



## Research report

## Perceptions of emotional eating behavior. A qualitative study of college students

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## ABSTRACT

Approximately one-third of college students are overweight or obese and the average student gains 5 kg during college. Previous research has identified a relationship between emotional eating and weight gain in young adults, but outside the realm of eating disorders, few studies qualitatively capture why individuals cope with emotions by eating. Exploratory qualitative research was conducted, including 3-day food journals and in-depth interviews, with proportionate quota sampling of eight male and eight female undergraduate students to gain an understanding of students' perceptions of their emotional eating behaviors. Participants were purposively selected based on their emotional eating scores on the Weight Related Eating Questionnaire from a larger survey assessing student eating behaviors. Participants' ( $n = 16$ ) mean age was  $19.6 \pm 1.0$  years and all self-reported their race to be white. Mean Body Mass Index (BMI) for females and males was  $24.1 \pm 1.2$  kg/m<sup>2</sup> and  $24.8 \pm 1.7$  kg/m<sup>2</sup>, respectively. Findings from the qualitative analyses indicated gender differences and similarities. Females identified stress as the primary trigger for emotional eating, frequently followed by guilt. Males were primarily triggered by unpleasant feelings such as boredom or anxiety turning to food as a distraction; however, males were less likely to experience guilt after an emotional eating episode than females. During emotional eating episodes, both genders chose what they defined as unhealthful foods. These findings indicate a multidisciplinary intervention focusing on emotion and stress management in addition to dietary behavior change should be developed to reduce the potential for weight gain associated with emotional eating in the college-aged population.

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## Introduction

One out of every three Americans are obese and two out of every three Americans are overweight (Flegal, Carroll, Ogden, & Curtin, 2010). Data from the National Health and Nutrition Examination Survey 2009–2010 indicated that 18.3% of adolescents (12–19 years of age) were obese and 32.6% in 20–39 year olds (Ogden, Carroll, Kit, & Flegal, 2012). The increase in the prevalence of obesity appears to be caused by a gradual, but sustained annual increase in weight. Investigators from the Coronary Artery Risk Development in Young Adults (CARDIA) study found young adults aged 18–30 years at baseline gained an average of 0.69–1.19 kg/year over 10 years. In men and African-American women, total weight gain during the early to midtwenties was larger than during the thirties (Lewis et al., 2000). In 2009, 20% of college students were considered overweight and 11% obese (American College Health Association, 2009); Zagorsky and Smith found that college students gain an average of 5 kg (Zagorsky & Smith, 2011). Over

time, this weight gain can lead to overweight and obesity. Obese individuals are at greater risk for chronic conditions such as arthritis, cancer, diabetes, heart disease, high cholesterol and hypertension (Malnick & Knobler, 2006).

Emotional eating has been defined as eating in response to emotional cues, often as a coping response to negative emotions (Kandiah, Yake, Jones, & Meyer, 2006; Konttinen, Mannisto, Lahteenkorva, Silventoinen, & Haukkala, 2010; Laitinen, Ek, & Sovio, 2002; Macht & Simons, 2000) and is associated with weight gain (Blair, Lewis, & Booth, 1990; Geliebter & Aversa, 2003). However, most of this research has focused on individuals with eating disorders (Fox, 2009; McNamara, Chur-Hansen, & Hay, 2008; Skarderud, 2007). Few studies used qualitative research methods to explore the phenomena in individuals without eating pathology (Fox, 2009; Macht, Meininger, & Roth, 2005). Due to the variability in emotions and eating behaviors, different emotions may increase or decrease eating. More research is needed to explore why emotions can increase food intake in certain eaters for instance, but decrease food intake in other groups (Macht, 2008). This exploratory research was conducted to understand the perceptions of emotional eating behaviors in college-aged individuals in general and whether any differences exist between male and

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**Table 1**  
Content and theoretical background of interview protocol.

Questions	Activities	Theories and conceptual approaches
What are your favorite foods? Why? Do you have any stories associated with these foods? Is there any particular way you express these emotions?	Probe individual to mention feelings with these stories, which allows for transition into topic of emotions	Stress/emotions affect food choices (Kandiah et al., 2006; Konttinen et al., 2010)
Do you ever feel happy? Sad? Angry? Fear? Love? Surprise?	List emotions and frequency	Emotional patterns (Macht & Simons, 2000)
Do these emotions affect your eating behavior?	Describe and provide instances where this occurs	Emotionally instrumental eating (Macht & Simons, 2000)
Do positive emotions affect your eating behaviors differently than negative emotions?	Contrast positive and negative emotions and varying degrees of impact each emotion exhibits	Model of emotional eating (Macht, 2008)
In qualifying for this study, you scored high on an emotional eating instrument, what do you think this means?	Discuss whether participant considers himself/herself to be an emotional eater	Weight related eating questionnaire emotional eating Subscale (Schembre et al., 2009)

female students, as a basis of future intervention development aimed at modifying emotional eating and decreasing weight gain in susceptible individuals.

## Methods

The University of Rhode Island Institutional Review Board reviewed and approved this study. Participants gave informed, written consent before interviews.

### Sampling

Undergraduates (ages 18–24) from The University of Rhode Island were recruited during the fall 2010 and spring 2011 semesters in introductory classes via an online survey conducted to assess cognitive influences on eating behaviors including items assessing emotional eating (socio-demographic data and anthropometrics were also collected).

In the survey, emotional eating was assessed using the WREQ (Schembre, Greene, & Melanson, 2009). The WREQ contains an emotional eating construct assessed by five items using an anchored Likert response scale ranging from one (low) to five (high). The emotional eating construct was defined as eating in response to negative emotions, e.g., “I tend to eat when I am disappointed or feel let down.” Individuals who indicated willingness to participate in future nutrition research were eligible for the current study. Proportional quota sampling was used to randomly select eight males and eight females with a WREQ emotional eating score greater than the mean plus one standard deviation for his/her gender. Individuals scoring at or above this criterion (males  $\geq 12$ ; females  $\geq 16$ ) were classified as emotional eaters. Determination of sample size was based upon previous qualitative studies investigating emotions and eating behavior where samples of 10–13 subjects provided categories suggested by data (Fox, 2009; McNamara et al., 2008; Skarderud, 2007).

Potential participants were excluded for: an emotional eating construct less than the criterion; previous diagnosis with an eating disorder by a professional; BMI less than 21 or greater than 30; nutrition majors; pregnancy; lactation; smoking or taking medications affecting appetite. These exclusion criteria preserved internal validity of participants as emotional eaters within the realm of the non-clinical “normal eating” population as defined in this study.

Sixteen undergraduate students selected due to high emotional eating scores on the Weight Related Eating Questionnaire (Schembre et al., 2009) emotional eating subscale kept a 3-day food log prior to indepth interviews on their emotional eating behaviors. Table 1 includes the interview guide and theoretical background of questions. The guide was developed to answer the following research questions:

- (1) What range of emotions do young adults perceive themselves experiencing in their daily lives?
  - a. Are there any differences between male and female young adults?
- (2) Do young adults perceive any of these emotions as influencing their eating patterns?
  - a. Are there any differences between male and female young adults?
- (3) What kind of relationship might exist between emotions and eating patterns?
  - a. Are there similarities and differences between how males and female eating patterns are influenced by emotions?
- (4) Do young adults feel that the WREQ instrument correctly identified them as emotional eaters?
  - a. Are there any differences between how male and female young adults identify themselves as emotional eaters?

### Data collection

Prospective participants received email notification inviting them to participate in the current study. Over 45 emails were sent to recruit potential participants. If they agreed to participate, students documented their meals in conjunction with their mood using a food journal for 3 days prior to the interview. Participants brought their journals to their interview.

All interviews were conducted by the author on a one-on-one basis in a private setting in a nutrition laboratory on the university campus. While the participant was reading and signing the consent form, the interviewer reviewed the journal to understand the participant's eating behaviors and patterns. When asked about the food journal, all participants stated they completed the journal to the best of their ability. From this brief review, additional open-ended questions for the interview, specific for each participant, were written down for inclusion in the interview in addition to semi-structured questions. The intent of the food journal exercise was to raise participant awareness of eating behavior in relationship to their emotions. With the goal of achieving substantive direct responses during the interview, it was believed additional reflective time prior to the interview through the food journal exercise would be beneficial for the participant.

Each interview lasted approximately 30 min, was tape-recorded and subsequently transcribed. Within a week of each interview transcription, a one-page summary of the discussion was prepared and the participant returned a second time for a summary review. All participants approved the content summary and provided no additional changes/comments. Participants were compensated seven dollars after the interview and eight dollars after the summary review.

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