

The Relationship Between Emotional Eating And Nutritional Status In Women Of Reproductive Age In The Rimau Islands, Sumur Village

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ABSTRACT

Background: The group of women of childbearing age is one of the phases to prepare a quality next generation. Inadequate food intake can cause problems with Chronic Energy Deficiency (KEK) in women of childbearing age. In women, the presence of depressive symptoms worsens the relationship between emotional eating and food intake. This study aimed to determine the relationship between emotional eating and the level of nutritional adequacy in women of childbearing age in the Rimau Islands, Sumur Village, South Lampung.

Research Methods: This study used a cross-sectional or cross-sectional design. Researchers used the Dutch Eating Behavior Questionnaire (DEBQ), translated into Indonesian, specifically for Emotional Eating. The nutritional status of young women can be seen from the Body Mass Index (BMI).

Research Result: This study included 20 of the 30 respondents who attended. The statistical test for emotional eating on nutritional status (obesity) has no relationship with the p-value (0.766).

Conclusion: This study concludes that there is no relationship between emotional eating and Nutritional Status.

BACKGROUND

Teenagers tend to have problems with food, so there are many nutritional problems, such as stunting, anemia, and obesity. These three dietary problems are called Triple Burden Malnutrition (TBM). Nutritional problems in adolescents often occur in developing countries, including Indonesia. One of the problems with food intake is emotional Eating, besides Anorexia and Bulimia. Emotional Eating is defined as eating in response to affect. The condition may increase during early adolescence when emotionality is high, and the prevalence of emotional disorders increases (Webb et al., 2021).

Adolescents, especially girls, are highly affected by adverse social comparisons, and this can lead to anxiety and emotional Eating. Uncontrolled Eating or Emotional Eating is also positively related to the total serving and remaining energy at dinner. However, energy wasted at dinner was not correlated with emotional Eating; therefore, leftovers may have been eaten by someone else or stored for later consumption. In addition, there is a negative relationship between total plated at breakfast and uncontrolled Eating. If adolescents consume less food at breakfast, they may have less control over food consumption and have the potential to overeat at dinner. (Banna et al., 2018).

In women or girls, the presence of depressive symptoms exacerbates the relationship between emotional Eating and food intake. In contrast, it does not affect the relationship between emotional Eating and food intake in men. In these findings, it is necessary to consider the individual's psychological state when reducing unhealthy dietary habits, especially in women or young girls. (Camilleri et al., 2014) This study aims to determine the relationship between emotional Eating and the influencing factors and impacts on

adolescents. The purpose of this study was to determine the relationship between emotional Eating and the nutritional status of women of reproductive age in the Rimau Islands, Sumur Village, South Lampung.

MATERIAL AND METHODS

This study used a cross-sectional design. This study lasts six months, from April to October 2022. This research was conducted in Sumur Village, Rimau Island, South Lampung. The research location is also taken by sea (Sunda Strait) and close to Bakauheni Lmapung port. The case population in this study were all young women on Rimau Island, totaling 25 people. The subjects of this study were Women of Reproductive Age. The number of samples used is the total sampling method, meaning that the entire population will be sampled after being determined by the inclusion and exclusion criteria. The dependent variable in this study is the nutritional status of young women. The nutritional status of young women can be seen from the Body Mass Index (BMI). The independent variable used in this study is Emotional Eating. To find out about emotional eating, the researchers used the Dutch Eating Behavior Questionnaire (DEBQ), which has been translated into Indonesian, specifically for Emotional Eating, which consists of 13 questions, with 1 = no answer choices. . ever, 2=occasionally, 3=sometimes, 4=often and. 5=always. Analysis used the t-test between the obese and non-obese groups.

RESULTS

Data was collected on July 23, 2022, at SD Negeri 5 Sumur. Respondents who attended were used as subjects in this study. The issues of this study were selected according to the inclusion and exclusion criteria, such as the age of the respondents. Subjects were excluded at the time of re-examination of the questionnaire that previously trained enumerators had filled out. The number of issues in this study was 20 people. For descriptive data from research subjects can be seen in the following table:

Table 1. Characteristics of Research Subjects

No	Variable	Value/ Amount
1	Average Age	30,8 years
2	Working status	
	a. Doesn't work	19 person (95%)
	b. Work	1 person (5%)
3	Marital Status	
	a. Marry	17 people (85%)
	b. Not Married	3 people (15%)
4	Educational Status	
	a. Elementary School	16 people (80%)
	b. Junior High School	4 people (20%)
5	Diet History	
	a. Yes	2 people (10%)
	b. No	18 people (90%)
6	Food Allergies	
	a. Yes	4 people (20%)
	b. No	16 people (80%)
7	Appetite Problems	
	a. Yes	3 people (15%)
	b. No	18 people (85%)
8	Meal Time Missed	
	a. Yes	14 people (70%)
	b. No	6 people (30%)
9	Exercise Habits	
	a. Never	15 people (75%)
	b. Yes	5 people (25%)
10	Nutritional Status	
	a. Obesity	12 people (60%)
	b. Not Obesity	8 people (40%)
11	Mean <i>emotional eating</i> Score	10,75

This study used an analysis of the Independent T-Test or unpaired T-Test with the following results:

Table 2. T-Test Result

No	Nutritional Status	Mean <i>emotional eating</i> Score	P value
1	Obesity	10,41	0,766
2	Not Obesity	9,87	

DISCUSSION

This study included 20 respondents from 30 respondents who were present. Determination of respondents is done by looking at the criteria of the age of women of childbearing age. The mean age of the respondents in this study was 30.9 years, with the youngest age being 14 years and the oldest being 44 years. This is not by previous research conducted by Braden in 2018, which included 189 respondents who were obese. The population in the Rimau Islands is minimal, so the researchers used the total sampling method to obtain respondents. (Braden et al., 2018).

Regarding respondents' employment status, 95% did not work and only became students and homemakers. At the time of the research, many respondents of working age/other productive ages were working outside the island, so it was not reachable to obtain data. The study is research conducted in Saudi Arabia by Khaled in 2021, which explains that using non-working or civilian respondents to determine the impact on emotional eating. It will affect a lack of income for someone who does not work. It can reduce accessibility in obtaining food and increase the risk of stress. (Aldossari et al. 2021).

The education level of the respondents was classified as lower middle class, namely elementary and junior high school graduates. This is because the island people do not care about higher education to live their lives. This research is unlike previous research on emotional eating in that many respondents were students or currently studying at university. Research conducted by Mantau 2019 regarding the determinants of emotional eating included 179 student participants with an average age of 23.15 years. (Mantau, Hattula, and Bornemann 2018) Compared to this study, this study had a high educational background for the respondents, and the middle generation was younger. This is because the respondents in this study work as housewives.

Most respondents had no history of dieting, around 18 people (90%). Respondents needed help understanding food diet and the purpose of the diet. Some who are on a diet (2 people) use the method of reducing the intake of carbohydrate sources, namely by not consuming rice.

Table 1 shows that the number of respondents who missed the main meal was quite a lot, namely 14 respondents (70%). Skipping meals, even if only once, can reduce a person's nutritional adequacy. This can cause the condition of Protein Energy Deficiency (KEP) in the group of women of childbearing age (WUS). Then 75% of respondents do not have exercise habits for the percentage of sports activity. This can lead to risk factors for the incidence of obesity.

The statistical test for emotional eating on nutritional status (obesity) has no relationship with the p-value (0.766). This is because there is no difference in the average score of emotional eating between the obese and non-obese groups. The high percentage of obesity in respondents is caused by a lack of sports activity and consumption of sweet snacks. Most respondents did not understand the meaning of emotional eating, so in questions related to emotional eating, many responded negatively. This agrees with a 2019 Review Article by Continent, research which implies that emotional eating may be one of the behavioral mechanisms linking depression and the development of obesity. Second, studies highlight the relevance of nightly sleep duration by showing that adults with shorter sleep and higher emotional eating may be especially prone to weight gain. Third, the emerging literature suggests that genes may partly influence weight through emotional eating and other dimensions of eating behavior. So other factors remain, such as sleep patterns and genes/heredity.

Respondents' food habits are snacks, such as wafers, biscuits, and others. This is to a study conducted by Nadine (2018) on 1442 respondents, which explained that, in general, depression and related

food habits contribute to poor eating patterns, such as high intake of sweet foods and also snacks. (Paans et al. 2019) So that individuals must have their eating arrangements to control their information of light, sweet foods such as candy which is the impact of perceived emotional eating. (Ling and Zahry 2021).

CONCLUSIONS

This study included 20 respondents from 30 respondents who were present. Determination of respondents is done by looking at the criteria of the age of women of childbearing age. The statistical test for emotional eating on nutritional status (obesity) has no relationship with the p-value (0.766). This is because there is no difference in the average score of emotional eating between the obese and non-obese groups.

RECOMMENDATION

For further studies, looking at other factors such as sleep time and heredity or genes is necessary.

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