

Original research article

Dieting and self-evaluation of figure in school-aged youth in the area of Central Slovakia



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ABSTRACT

The goal of this article is to present the occurrences of dieting and self-evaluation of one's personal body figure through the eyes of school-aged youth in central Slovakia. The data was collected in 25 elementary schools and two 8-year high schools in the Žilina and Banská Bystrica regions from May to June 2010. The group of respondents consisted of 1187 pupils in three age categories: 11-year-olds (313 respondents), 13-year-olds (442 respondents) and 15-year-olds (432 respondents). The standardized questionnaire created for the needs of this HBSC study was used for data collection. The data collection also contained demographic data including: gender, grade, age. The significant interaction of two variables was evaluated using the chi-quadrat test. The statistical analysis was made using STATISTICA software. Approximately half of the respondents (53%) stated that they were not dieting because their weight was "all right" according to the respondent. More than half of the respondents (56.6%) thought that their figure was "just right". Boys more frequently perceived that their personal figure was "just right". There were statistically significant differences discovered between gender and dieting (p = 0.000) and also between gender and self-evaluation of one's personal figure (p = 0.000). Statistically significant differences between age and dieting (p = 0.043) were also expected. But on the contrary, no statistically significant differences in self-evaluation of personal figure and age (p = 0.198) were found. Dieting in school-aged youth can result in changes in their cognitive, emotional and social developments. Therefore, it is necessary to consider physical and psychological consequences, including eating disorders, and to also support a healthy lifestyle which includes proper eating habits, regular physical activity and an efficient use of free time.

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Introduction

Dieting is relatively widespread among adolescents. It is one of the most common steps in dealing with unhappiness about one's personal weight and figure [1]. Adolescents, who eat poorly and irregularly, experiment with nutritional styles, or try to lose weight using diets, can suffer from deficiency of some nutrients without any visible clinical manifestations. The quantity and quality of food also affects their mental performance, readiness, efficiency of learning and emotional states [2].

Frequently, deviations in the nutrition of children and youth and various restrictive nutrition regimes (diets) cause an insufficient intake of nutrients important to life. Moreover, in connection with irregularity in a work-rest regime, it increases fatigue [3]. In this age period, extremes in the food intake arise due to dieting. In many aspects, eating disorders are a typical problem of the modern world. Mental anorexia and bulimia represent in their manifestations a nutritional behaviour from the life-threatening restriction of food intake up to overeating or hungering. However, both disorders have a great deal in common. The following is typical for them: an intense effort to achieve a slim figure associated with a restriction of energy intake, fear of obesity and dissatisfaction with one's own body [4]. During puberty and adolescence, girls want to change their physical appearance. They have a tendency to be slim, which is often reflected in the reduction of energy intake, and many times also the reduction of protein intake. On the other hand, with many boys it is about increasing exercise due to the desire to build-up muscles. They also consume food usually with an excessive amount of proteins [5,6]. Through every-day austerity, there is stress on the organism caused by various diets as the person slowly approaches their desired goal. However, at this time it is not yet known, what impact it will have on their health condition after adolescence. Their nourishment might be rich in fruit and vegetable products, however, their diet eliminates significant nutritional components essential for the young adolescent organism [2]. These deficiencies may lead to disturbances in natural growth and development. They can manifest themselves as anaemia, malnutrition, obesity, growth disorders, and the formation of caries. They can also be related to the development of diseases in adulthood, such as diabetes mellitus, atherosclerosis, hypertension, osteoporosis, and tumour diseases. Rejection of respected values, dissatisfaction with one's own appearance are efforts to be conformable with one's chosen way of life. These often lead adolescents to a change in their diet [7]. It has been proven that dieting is also associated with negative self-confidence in adolescents [8]. It is therefore important to maintain an adequate body weight and to achieve it by proper nutrient and exercise, not by a single-sided diet [9].

Long-lasting dietary restrictions directed at reduction of body weight will be ineffective if they are not accompanied by behavioural changes having an impact on physical activity and eating habits [10]. Prospective cross-sectional surveys showed that a high percentage of adolescents, especially women, even those with a normal BMI, had been on a diet for some period of time. Starting any diet increases. The risk of an eating disorders in adolescent girls. Extreme methods of slimming down can have unfavourable physiological effects [8].

The HBSC study (Health Behaviour in School Aged Children). The objective is to monitor health, and healthrelated school children's behaviour in their social context. The article presents selected findings of the HBSC research conducted in central Slovakia in 2010 focused on the occurrences of dieting and self-evaluation of one's personal figure in school-aged youth.

Material and methods

The research sample was formulated in accordance with the criteria of the HBSC study and stratified by regions and school types (elementary school, 8-year high school). The data was acquired from 11, 13 and 15-year-old school children representative of the population in central Slovakia (Žilina and Banská Bystrica region). The group consisted of 1187 pupils (620 girls and 567 boys). The data were collected from May to June 2010. The characteristics of the sample are presented in Table 1. Respondents who met the following pre-determined criteria were included in the research group:

- age (11, 13 and 15-year-olds);
- the respondent is a pupil of an elementary school (5th–9th grade) and equivalent in 8-year high school (prima–kvinta);
- an informed parent's consent and participation in the respondent's research;
- willingness to collaborate.

The HBSC study is one of the first cross-national studies adopted by the World Health Organization and now there are more than 40 collaborating countries, including Slovakia. The international questionnaire produced for the needs of the HBSC study, which had been translated into Slovak in a standard way, was used for the data collection. The questionnaire was distributed in school classes by a team of trained administrators. The individual schools were selected from the list of all elementary schools and 8-year high schools in Slovakia provided by the Institute of Information and Prognoses of Education by random sampling carried out in the HBSC Data Management Centre (Bergen, Norway). The schools were contacted by telephone and asked for consent to participate in the international HBSC study. During the phone call with the schools, which agreed to participate, we obtained approval of the school management and selected, by a random sampling, the particular classes, in which the data was collected. The legal representatives of the respondents were familiarized with the research so that they had an opportunity to express their disagreement with the participation. The participation was voluntary.

Table 1 – Characteristics of the sample.				
Sex	11	13	15	Total
Boys Girls	145 168	194 248	228 204	567 620
Total	313	442	432	1187

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