

The Beast Within: An Exploration into Eating Disorders Among College Women

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A pervasive beast lurks on college campuses all over the nation. It is affecting the lives of many, particularly female college students, in devastating capacities. Yet, it remains to be determined just how extensive a problem this beast has become. Research estimates that five to seven percent of this nation's undergraduates are afflicted with the beast (Hubbard, O'Neill, & Cheakalos, 1999). Moreover, the problem remains seemingly masked and unpurged by the public eye. The following article provides a profile of the beast that resides within the body and mind of many college women; the beast is an eating disorder.

A terrible beast has found its place on college campuses. This figurative beast lives, festers, and grows, within the minds and bodies of many female college students. The beast is an eating disorder. College women today are fighting an internal battle with the beast in record numbers (Hubbard, O'Neill, & Cheakalos, 1999). College campuses all over the nation are dealing with women who have this pervasive illness, and the personal paths of destruction that ensue from its existence. To be more proactive in dealing with this "problem that is raging on college campuses" (Hubbard, et al., 1999, p. 54), student affairs professionals must first understand both the college student and the beast that resides within. Although eating disorders can affect males, this article will focus on the adverse effects related to women, who make up the majority of sufferers. The author will profile today's typical female college student with an eating disorder and the issues she faces resulting from the disorder. Additionally, options for campus intervention and treatment measures will be offered.

BACKGROUND

Every fall, eighteen-year olds all over the nation prepare to leave home and embark on their newest life path: college. Most college women, "must adjust to being away from home for the first time, maintain a high level of academic achievement, and adjust to a new social environment" (Ross, Niebling, & Heckert, 1999, p. 313). This transitional time can greatly increase the stress

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level for female college students. Furthermore, “transitions present young women with challenges that expose both their vulnerabilities and their strengths” (Beeber, 1999, p. 232). In addition, Beeber (1999) theorizes that many women feel a lack of control in their new environment and become susceptible to depression and/or an eating disorder.

Three major categories of eating disorders plague the nation’s teens and college students: a) bulimia, identified as bingeing followed by purging; b) anorexia, identified as a pathological fear of weight gain leading to extreme weight loss; and c) binge eating, identified as compulsive overeating (Hubbard, O’Neill, & Cheakalos, 1999). Bulimia involves consuming large quantities of food in a short amount of time, then vomiting or purging, to cleanse the system. In contrast, anorexics literally starve their bodies by fasting, or by eating minimal amounts of food. An estimated five to seven percent of the United States’ undergraduates are afflicted with one or more of these eating disorders (Hubbard, et al., 1999), and another 61 percent have displayed eating disordered behaviors (Alexander, 1998). Eating disorder behaviors include “use of laxatives, diuretics, [and] diet pills” and “an intense exercise [routine] for weight control” (Krahn, Kurth, & Nairn, 1996, p. 69), all of which can become very harmful and even fatal. Each disordered behavior perpetuates the beast’s strength and decreases the sufferer’s own control.

PROFILE OF A STUDENT WITH AN EATING DISORDER

To gain a clearer understanding of female college students who deal with eating disorders, it is useful to have a general profile of this unique population. Whereas, case studies often portray the individuality of specific women suffering from eating disorders in college, the following profile will clarify some fundamental similarities found among many afflicted college women.

A profile of this group entails examining the desires, needs, challenges, and fears of college women while they transition into their new environment. Most first-year students are typically away from home for the first time and may be lacking the support of friends. First-year women are oftentimes thrust into a residence hall or a sorority filled with unfamiliar faces. The pressure to fit in is extraordinary and can leave them with “feelings of loneliness and nervousness, as well as sleeplessness and excessive worrying” (Wright, 1967, p. 372). Excessive worrying coupled with feelings of inadequacy and lack of control can be just what the beast needs to take control. Many of these transitions and their adverse side effects manifest themselves as an eating disorder. Hubbard, et. al.

(1999) state that, “college women are away from their families, and there’s tremendous pressure to find their way in the world...food is the one thing they

can control” (p. 55). These issues of control are the foundation for an eating disorder and inevitably they shape who the victim becomes.

Who is the female college student with an eating disorder? She is Sara Hunnicut, a “hard-driving popular student who was president and one of three valedictorians of her 1995-96 senior class”(Hubbard, O’Neill, & Cheakalos, 1999, p. 57). She is the homecoming queen, who at age 20, suffers a heart attack from bulimia complications and laxative use; she is Anna Eidson, who became so homesick she starved herself to have an excuse to go home, and she is literally the girl next door (Hubbard, et. al. 1999). Studies have shown her most likely to be caucasian, from a high socioeconomic status, with many internal conflicts, such as a strive for perfection (Schwitzer, Bergholz, & Dore, 1998). She has been found to display perfectionism, a fragile sense of self, dependency, and a struggle for power (Schwitzer, et. al. 1998). The perfectionist in her tends to strive for the “ideal” body, relationship, and grades, while her fragile sense of self and dependency drive her to feel inadequate (Schwitzer, et. al. 1998).

College is a time when she needs to feel socially accepted, and in her mind, “she needs to be perfect to pass muster”(Johnson, Brems, & Fischer, 1996, p.78), or ‘informal social tests’ at her sorority, or within her new social circles. She may become depressed and exhibit signs of “low energy, cognitive difficulty, irritability, sad mood, guilt, low self-esteem, social introversion, pessimism, and instrumental helplessness” (Wilcox, & Sattler, 1996, p. 270). She may also reflect “maturity fears”(Alexander, 1998, p. 67), which show her “desire to avoid entering adulthood to remain in the safety of childhood”(p. 270). This fear has been attributed by psychodynamic theorists as being a “factor in the development of eating disorders” (Alexander, 1998, p. 269). These behaviors further push her towards trying to control her body and food intake in order to feel in control of herself (Hubbard, O’Neill, & Cheakalos, 1999).

To further the profile of the female college student with an eating disorder, it is useful to examine her social environment. Many undergraduate women

participate as members of sororities, and yet sorority life can have an increased impact on the development of an eating disorder. Specific studies have been conducted with undergraduate women living in sorority houses to examine if factors such as, self-image, persistency of eating disorders, and perceived popularity or 'belonging' within the group have played a role in eating disordered behaviors of members (Alexander, 1998). It was found that sorority women were considered at high risk with regard to eating disorders, because they have to create and maintain an "effective social façade" in addition to meeting certain social expectations (Alexander, 1998, p. 67). For instance, at a large northeastern university sorority house, sandwich bags were disappearing from the kitchen. They were found, full of vomit, hidden in a basement

bathroom. The building's pipes had already been eroded by gallons of stomach acid and needed replacement (Hubbard, O'Neill, & Cheakalos, 1999). In a recent college study, it was found that 80% of the sample's high-frequency purgers were affiliated with a sorority chapter (Meilman, VonHuppel, & Gaylar, 1991). However, it is unclear whether or not women who are attracted to Greek life may be more prone to bulimic behavior, or whether the Greek system pressures women to be body conscious. Other factors may play a heightened role as well.

Studies have shown that external factors, such as: fashion magazines (Turner, Hamilton, & Jacobs, 1997), the media (Rabak-Wagner, Eickoff-Shemek, & Kelly-Vance, 1998), and society (Monteath, & McCabe, 1997), are contributing influences to the body image of teen and college-aged women. Models in popular magazines are unattainably thin and surreal due to standard airbrushing. Most women in the media are slim, fit, and ideally beautiful as perceived by dominant culture. College women and adolescent girls look to these unrealistic portrayals of what it is to be a woman. These pressures, coupled with the stress of being a college student and wanting to fit in, can be tremendous. The beast creeps in.

COLLEGES LOOKING TOWARD THE FUTURE

What can colleges do to address this devastating issue that has been affecting so many women? What actions should universities take to rid the nation's campuses of this beast? There are many options available to college and university administrators.

Many colleges have taken varying measures to arm themselves against the beast and to positively impact the student population. Charles Murfosky, President of the New York City-based American Anorexia Bulimia Association, says: "virtually every college has some kind of program, either a student-run group or treatment options through health services"(Hubbard, O'Neill, & Cheakalos, 1999, p. 53). A variety of different tools can be utilized in the battle against the beast.

Proactive measures include establishing many contacts with students in order to educate them on the issues of college transitioning and eating disorders. First-year orientation programs are a stepping stone. These programs can include information on eating disorders and some of the major stresses encountered at college pertaining to transition issues. In addition, college campuses can participate in nation-wide screening programs. For instance, "In February, 1998, more than 600 college campuses participated in a National Eating

Disorders Screening Program; of the 26,000 students who [completed] questionnaires, 4,700 were referred for treatment”(Hubbard, O’Neill, & Cheakalos, 1999, p. 53). Programs that reach out to students can have a positive impact. Almost 20% of the students who completed this national survey were referred for treatment—perhaps continued use of this measure would decrease the percentage in subsequent years. Additionally, this 20% may receive the treatment they need through the referral they receive. The women screened at this program, and the colleges they attend will benefit.

Being informed as a student affairs professional or health center practitioner, is one way to be a better resource for students with eating disorders. Greek life directors should be aware of the studies that indicate the “potential risks of group membership for college women...”(Alexander, 1998, p.72). Furthermore, residence life directors need to be knowledgeable about the specific needs of the eating disordered population in order to create a supportive environment for all students. It is imperative that both directors of residence life and greek life critically look at their organizations and make changes.

Fall and Spring training sessions for staff are a starting point. These sessions should provide in-depth, tangible specifics about eating disorders, what they are, and how they affect the college student population. Additionally, training sessions should paint a picture of what indicates eating disordered behavior, so that administrators and staff members have the insight to notice when one of their students is suffering. Training sessions should not simply scratch the surface or glaze over the issue of eating disorders. The startling number of student sufferers will not decrease without intervention.

One study outlines a “framework for intervention” (Schwitzer, Bergholz, & Dore, 1998, p. 202) for colleges. The proposed framework consists of three components:

Prevention aimed at students who are susceptible to the development of eating problems during their college years; intermediate services that address the moderate, diagnostically subthreshold eating problems most prevalent on campuses; and, where resources allow, remedial treatment for anorexia and bulimia (Schwitzer, et. al. 1998, p. 202).

This framework would assist in the creation of a committed college environment that takes action against eating disorders before, during, and after they occur.

Dining centers can aid by making food choices easier for students who are dealing with an eating disorder (Schwitzer, Bergholz, & Dore, 1998). Posters displaying healthy food choices and offering nutrition information on meal selections can be helpful for students (Schwitzer, et. al. 1998). Although eating

disorders are spurred by issues of control, not necessarily issues with food, dining centers that provide nutritional choices and healthy options give some of the control back to students suffering from eating disorders. After one college cafeteria provided informational menu boards and other information, “students consumed more low-fat milk, more vegetables, and more nutrient-dense foods” (Schwitzer, et. al. 1998, p. 204) than they had been consuming.

The most encompassing, and possibly the most important strategy for preventing eating disorders on a college campus is to provide the necessary support for transitioning students who could potentially develop an eating disorder. A recent study has shown that providing resources alone is not enough to diminish the effects of the beast, rather, “improving the relationships that provide the resources” would be of greater benefit (Beeber, 1999, p. 231). Women focus heavily on social supports and relationships in their lives to get through tough situations and experiences (Beeber, 1999). Without these supportive constructs, college women are at a higher risk of allowing the beast to fester inside them.

Colleges are often forced to “have to make choices about how they use funds: for education on drug and alcohol abuse, or date rape, or eating disorders” (Hubbard, O’Neill, & Cheakalos, 1999, p. 53). Treating eating disorders can be a lengthy and expensive process that may not seem cost-effective to colleges. “As colleges are discovering, however, not intervening can be far costlier” (Hubbard, et. al. 1999, p. 54). Anorexics have a 20% mortality rate, and bulimics can develop heart problems from using laxatives and vomiting (Hubbard, et. al. 1999). The subsequent health issues that arise due to eating disorder behavior result in numerous health center visits, and potentially rising costs. In addition, the beast could win the battle by taking the lives of afflicted women.

CONCLUSION

Millions of women leave their homes to attend college each year. Thousands of them will be exposed to more than English literature or mechanical engineering during their studies in college. Many will meet the beast. The beast is the lack of control a woman feels during her transition to college; it is the self-loathing inner monologue that plays over and over in her head; it is the brief sense of accomplishment she feels after she purges; it is her warped view of herself when she agonizes in the mirror; it is societal, social, internal, and mysterious; and it is very, very real. As afflicted women are “struggling to meet new demands and roles as university” students, the beast is battling them every step of the way (Beeber, 1999, p. 229).

The tools that college administrators, faculty, staff, and health-care professionals utilize can prevent, or at least diminish some of the struggles and battles college women face. In a recent poll of those respondents who knew someone with an eating disorder, 45% said the person sought help through a “college staffer” (Hubbard, O’Neill, & Cheakalos, 1999, p.54). Through the implementation of educational programs, and a desire by college staff to help, the beast may release its grip.

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