

Application of the Eating Attitudes Test (EAT-26) in a Cohort of Higher Education Students

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Dear Editor,

Worldwide evidence indicates an increase in eating disorders (ED) prevalence over the last decades, with significant concern among higher education students¹. However, data on this cohort in Ireland is lacking. The HSE estimates that approximately 1 in 26 people in Ireland will experience an ED at some point throughout their lives². Higher education students may be exposed to stressors caused by peer and academic pressure, less structured routines, poor coping mechanisms, and social exposure to thin body ideal. Therefore, the aim of this study was to assess the prevalence of potential EDs in a cohort of higher education students in Ireland.

In total, 682 full-time higher education students aged 18 years+ took part in the study (66.8% females). EDs were assessed using the validated Eating Attitudes Test (EAT-26)³. The EAT-26 questionnaire should not be used to make a diagnosis, but rather to prompt individuals to seek the advice of a professional. Demographic information, individual and behavioural characteristics, and data on the impact of Covid-19 were also collected. Data was self-reported and analysed using SPSS Software. The mean age of participants was 24.97 ± 8.90 , while the median age was 21. Findings indicated that one in ten (9.7%) respondents had a potential ED, with majority of these being females (89.1%). Almost 1 in 4 (23.4%) participants with a potential ED were obese, compared to 12.8% of those classified as unlikely to have an ED (p=0.026). Traditionally, individuals with EDs were characterised by low weight; according to the World Health Organization, obesity has nearly tripled between 1975 and 2016⁴, leading to a greater proportion of the population classified as obese, including those with EDs. Furthermore, significant associations were found between potential EDs and alcohol consumption (p=0.004), poor sleep quality (p=0.025), and smoking (p=0.002). Nearly half of respondents (43.5%) with a potential ED reported their diet to be negatively impacted by Covid-19. These results can help grow awareness on the need to address EDs in this high-risk cohort.

Higher education institutes are a key setting to help establish healthy habits that can be carried into later adulthood. Behaviours such as positive body image, healthy eating, physical activity, not smoking, and not binge drinking, should be promoted within campus environments. ED screening should be offered to students regularly. Overall, campus initiatives require multidisciplinary efforts to be effective. Campus health care professionals must be trained to detect and refer at-risk individuals to appropriate services: early intervention speeds up recovery, better reduces symptoms, and reduces the risk of developing an ED again later in life. The EAT-26 questionnaire can be used as a quick and simple screening tool. It includes 26 items profiling three subscales: Dieting (13 items), Bulimia and Food Preoccupation (6 items), and Oral Control (7 items).

To conclude, results from this study are similar to what has been previously found in other countries and confirmed a high prevalence of potential EDs among higher education students. Healthy Campus initiatives represent a potential start-off point to address the issue; appropriate referral systems are required in this setting.

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