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Comfort Levels of Male Collegiate Student Athletes in Reporting Symptoms of Eating Disorders

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OBJECTIVE

The purpose of this study was to investigate the comfort levels of male student athletes at a Division III college in reporting symptoms of eating disorders to Athletic Trainers.

DESIGN and SETTING

Descriptive survey research. A paper survey was delivered to male student athletes. The independent variable was male student athletes and the dependent variable was comfort levels in reporting eating disorders symptoms.

PARTICIPANTS

233 male student athletes (convenience sample). Return rate of 85% (n=196). 34%(n=67) freshmen, 38%(n=54) sophomores, 19%(n=36) juniors, and 20%(n=38) seniors. 68%(n=132) had a male team athletic trainer and 32%(n=63) had a female athletic trainer. 5%(n=10) wrestlers, 5%(n=10) swimmers, 16%(n=31) soccer, 5%(n=9) lacrosse, 40%(n=79) football, 7%(n=14) cross country/track/field, 8%(n=16) basketball, and 14%(n=27) baseball.

INTERVENTION

19 questions survey instrument: 18 closed ended/one open-ended question. Face validity and content validity were established. IRB approval obtained. Descriptive statistics (frequency counts and percentages), Kruskal Wallis test (grouping variables: grade level and sport type) and Chi Square Test (grouping variable: gender of team athletic trainer) were used. Alpha level $p=.05$ *a priori*.

MAIN OUTCOME MEASUREMENT

Likert scale questions with one open ended question.

RESULTS

22%(n=41) strongly disagreed/disagreed that they are comfortable reporting symptoms of eating disorders to their certified athletic trainer. 40%(n=78) strongly agreed/agreed there is a gender-based stereotype in regard to eating disorders in male athletics. 19%(n=37) strongly agreed/agreed that eating disorders are not taken as seriously in male athletics as they are in female athletics. 70%(n=137) agreed/strongly agreed that they have experienced bad mental health days. 61%(n=100) agreed/strongly agreed that bad mental health affects their performance. 66%(n=129) agreed/strongly agreed that they are aware of the symptoms of eating disorders. 29%(n=57) strongly disagreed/disagreed that they would feel more comfortable reporting if their certified athletic trainer was male. Kruskal Wallis Test showed statistically significant difference ($H=10.673$, $df=3$, $p=0.014$) in reporting symptoms of eating disorders to the team athletic trainer. 34%(n=13) of seniors strongly agreed/agreed while 61%(n=41) of freshman strongly agreed/agreed. Kruskal Wallis Test showed statistically significant difference ($H=25.026$, $df=7$, $p<0.001$) to restricting their eating to improve performance. 51%(n=16) of soccer players and 58%(n=8) of cross country/track and field athletes agreed/strongly agreed while 66%(n=52) of football players and 55%(n=15) of baseball players disagreed/strongly disagreed. 32%(n=20) of participants with a female athletic trainer

strongly disagreed/disagreed with that statement, while 63%(n=83) of participants with a male athletic trainer strongly disagreed/disagreed.

CONCLUSION

This study supports that male athletes experience symptoms of eating disorders and

some are not comfortable reporting those symptoms to their team athletic trainer. Increasing awareness and education to both athletes and athletic trainers will normalize the issue and encourage better reporting of cases.

KEY WORDS: *Eating Disorders, Male Athletics, Comfort Level, Mental Health, Collegiate*