



# Introduction

□Men are increasingly concerned about their weight and shape (Strother et al., 2012).

Body dissatisfaction and weight misperception may be factors leading to eating disorders. Ethnicity is recognised as a factor for eating disorders as well (Nasser, 1988).

□Singapore is a society comprised of 3 main ethnicities such as Chinese, Malay and Indian; which implies varied body shapes.

#### Aim

To find out if ethnicity is linked to disordered eating behaviour and body dissatisfaction in adult males living in Singapore.

#### **Materials & Methods**

Questionnaire(EAT-26 and body image scale) Recruitment: random and snowball sampling Statistical analysis using SPSS: Correlation, ANOVA, Chi-square, p<0.05

References: Garner, D., Olmsted, M., Bohr, Y. and Garfinkel, P. (1982). The Eating Attitudes Test: psychometric features and clinical correlates. *Psychological Medicine*, 12(04), pp.871. Strother, E., Lemberg, R., Stanford, S. and Turberville, D. (2012). Eating Disorders in Men: Underdiagnosed, Undertreated, and Misunderstood. *Eating Disorders*, 20(5), pp.346-355. Winitch, R.F. (1993). Male body image dissatisfaction. Unpublished master's thesis, Shippensburg University, Shippensburg, PA.

Table 1. Age, BMI, weight and shape discrepancies for each ethnicity (Mean and SD)

Ethni Age BMI ( Weigh Shape

Table 2. Scores for EAT-26 and subscales for each ethnicity (Mean and SD)

Ethni EAT-2 score Dietin **Bulim** Oral c

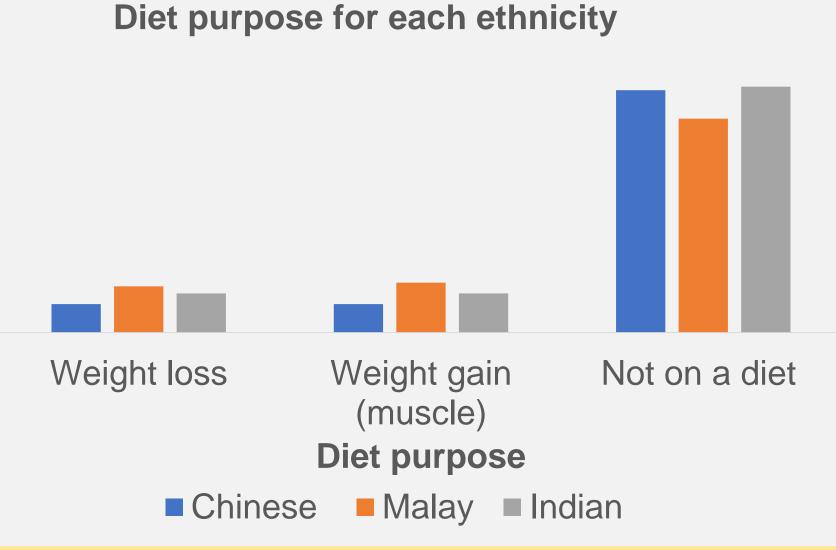
# **Body image dissatisfaction and eating attitudes** among men of various ethnicities in Singapore

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# Results

city	Chinese (n=84)	Malay (n=87)	Indian (n=92)
	23.27 ± 2.06	27.91 ± 10.58	36.88 ± 14.21
kg/m²)	22.33 ± 3.48	24.88 ± 4.79	24.96 ± 4.05
ht discr.	1.38 ± 7.06	5.54 ± 11.94	4.61 ± 11.34
e discr.	-12.14 ± 16.36	-7.24 ± 13.83	-4.13 ± 17.47

city	Chinese(n=84)	Malay (n=87)	Indian(n=92)
26 Total	7.50 ± 6.42	10.44 ± 9.93	10.66 ± 9.23
ng	4.26 ± 4.29	$7.046 \pm 6.92$	7.16 ± 6.88
nia	$1.24 \pm 2.03$	1.14 ± 2.43	1.14 ± 1.81
control	$2.00 \pm 2.60$	2.25 ± 2.79	2.36 ± 2.85



Indian men were older and heavier than the Chinese and Malay (Table 1, p<0.0001).

□ Malay men were the most dissatisfied with their weight (Table 1, p=0.024).

Chinese men were the most dissatisfied with their body image and wanted to be more muscular (Table 1, p=0.004).

□On average, EAT-26 scores were below the clinical cut-off score(20). However, Indians and Malays scored higher than the Chinese men (Table 2, p<0.05).

□Majority of men from all ethnicities were not on a diet (Figure 1, p>0.05).

Indians and Malays were more concerned about weight, whilst Chinese men wanted to be more muscular.

This multi-ethnic male sample was at low-risk of developing eating disorders, especially muscle dysmorphia.

#### Figure 1. Comparing the diet purpose between the three ethnicities



# Results

# Conclusion