



Eating Disorder and Self Concept among Women

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Abstract:

The main aim of the present research was to study of the self-concept among normal women and women suffering from eating disorder concerning age and socio-economic status. Eating aptitude test EAT 26 by Dr G Garner was administrated to identify women suffering from eating disorder. For this study, 360 normal and women suffering from eating disorder of age group (15 to 25 age and 30 to 40 years) and SES (HSES, MSES, LSES) group of women to measure self-concept, self-concept questioner by V K Mittal and S Abrol was used. Results indicate that women suffering from an eating disorder have shown poor self-concept as compared to normal women. Women of HSES significantly differ on self-concept score as compared to MSES and LSES. 15-25 Year women do not differ on self-concept score as compared to 30-40 Years of women.

Keywords : Eating disorder; self-concept; women

1. Introduction:

Rapid changes are being carried out in every walk of life due to the development of science and technology and industrialisation, urbanisation in the modern age. On account of this, the lifestyle of human beings is being changed. Changed lifestyle has increased human needs. Due to the blind running after the means of material happiness, the proportion of complication, conflict, anxiety, pressure, frustration have increased. Such a situation produces stress. There are individual differences in coping with such a stressful situation. Some people face stressful situations quietly, while some others become the victim of behavioural disorders.

Rapid changes in the lifestyle of the modern age have made the role of women complex. The women have to against simultaneously with the individual family, social, vocational and cultural situation. In during so the women experience severe stress. Such severe stress brings mental disorder in women. Amongst different disorders prevailing in the current age, the proportion of eating disorder is more. Such disorder is found more in women than men. Specifically, it is seen more in women between the age of 18 to 35 years. There are also types of eating disorders (1) *Anorexia Nervosa* (2) *Bulimia Nervosa*.

Such belief prevails amongst women that thinness of body brings success, attraction, health, happiness are popular. It helps adjust with family members while on the other side instead of eating for survival, people live for eating. Food has become a pleasurable activity today. It has become a sign of social complication to eat Gujarati, Punjabi, Marathi, Chinese, and Continental Mugalai and invite friends and relatives to eat such items. On account of such items. On account of such opposing tendencies, some women d more dieting than necessary while some women consume more than necessary (They become foodaholics) and some others become the victim of bulimia

nervosa. Some other women are keeping themselves thin and in the anxiety of becoming overweight become the victim of anorexia nervosa. Some women believe that dieting disturbs their lifestyle. As a result, they were to take more food and become the victim of Obesity.

The study of personality indicates that the women who have become the victim of Anorexia Nervosa, whose weight is balanced, are found more neurotic or obsessional. The women who had decreased their weight is balanced are found more neurotic or obsessional. The women who had been reduced their weight by dieting are more introvert, more anxious are more parasite than women of normal weight. While the women who had become the victim of Bulimia Nervosa or Obesity are anxious, depressed and with low self-esteem. They wish to be perfect, yet have a poor self-image, negative self-worth is shy are lack assertive. They are often pre-occupied with fewer rejections in the sexual relationship and with not being attractive enough to please a man.

According to Attie, Brooks- Gunn, (1989) Disturbances in body image have suggested being associated with a high risk for developing EDS, depression and low self-esteem.

Smolak & Levine, (1994). To increase the same hood of attending success in school and their social aspects of life, many young girls believe that they must fit the thin ideal.

Cash and Szymanski, (1995) have found that the magnitude of the discrepancy between self-perception of one's body and internalised ideas about it are associated with body dissatisfaction and eating disorders.

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Stomer, Thompson, (1996), body dissatisfaction is thought to arise primarily from sociocultural pressures to be thin, and physical deviation, from the current thin ideal espoused for women in western culture. Sociocultural pressure to be thin emanates from a vast number of sources, including mass media, parents, siblings, and peers and dating partners. Persistent messages that one is not thin enough putatively result in dissatisfaction with one's physical appearance and women, in general, are more prone to suffer those pressures.

Connors, (1996) found that the normative levels of body dissatisfaction and dieting so prevalent in the current socio-cultural context may be differentiated from clinically significant eating disorders from emotional disturbance. Body dissatisfaction and dieting behaviours could be viewed as spanning a continuum from slight to very intense. Individuals may mild to moderate levels without other life impairment. Women with more symptoms with eating disorders seem to have high levels of body dissatisfaction and disturbed eating attitudes and behaviours in conjunction with other psychological problems including more significant levels of depression feelings of ineffectiveness, self-criticism, impulsivity, emotional reactivity and life impairment.

Nelson, Hughes, Katz, and Searight (1999) conducted a study about the anorexic eating attitudes and behaviours of female college students. Using data, they constructed a picture of a typical female problem eater: she had low physical

and personal self-esteem. Low physical self-esteem involves a negative perception of one's appearance, physical competence, while low personal self-esteem involves a diminished view of one's self-worth and personal competence.

According to **APA**, (2000) Eating disturbances and disorders occur in children, adolescents, adults and the elderly, but the majority of the research has focused on people between the age of twelve and twenty-two.

Andersen, Cohn, & Holherook. (2000) studied that unhealthy eating, weight-related behaviours, and body image dissatisfaction exists in vast numbers of young females, as well as college students and adults.

Cattarin, Thompson, Thomas, and Williams, (2000), they found that media presented images of women can affect (either positively or negatively) both mood and satisfaction with appearance within a normative female sample. A moderating factor to this finding was the tendency of the participant to internalise socio-cultural norms for attractiveness. Thus, if females are especially susceptible to the socio-cultural norm of attractiveness being associated with thinness and are bombarded with the image of such, they tend to be more at risk to have a higher level of body dissatisfaction, and thus an eating disorder.

Shislak & Crago, (2001) found that low self-esteem, weight concerns, dietary restraint, body dissatisfaction, depression, negative emotionality early maturation and being overweight are risk factors for the development of eating disorders and disturbance.

In the present research, the attempt has been made to make a comparative study of the self-concept of women suffering from eating disorder and normal women between age 15 to 25 age and 30 to 40 years and SES.

Problem of the study:

A study of the self-concept of Normal women and women suffering from eating disorder in relation to Age and SES.

Objectives of the Study:

The main objectives of the present study were as under:

1. To study and compare women suffering from an eating disorder and normal women with regard to their self-concept.
2. To study and compare 15 to 25 years old and 30 to 40 years old age groups of women suffering from an eating disorder and normal women concerning their self-concept.
3. To study and compare HSES, MSES, LSES women suffering from an eating disorder and normal women concerning their self-concept.

Hypothesis:

Primary Hypothesis of the present research work is as under:

1. There is no significant difference between women suffering from an eating disorder and normal women concerning self-concept.
2. There is no significant difference between 15 to 25 years and 30 to 40 years women Concerning self-concept.
3. There is no significant difference among HSES, MSES and LSES women concerning self- concept.
4. There is no significant interaction effect between women (women suffering from eating disorder and normal women) and Age concerning self-concept.

5. There is no significant interaction effect between women (women suffering from eating disorder and normal women) and SES concerning self-concept.
6. There is no significant interaction effect between Age and SES of women concerning self-concept.
7. There is no significant interaction effect among a type of women, Age and SES of women concerning self-concept.

Variables:

In the present research type of women (normal women and women suffering from an eating disorder), Age (15 to 25 and 30 to 40 years) and SES (HSES, MSES, LSES) of women are considered as Independent variable and score of self-concept is considered as a dependent variable.

Sample

The present research work conducted on 360 women. The purposive sampling technique used for the selection of samples. The women were selected from various areas of Gujarat such as Ahmedabad, Surat, Gandhinagar and Vallabh-Vidyanagar. The total sample is categorised as under.

	A1		A2		Total
	B1	B2	B1	B2	
C1	30	30	30	30	120
C2	30	30	30	30	120
C3	30	30	30	30	120
Total	90	90	90	90	360

A = Women

A1 = Women Suffering from eating Disorder, A2 = Normal Women

B = Age

B1 = 15 to 25 yrs. B2 = 30 to 40 yrs.

C = SES

C1 = HSES, C2 = MSES, C3 = LSES

Tools:

Following tools used in present study.

1. Eating Aptitude Test (EAT-26) by Dr D Garner.
2. Socio-economic Status Scale (SESS) by Dr D. J. Bhatt
3. Self-Concept Questionnaire (SCQ) by V K Mittal and S Abrol.

Procedure:

In the present study, with the help of EAT-26, identified the women were suffering from eating disorder and normal women, with regard to their SES (HSES, MSES, and LSES) and age (15 to 25, 30 to 40). After identification of ED and normal women, self-concept questionnaire by V. K. Mittal and S. Abrol was administered individually. Scoring was done as par scoring key of the test.

Statistical Analysis:

After analysing the data and to know the principal and interaction effect of three independent variables such as a type of women, Age and SES by three-way ANOVA.

Results and discussion:

Table
Showing Results of ANOVA on Score of Self Concept

Source of variation	SS	DF	MS	F	Level f Significant
Ass	5640.62	1	5640.62	6.32	.05
Bss	983.40	1	983.40	1.10	NS
Css	41395.71	2	20697.86	23.18	.01
A x B	22.00	1	22.00	0.02	NS
A x C	3578.75	2	1789.37	2.00	NS
B x C	717.70	2	358.85	0.40	NS
A x B x C	838.81	2	419.09	0.47	NS
W _{ss}	310767.97	348	893.01		
T _{ss}	363944.33	359			

The results of ANOVA on self-concept score Table is consulted, and it is found that F ratio for women is 6.32 which is significant at .05 level. That means women were suffering from an eating disorder significantly differ on self-concept score as compared to normal women. Women suffering from an eating disorder have shown poor self-concept as compare to normal women. Normal women develop proper self-concept while those suffering from eating disorders are not psychologically normal. The reason is that women with eating disorders have low self-esteem, feeling worthlessness and always underestimate them in society. They need acceptance and approval from others. These are the reasons why women with eating disorders have a poor self-concept. They make self-defeating statements after food consumption.

The F ratio for age is 1.10, which is not significant. That means 15 to 25 yrs women do not differ on self-concept score as compared to 30 to 40 yrs women. It can be said that a significant difference does not exist between 15 to 25 yrs women and 30 to 40 yrs women on self-concept score.

The F ratio for SES is 23.18, which is significant at .01 level. That means women of HSES higher socioeconomic status (higher socioeconomic status) significantly differ on self-concept score as compared to women of MSES (middle socioeconomic status) and LSES (lower socioeconomic status). It can be said that a significant difference existed among a various group of SES on self-concept score.

Women of MSES and LSES have shown poor self-concept as compare to HSES women. It has been concluded that women belonging to middle socioeconomic status and lower socioeconomic status have a poor self-concept than the women pertaining to higher socioeconomic status. It is quit natural and acceptable that women of middle and lower socio economic status get very few opportunities to develop their self fully. In comparison with higher social class women, career orientation and opportunities for self-enhancement are very few in middle and lower class. Moreover, the women of higher social class are more ambitious, and they have high achievement motivation than the women of middle and lower class women.

The F ratio for women and age is .02, which is not significant. That means women and age do not interact with each other on self-concept score.

The F ratio for women and SES is 2.00, which is not significant. That means women and SES do not interact with each other on self-concept score.

The F ratio for age and SES is 0.40, which is not significant. That means to age, and SES do not interact with each other on self-concept score.

The F ratio for women, age and SES, is 0.47, which is not significant. That means women age and SES do not interact with each other on self-concept score.

Conclusions:

1. Women suffering from eating disorder significantly differ in self-concept score as compared to normal women. Women suffering from an eating disorder have shown poor self-concept as compare to normal women.
2. 15 to 25 yrs women do not differ on self-concept score as compared to 30 to 40 yrs women.
3. Women of HSES (higher socioeconomic status) significantly differ on self-concept score as compared to women of MSES (middle socioeconomic status) and LSES (lower socioeconomic status).

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