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Nocturnal eating pattern and factors leading to same among nursing students

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Abstract

Problem Statement: Assessment of nocturnal eating pattern and factors leading to same among nursing students in selected colleges

Objectives of the study

- 1. To assess the nocturnal eating pattern among nursing students in selected colleges.
- 2. To assess the factors leading to nocturnal eating pattern among nursing students in selected colleges.
- 3. To find association between selected demographic variables and nocturnal eating pattern.
- 4. To find association between selected demographic variables and factors leading to nocturnal eating

In view of the objectives of present study, exploratory descriptive approach was considered to be most reliable. Quantitative non experimental descriptive research design was selected. The population selected for present study is nursing students. The sampling technique used in the study is non probability purposive sampling technique. In this study, the study samples selected are 200 nursing students from selected nursing colleges. Study showcased that majority of the students have nocturnal eating and found out the factors leading to the same. Study also revealed the association between factors and demographic variables.

Keywords: Nocturnal eating pattern

Introduction

We like to eat food mostly of our likes and in order to pleasure our taste buds. We often neglect whether the food is healthy or not, such tasty food stuffs are easily available at our will hence we tend to have it when we feel to eat no matter what the time is. Individuals with night eating syndrome feel like they have no control over their eating patterns, and often feel shame and guilt over their condition. Night eating syndrome affects an estimated 1.5% of the population, and is equally common in men and women, according to the National Institute of Mental Health

exploratory descriptive research approach. The investigator used quantitative non experimental descriptive method. The study was conducted in the selected nursing colleges. Accessible population was all nursing students in selected nursing colleges and who are available during the course of study. 200 nursing students were selected with the help of non-probability purposive sampling as per the inclusion criteria from the selected colleges. Semi structured questionnaire was developed and Modified Likert Scale for assessment of nocturnal eating pattern and checklist for assessing factors leading to same

Methods

The research methodology adopted for the study was

Results and discussion

Table 1: Assessment of the nocturnal eating pattern

Grade	score	Frequency	Percentage
Mild	12 to 24	100	50%
Moderate	25-36	97	48.50%
Severe	37-48	3	1.50%
Total		200	100%

Table 2: Assessment of factors leading to nocturnal eating (N=200)

S. No.	Factors Leading to Nocturnal Eating	No of Samples Yes (Freq)	Yes %	No %
1.1.	Internet usage	118	59%	41%
2.1.	Assignments	164	82%	18%
3.1.	Poor quality hostel food	113	56.5%	43.5%
4.1.	Stress	135	67.5%	32.5%

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5.1.	Low mood	108	54%	46%
6.1.	Heavy exercise	72	36%	64%
7.1.	Dieting	59	29.5%	70.5%
8.1.	Eating dinner early before 8	89	44.5%	55.5%
9.1.	Exams	160	80%	20%
10.1.	Any psychoactive substance consumption	15	7.5%	92.5%

Association between study findings and selected demographic variables was assessed using Chi square test. The summary of Chi square test is tabulated below:

As there are only 3 samples in severe category it is combined with moderate category

. No.	Parameters	Chi square value calculated	df		value at P=0.01	Inference
1.	Age	10.474	3	7.82	11.34	Significant association
2.	Gender	3.690	1	3.84	6.64	No significant association
3.	Year of course	12.269	2	5.99	9.21	Highly significant association

1.958

 Table 3: Finding association between nocturnal eating with demographic variable

Association of factors leading to nocturnal eating pattern with selected demographical variables was assessed using Chi square test. There is significant association between ages with Internet usage at 0.05 as P value is less than calculated value. There is high significant association between years of course, area of living with Internet usage at 0.05 and 0.01 as p value is less than calculated value

Area of living

Pattern of eating dinner

There is high significant association between years of course with assignment at 0.05 and 0.01 as p value is less than calculated value. There is high significant association between ages, year of course with poor quality hostel food at 0.05 and 0.01 as p value is less than calculated value

There is significant association between areas of living with poor quality hostel food usage at 0.05 as P value is less than calculated value.

There is high significant association between years of course with stress at 0.05 and 0.01 as p value is less than calculated value

There is significant association between area of living with stress at 0.05 as p value is less than calculated value

There is high significant association between years of course, area of living with lowmood at 0.05 and 0.01 as p value is less than calculated value.

There is high significant association between years of course, area of living with heavy exercise at 0.05 and 0.01 as p value is less than calculated value. There is high significant association between years of course, area of living with dieting at 0.05 and 0.01 as p value is less than calculated value. There is high significant association between years of course, area of living with eating dinner early before 8 at 0.05 and 0.01 as p value is less than calculated value.

There is high significant association between years of course with exam at 0.05 and 0.01 as p value is less than calculated value. There is high significant association between years of course, area of living with psychoactive substance at 0.05 and 0.01 as p value is less than calculated value

Conclusion

The result of the study helped the investigator to assess the nocturnal eating pattern and factors leading to same as well as association between the nocturnal eating and factors leading to it with demographic variables

9 2 1

9.21

Significant association

No significant association

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5.99

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