

## Body Dissatisfaction and Social Anxiety Among Obese and Non Obese Young Adult Females

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### ABSTRACT

The objective of the study is to find relationship between body dissatisfaction and social anxiety among obese and non obese young adult females. This a quantitative study and was conducted among adult females (N= 60), who were from in and around Kerala (obese=30, non obese= 30) and were chosen by simple random sampling technique. The participants were briefed about the study and their willingness to participate was asked. Then the basic information was collected using socio demographic status profile, which was followed by Social Anxiety Questionnaire for Adults (Saq-A30) and Body Shape Questionnaire 16 A. The data was analyzed using statistical tools such as Karl Pearson Coefficient of Correlation and independent t- test. The results showed a significant strong relationship between social anxiety and body dissatisfaction and there was a significant difference among obese and non obese adult females in body dissatisfaction and social anxiety.

**Keywords:** *Body dissatisfaction, Social Anxiety*

Obesity is the excessive accumulation of body fat. Generally, fat should constitute about 20–27 percent of body tissue in women and about 15–22 percent in men. Obesity is a growing global health problem and is now so common that it has replaced malnutrition as the most prevalent dietary contributor to poor health worldwide. Obesity typically results from over-eating (especially an unhealthy diet) and lack of enough exercise. Most of the world's population live in countries where overweight and obesity kills more people than underweight. The overweight or obese population is defined as the inhabitants with excessive weight presenting health risks because of the high proportion of body fat. Based on the WHO classification, adults with a BMI from 25 to 30 are defined as overweight and those with a BMI of 30 or over as obese. Adult obesity is more common globally than under-nutrition. A steadily increasing trend of obesity among young adults, especially college and university students, is becoming evident in the modern world. Usually, obesity results from a combination of inherited factors, combined with the environment and personal diet and exercise choices. Women have a greater risk of getting obese than men and seem to have greater complications too. Obesity in women affects psychological and mental health and is associated with certain pregnancy risks like miscarriages and higher rates of caesarean sections Obesity becomes a social stigma and

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## Body Dissatisfaction and Social Anxiety Among Obese and Non Obese Young Adult Females

people take obese people useless and in reality obese people cannot perform several tasks that other people can. Obese people find it difficult to face social gatherings because lots of people taunt and poke fun of obese people. Due to the social problems they face, they become alone and they hide themselves in their cocoons. It needs lots of confidence to face the world with obesity. Obese individuals automatically assume that they aren't as good as people who are skinny or weigh less. There are so many societal misconceptions and a stigma surrounding obesity and that makes it hard for people to see the real point of being themselves and being confident. In today's society, with the growing sense of being ideal people try to lose or gain body weight to attain that perfect body. All around the world, people suffer from trying to impress other people and themselves with body image. When a person has negative thoughts and feelings about his or her own body, body dissatisfaction can develop. Individuals in appearance oriented environments or those who receive negative feedback about their appearance are at an increased risk of body dissatisfaction and this has been seen rising during recent years mainly in adult population. There are many factors like peer pressure, media, community that increase the social anxiety and body dissatisfaction in young adults. Media promotes body dissatisfaction in young adult's ages 16-27 because of the constant exposure to what is perceived as the ideal body. Women were altered in order to be seen as beautiful, causing an unrealistic standard for people within society to achieve leading body dysmorphia in (body dissatisfaction-IRR).

Body dissatisfaction develops when people have negative thoughts about their own body image. Intense body dissatisfaction can damage a person's psychological and physical well-being. And when people begin to define their own self-worth based on their negative body image, a number of mental health issues can occur, including eating disorders. Typically, dissatisfaction involves a perceived discrepancy between one's current body and one's ideal body that fosters negative emotions and discontent. Body dissatisfaction has been viewed as normative and has received growing research attention during recent decades. The surge in popularity is due in part to the increasing prevalence worldwide, as well as implications for the development of a range of maladaptive behaviors and emotions, such as decreases in self-esteem, self-regulations, physical activity, happiness, optimism, pride, and increases in disordered eating, depressive symptoms, and body-related shame and guilt. Pressures for women to be thin and fit and for men to be lean and muscular can originate from numerous sources, including the media, parents, siblings, partners, and peers. These sources may provide direct or indirect pressures to attain the desirable physique. Body dissatisfaction is a person's negative thoughts about his or her own body. This includes judgments about size and shape, muscle tone and generally involves a discrepancy between one's own body type and an ideal type. Some dissatisfaction with one's body may be normal. When it becomes extreme or influences how you perceive yourself, then there may be a problem. And Social anxiety is the fear of being judged and evaluated negatively by other people, leading to feelings of inadequacy, inferiority, self-consciousness, embarrassment, humiliation, and depression. If a person usually becomes irrationally anxious in social situations, but seems better when they are alone, then "social anxiety" may be the problem. Social anxiety disorder is a much more common problem than past estimates have led us to believe.

## **METHODOLOGY**

### *Aim*

The study intends to investigate the difference of social anxiety among obese and non obese young adult females namely "body dissatisfaction and social anxiety among obese and non obese young adult females".

## Body Dissatisfaction and Social Anxiety Among Obese and Non Obese Young Adult Females

### *Specific objectives*

1. To find out the difference in body dissatisfaction among obese and non obese young adults.
2. To find out the difference in social anxiety among obese and non obese young adults.
3. To find out the relationship between body dissatisfaction and social anxiety.

### *Hypothesis*

Ho1-There is no significant difference in body dissatisfaction among obese and non obese young adults.

Ho2-There is no significant difference in social anxiety among obese and non obese young adults

Ho3-There is no significant relationship between body dissatisfaction and social anxiety.

### *Variables*

Independent Variable: Body dissatisfaction

Dependent Variable: Social Anxiety

### *Sample*

The present study consisted of 60 young adult females from Kerala. Among them 30 were obese and the other 30 were non obese young adults. Convenient sampling method was use

### *Instruments*

Two measures were used in this study,

1. **Socio demographic sheet (Caballo, Salazar, Irurtia, Arias, and CISO-A Research Team, 2010):** Socio demographic sheet is a semi-structured interview schedule. In this study socio-demographic sheet is used to collect information regarding relevant variables such as name, age, gender, education and some other information about the subject.
2. **Body Shape Questionnaire ((BSQ) Cooper, Taylor, Cooper and Fairburn):** The Body Shape Questionnaire (BSQ) is a 34 item self-report measure of concerns about body shape, in particular the phenomenal experience of being fat. BSQ was developed by Cooper, Taylor, Cooper and Fairburn in 1987. The full version of BSQ comprises 34 questions and several short forms of BSQ have been introduced, which are: 16- item and two 8 item scales that showed equivalent convergent and discriminant validation against other parameters. The BSQ gives us a way to explore the role of extreme worries towards the body's appearance.

### *Procedure*

After obtaining permission from the concerned guide, the data collection was started. Because of the present condition due to Covid-19 proper data collection was not possible. So due to covid restrictions, the data collection was done through several online platforms using Google forms. All the instructions were provided in the form itself. The participants were assured that their responses will be kept confidential and were requested to respond truthfully. Then the data was taken for analysis.

## **RESULTS AND DISCUSSION**

Results of Analysis of Socio demographic details of the respondents

This chapter deals with the results and discussion obtained after the detailed statistical analysis of data which was collected for the present investigation. The results are then interpreted. The aim of the study was to compare body dissatisfaction and social anxiety

## Body Dissatisfaction and Social Anxiety Among Obese and Non Obese Young Adult Females

among obese and non obese young adult females. The present study consisted of 60 young adult females from Kerala. Among them 30 were obese and the other 30 were non obese young adults. Convenient sampling method was used.

**Table 4.1: Mean, SD, t value and level of significance obtained by the obese and non obese adult females in Body dissatisfaction**

Variable	Obese/Non obese	Mean	SD	t- value	Significance
Body dissatisfaction	Obese	47.86	10.129	-9.282	0.001
Body dissatisfaction	Non Obese	25.46	7.541	-9.282	

Table 4.1 indicates the mean, standard deviation, t value and level of significance among obese and non obese young adult females in body dissatisfaction. On this variable, the mean 47.86 and 25.46 are the mean scores obtained for the sample, obese and non obese young adult females.

In the t test, p value is 0.001 and the t- value is -9.282. Therefore, the null hypothesis is rejected. That means there is a significant difference in body dissatisfaction among obese and non obese young adult females.

On the basis of the mean score, the obesity based difference is seen among the females in the body dissatisfaction. Young adult obese females shows more score in body dissatisfaction than the non obese young adult females. The high score in the Body shape questionnaire by Cooper indicates that the person has more concerns about their body and greater experience of feeling fat. So, the above table indicates that young adult obese females are more concerned of their body size and shape than non obese young adult females. This also means that non obese young adult females have less body dissatisfaction than Young adult obese females.

Researches reflect that young adult females with obesity face a lot of problems like emotional distress and are more likely to have lower self esteem. This might be due to their thought that they don't look good and the feeling that they don't look normal causes them to not fit with the regular crowd. They also worry that they might be bullied by others because of their weight and which also trigger their feelings of shame. This is a leading cause to develop body dissatisfaction in them. Many researchers also show that obesity is associated with body image concerns and causes body dissatisfaction mostly in females.

**Table 4.2: Mean, SD, t value and level of significance obtained by the obese and non obese adult females in Social anxiety**

Variable	Obese/Non obese	Mean	SD	t- value	Significance
Social Anxiety	Obese	89.266	11.452	-5.325	0.001
Social Anxiety	Non Obese	71.566	14.151	-5.325	

Table 4.2 indicates the mean, standard deviation, t value and level of significance among obese and non obese young adult females in social anxiety. On this variable, 89.266 and 71.566 are mean scores obtained for the sample, obese and non obese young adult females.

In the t-test, p value is 0.001 and the t value -5.325. Therefore, the null hypothesis is rejected. That means there is a significant difference in social anxiety among obese and non obese young adult females.

## Body Dissatisfaction and Social Anxiety Among Obese and Non Obese Young Adult Females

On the basis of the mean score, the obesity based difference is seen among the females in social anxiety. Young adult obese females show more score in social anxiety than non obese young adult females. The high score in Social Anxiety Questionnaire by Caballo indicates that the person has greater level of anxiety in various dimensions like criticism and embarrassment, interaction with others, speaking in public, etc. So, the above table indicates that young adult obese females have more anxiety problems than non obese young adult females. This also means that young adult obese females have more social anxiety than than non obese young adult females.

Researches reflect that the young adult females with obesity face a lot of psychological issues related to mood, self esteem, stress, body image, etc. The high prevalence of these problems may be due to the experience of weight- related stigma and discrimination they face from the society. Researches also suggest that depression is common among young adult females with obesity than non obese young adult females due to the society's emphasis on thinness as a characteristic of female beauty. Viewing from this aspect, it is not surprising that people with extreme obesity report increased anxiety in social situations due to the society's emphasis on thinness as a marker of physical beauty.

**Table 4.3: Correlation between variables social anxiety and body dissatisfaction**

	Social anxiety	Body Dissatisfaction
Social Anxiety	1	0.521**
Body Dissatisfaction	0.521**	1

\*\* Correlation is significant at the 0.001 level (2- tailed)

Table 4.3 indicates the product moment correlation between the study variables. It is depicted that body dissatisfaction and social anxiety have a positive correlation with high significance ( $r= 0.521$ ,  $p< 0.001$ ). So, the hypothesis which states that states there is no significant relationship between body dissatisfaction and social anxiety is rejected.

Several studies show that body dissatisfaction and social anxiety are related to each other. Oliveira Regis, et.al (2018) conducted a study on "Social anxiety symptoms and body image dissatisfaction in medical students: prevalence and correlates". In the result of the study, it was revealed that SAD symptoms and BID are common and related problems that should be screened for among medical students. In the present study, body dissatisfaction and social anxiety are positively correlated with each other which indicate that when body dissatisfaction increases social anxiety also increases.

Body dissatisfaction is a negative attitude towards the own physical appearance and originate from a perceived discrepancy between the actual physical appearance and the desired ideal state of the body. Young adult females with obesity may experience high levels of body dissatisfaction as they feel more concerned being overweight and are more worried about the weight gain. Excessive weight has also lead to an increase in other psychological and physical problems. In the result, it can be seen that there exists a positive correlation between Body dissatisfaction and social anxiety. From that it is understood that when body dissatisfaction increases social anxiety also increases. So, in obese young adult females, when body dissatisfaction increase, it may lead to increased level of social anxiety.

## **SUMMARY AND CONCLUSION**

### *Implications of the study*

Studies are the growing pillars for next generation. The aim of the present study was to reveal the body dissatisfaction and social anxiety among the obese and non obese young adult females. Young adult females with obesity face many psychological and physiological problems in their daily life. They fear about being fat and are more concerned about their body. There exist many social stigmas about being fat and these are negatively affecting them. So, the awareness about obesity among people has to be increased and programmes to improve and promote a healthy lifestyle are to be introduced. Interventions on increasing awareness about obesity help them identify their disease so that they can get proper treatments. Both individual and group counselling can also be provided to improve their mental health.

### *Limitations of The Study*

Major limitation of the study was that it was conducted during lockdown period due to Covid-19 pandemic, so it might affect the result of the study and it can be positive or negative effects.

The mood state of women and also lack of understanding of questions might affect the study. Lack of interest or tiredness due to more number of items in the questionnaire might affect the study.

- Sample size was comparatively small and so cannot be generalized.
- Study was conducted only in females
- This is a cross sectional study.
- Limited to a particular country.
- Study was conducted in a short term.
- The truthfulness of the study depends on the honesty of those who filled the questionnaire.

In the quantitative study, the results are limited as they provide numerical description rather than detailed narrative and generally provide less elaborate accounts of human perception.

### *Scope for further research*

- The variables included in the present study were limited. Hence further studies may be conducted incorporating new variables.
- The study can redesign to include more samples from different area. Various extraneous factors, such as family structure, physical status, emotional maturity etc should also be explored in the future study. The study can redesign by following longitudinal study.

## **CONCLUSION**

There are so many studies done in the areas of females with obesity that have provided more information about the physiological and psychological obesity. The present study was conducted to find out the relationship between body dissatisfaction and social anxiety among young adult females with obesity. The sample for the present study consisted of 60 young adult females (30 with obese and 30 non obese) from different districts of Kerala. The sample consisted of females and the age for females with obesity and females with included 18-35 years. Body Shape Questionnaire developed by Cooper, Taylor, Cooper and Fairburn was used to measure the body dissatisfaction and Social Anxiety Questionnaire (SAQ-30)

## Body Dissatisfaction and Social Anxiety Among Obese and Non Obese Young Adult Females

developed by Caballo et.al was used to measure social anxiety. The data collected were analyzed using appropriate statistical techniques such as t-test and Pearson correlation coefficient.

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## Body Dissatisfaction and Social Anxiety Among Obese and Non Obese Young Adult Females

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### **Conflict of Interest**

The author declared no conflict of interest.

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