. They found an equal pressure for an ideal body type between males and females.

Based on the literature, it appears that eating disorders are just as prevalent and severe in males as in females. One gap in the literature, addressed by our study, is further United States perspectives on understanding the prevalence of male eating disorders and the need for treatment and prevention.

### **Theoretical Framework**

The theory employed in this study is the Family Ecology Theory (Strong, DeVault, & Cohen, 2005) which focuses on how people's environments affect them developmentally, from family environment to the greater cultural environment.

As applied to this study, this theory would predict that men will have little knowledge about male eating disorders and be less aware that it is even a problem among males because society has influenced their perception of an eating disorder as being a female problem. The idea that eating disorders are a female problem may be due in part to how much the media projects an idea of the perfect female body. However, what is overlooked is that men are also bombarded by the media projecting an ideal male body (Vartanian & Giant, 2001).

### **Purpose Statement**

The purpose of this study was to examine the central research question, "What are the attitudes college men have towards eating disorders in males." It was hypothesized that men would agree that there is little knowledge or help for males with eating disorders. This hypothesis was based on findings that eating disorders are a female problem (Eliot & Baker, 2001).

### **Methods**

#### *Participants*

This study took place at a Midwestern university. The participants were 28 male students with varying status, age and majors. Participants included nine freshmen, seven sophomores, six juniors and six seniors; there were no graduate students that participated in this study. The age of

participants ranged from age 18 - 24. The participants were students of a variety of majors including: Eight in General Business Administration, six in Construction, two in Graphic Communications Management, two in Hotel-Restaurant and Tourism Management, one in Applied Science, one in Early Childhood Education, one in Engineering Technology, one in Golf Enterprise Management, one in Graphic Design, one in Industrial Design, one in Information Technology Management, one in Manufacturing Engineering and one in Retail Merchandising and Management.

### *Research Design*

This study could be best described as a non-random probability quota design because we used a location that was convenient and had the limitation of requiring the subjects to be male college students. For convenience, ease of access, and cost, self-administered questionnaires were given to all respondents found in the Student Center. This study design was cross-sectional, collecting data at one point in time.

### *Data Collection Instrument*

The data collection instrument was created by the research team and was approved by the Institutional Review Board (IRB). The survey instrument was preceded by a cover letter stating the following: an introduction of the team doing the research and the program and supervisor of the research, the purpose of the study, definitions of terms important in assisting the participants in completing the survey, instructions for completing the survey, a statement affirming that participation is voluntary and a declaration assuring the confidentiality of all responses, concluding with a statement of appreciation to participants for their involvement.

The survey included three demographic variables: status, age, and major. Eight questions, inspired by the literature and theory, relating to male eating disorders followed. The first question (MED) asked whether society believes males struggle with eating disorders and the second question (MPB) asked whether the media places pressure on males to have the "perfect" male body. The third question (MOT) asked whether males with eating disorders openly talk about it. The fourth question (IPD) asked whether males are impacted physically to the same degree as females. The fifth question (IPSD) asked whether males are impacted psychologically to the same degree as females. The sixth question (ACW) asked whether athletes use eating disorder behavior to control their weight. The seventh question (CAD) follows up the sixth question by asking if coaches are aware of male eating disorders. The eighth question (PHP) asked if there is professional help provided for males with eating disorders. The eight questions were based on a 5-point Likert scale with potential responses: 1 = strongly disagree, 2 = disagree, 3 = undecided, 4 = agree, and 5 = strongly agree. The survey instrument in this study has both face validity and content validity.

### *Procedure*

On March 9, 2006, our research team sat at a table located next to the cafeteria in the Student Center and asked male students if they would be willing to complete a survey. Randomization was not utilized due to time constraints and the need for every willing participant. The 28 surveys administered were completed in the presence of our research team and the surveys placed in a folder.

*Data Analysis Plan*

In an effort to ensure data validity, research was “cleaned” and “coded.” No surveys were found to be missing data. “Cleaned” surveys were then “coded” using acronyms for each variable. The research team created a code book, assigning a name to each variable and a number to each of the potential responses to the questions.

To analyze the data, the computer program Statistical Package for the Social Sciences (SPSS) was employed to analyze the dependent variables. Frequencies were looked at and a reliability analysis run to determine whether or not the survey's variables measured what they were intended to measure.

**Results**

Frequency analysis indicated that there was no missing data.

Table 1

*I am Equipped with the Computer Technology I Need to Work Efficiently in my Classroom*

Variable	SD	D	U	A	SA	Total
MED	39.3%	46.4%	7.1%	7.1%	0.0%	100%
MPB	3.6%	42.9%	32.1%	17.9%	3.6%	100%
MOT	46.4%	35.7%	14.3%	0.0%	3.6%	100%
IPD	28.6%	21.4%	28.6%	17.9%	3.6%	100%
IPSD	14.3%	39.3%	14.3%	28.6%	3.6%	100%
ACW	3.6%	14.3%	17.9%	57.1%	7.1%	100%
CAD	3.6%	28.6%	21.4%	42.9%	3.6%	100%
PHP	10.7%	46.4%	0.0%	25%	17.9%	100%

*Note.* (MED) = Society believes males struggle with eating disorders; (MPB) = The media places pressure on males to have the “perfect” male body; (MOT) = Males with eating disorders openly talk about it; (IPD) = Males are impacted physically to the same degree as females; (IPSD) = Males are impacted psychologically to the same degree as females; (ACW) = Athletes use eating disorder behavior to control their weight; (CAD) = Coaches are aware of male eating disorders; (PHP) = There is professional help for males with eating disorders.

The Chronbach's Alpha reliability analysis was 0.554. This value indicates that the survey questions aren't as a reliable measure of male students' attitudes towards male eating disorders as hoped; however, the Chronbach's Alpha would be 0.641 if the item ACW was deleted.

## **Discussion**

Overall, the results supported the hypothesis that male students agreed there is little knowledge or help available for males with eating disorders. This finding is supported in the literature (Eliot & Baker, 2001). Interestingly, results showed that more respondents disagreed that the media places pressure on males to have the “perfect” male body, in opposition to literature (Giant, Carrie, Vartanian, & Lesa, 2001). A majority of respondents disagreed that males with eating disorders openly talk about it, which supports findings in the literature stating that there is a need for males to be encouraged to talk about it (Eliot & Baker, 2001; Philpott & Sheppard, 1998). Fewer men agreed that males are impacted physically to the same degree as females. The majority disagreed that males are impacted psychologically to the same degree as females. According to Bromon-Bosch et al. (2000), eating disorders are almost more psychologically damaging to males because males have significantly higher rates of suicidal attempts, depression, and anxiety in comparison to females. Concerning the question of athletes using eating disorder behavior to control their weight, the majority agreed. According to Tata et al. (2001) males excessively exercise more than females to control their weight however; this is not always seen as a form of an eating disorder. For the question, “coaches are aware of male eating disorders,” almost half agreed that coaches are aware of male eating disorders. This could relate back to the Family Ecology Theory in that even though coaches may know that male athletes struggle with eating disorders they still may not employ preventive cautions because of the popular belief that eating disorders are primarily a female problem. The final question “there is professional help provided for males with eating disorders” showed that the majority of respondents disagreed that there is professional help provided for males with eating disorders. This was not surprising because according to the literature there is a need for more information to be provided to males about eating disorders (Eliot & Baker, 2001).

### *Limitations*

The small sample size limits the ability to generalize and compare to the larger population male students and to society as well. An additional limitation was the inability to randomize the survey collection due to time constraints and the number of willing participants.

### *Implications for Practitioners*

Results showed that there is a great need to inform society that males struggle with eating disorders. This is something that can be done in health classes, parent teacher meetings, and athletics in middle school and high school. This can also be done in colleges through health courses, specialized programs, campus support groups and programs, and informative materials such as pamphlets, articles, brochures and counseling services. Doing this will reach people at a young age and provide more professional help and resources for both males and females young and old. There needs to be specialized training for professionals such as doctors, nurses, nutritionists, and counselors in mental health and family therapy treating male victims of eating disorders. The specialized training specific to males is important because males with eating disorders have an additional, different set of potential struggles because of the stigma that eating disorders are a female problem which results in less acceptance and understanding of the issue.

### *Implications for Future Research*

It is recommended that the next step of research be conduct more studies in the United States using larger, more diverse samples. If this study was to be replicated we would suggest either

rewording or discarding one of the statements (ACW); that athletes use eating disorder behavior to control their weight. According to our reliability statistics, the Cronbach's Alpha would increase from 0.554 to 0.641 if the question (ACW) were taken out of the survey. We believe this is because it is the only statement that is not specific to male eating disorders.

### **Conclusion**

As a result of this study, it is hoped that male eating disorders will be recognized as an issue that needs to be studied and addressed in college courses, hospitals, counseling centers, schools, and in sports/fitness. People need to recognize that the belief that eating disorders are only a female problem is a stereotype and that it is possible for males to struggle with eating disorders and body image. As a result of this study, it is hoped that action is taken to gain a better knowledge of how males with eating disorders suffer and recover from this disorder so that the proper prevention and treatment can be provided to males.

### **References**

- American Psychiatric Association (2000). *Diagnostic and statistical manual of mental disorders* (4<sup>th</sup> ed.). Washington, D.C: Author.
- Bromon-Bosch, E., Troop, N. A., & Treasure, J. L. (2000). Eating disorders in males: A comparison with female patients. *European Eating Disorders Review*, 8(4), 321-328. Retrieved February 9, 2006, from EbscoHost database.
- Cohen, T. F., Devault, C., & Strong B. (2005). *The Marriage & Family Experience* (9<sup>th</sup> ed.) (pp.35-36). Belmont, CA: Wadsworth
- Eliot, A. O., & Baker, C. W. (2001). Eating disordered adolescent males. *Adolescence*, 36(143), 535-544.
- Giant, C. L., Vartanian, L. R. (2001). 'Ally Mcbeal vs. Arnold Schwarzenegger': Comparing mass media, interpersonal feedback and gender as predictors of satisfaction with body thinness and muscularity [Electronic version]. *Social Behavior and Personality: An International Journal*, 29(7), 711-724. Retrieved February 9, 2006, from EbscoHost.
- Philpott, D., & Sheppard, G. (1998). More than mere vanity [Electronic Version]. *Guidance and Counseling*, 13(4), 28-34. Retrieved February 9, 2006, from EbscoHost database.
- Tata, P., Fox, J., & Cooper, J. (2001). An investigation into influences of gender and parenting styles on excessive exercise and disordered eating [Electronic Version]. *European Eating Disorders Review*, 9(3), 194-206. Retrieved February 9, 2006, from EbscoHost database.