

## Personality Traits as Predictors of Orthorexic Eating Behaviors in Working Women

Jaanvi Harnal<sup>1\*</sup>, Dr. Monika Srivastava<sup>2</sup>

### ABSTRACT

Orthorexic Eating Behaviors, a pathological fixation towards healthy eating, can be influenced by various Personality Traits. Therefore, the present study explores the Personality Traits as predictors of Orthorexic Eating Behaviors among working women aged 21-50 in the northern region of India. A total of N=110 participants were initially screened for Orthorexic Eating Behavior tendencies using the ORTO-15 tool, resulting in a final sample of N=87. The ORTO15 (Donini et al., 2005) tool was utilized to assess Orthorexic Eating Behaviors, while the Big Five Inventory (John & Srivastava, 1999) was used to evaluate Personality Traits. Results from Correlation analyses reveal that Conscientiousness (C) ( $r = -.13$ ,  $p = .112$ ), Extraversion (E) ( $r = -.10$ ,  $p = .160$ ), Agreeableness (A) ( $r = -.05$ ,  $p = .312$ ), and Neuroticism (N) ( $r = -.05$ ,  $p = .294$ ) did not reveal significant associations with Orthorexic Eating Behaviors, whereas Openness to Experience (OTE) ( $r = -.20$ ,  $p = .005$ ) demonstrate a significant negative correlation. Regression analysis further indicates that only Openness to Experience (OTE) ( $\beta = -.203$ ,  $p = .005$ ) emerge as a significant negative predictor of Orthorexic Eating Behaviors. The findings of Openness to experience are consistent with previous literatures suggesting that individuals scoring high on this dimension are more adaptable to diverse eating patterns and be less prone to rigid dietary restrictions.

**Keywords:** *Orthorexia Nervosa, Personality Traits, Emotional Neglect, Eating Disorders, Orthorexic Eating Behaviors*

Our capacity to make decisions about how, where, and how much we eat determines our ability to survive. Adopting a balanced eating pattern is necessary to establish healthy lifestyle since, among many other advantages, it protects against the onset of diabetic complications and cardiovascular conditions and contributes to the reduction of obesity (Bazzano, 2006). Nonetheless, some people's concern with a "clean" or healthy diet is linked to major issues with their social and physical well-being (McComb & Mills, 2019). Over the past twenty years, there has been a rise of interest in an illness known as Orthorexia nervosa, a unique concept regarding eating disorders that is characterised by a pathologic fixation on biologically pure foods that can result in significant dietary restrictions, obsessive food thoughts, affective dissatisfactions, and severe social isolation (Donini, 2004;

<sup>1</sup>Student, School of Liberal Arts and Management, DIT University, (Mussoorie, Diversion Road, Makka Wala, Uttarakhand

<sup>2</sup>Professor, School of Liberal Arts and Management, DIT University (Mussoorie, Diversion Road, Makka Wala, Uttarakhand

\*Corresponding Author

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Catalina, 2005; Mathieu, 2005). The terms *orexic*, which refers to "hunger or appetite," and *orthorexia*, which literally means "accurate, straight, rigid, valid, or correct" (Bratman, 1997) refers to a "*fixation with appropriate and healthy eating.*"

Orthorexic Eating Behaviours have become a subject of concern in the public health domain, and is gaining worldwide recognition as a threat to physical and psychological wellbeing. Although Orthorexia nervosa has gained a great deal of attention in the global scenario it is not officially classified as a disorder or medical condition, yet. Research has primarily focused on Western populations, with limited attention given to Asian and Indian contexts, particularly among working women in the age range of 21–50, who experience unique sociocultural and workplace pressures or stressors. The lifestyle of working women faces a set of unique challenges, including juggling multiple roles and responsibilities, which they often face at heightened levels of stress and societal expectations that can result in influencing eating habits, which may lead to the development of Orthorexic Eating Behaviors. Moreover, there is an established connection between workplace stress and adverse psychological outcomes like eating disorders, seen both as causes and consequences (Siegel & Sawyer, 2018).

Emerging studies suggest that Orthorexic tendencies are not confined to Western cultures and may be prevalent in Asian societies (Sethi et al., 2021; Nair et al., 2022; Smitha et al., 2022). Factors such as globalization, increased access to health information, and changing dietary habits may contribute to the rise of Orthorexic Eating Behaviors in Asian countries, including India (Abdullah et al., 2020; Kumar et al., 2022). Therefore, literature regarding Orthorexia and India has been majorly focused on prevalence rates, (Sethi et al., 2021; Ginimole et al., 2022) and other psychological mechanisms (Jain & Sharma, 2021).

The personality correlates of Orthorexia nervosa have been addressed only by a few studies, and mostly in western societies. Personality is defined as the persistent features, interests, motivations, values, self-concept, talents, and emotional patterns that make up an individual's own way of adjusting to life. One study investigated the incidence of Orthorexia nervosa among college students and its correlation with personality factors. The findings indicated a relationship between features like control and rigidity and Orthorexic tendencies (Bundros et al., 2016). Consistent findings have emerged for traits like, Conscientiousness, Perfectionism, Obsessive-compulsive tendencies and its association with.

Orthorexia Nervosa (Bundros et al., 2016; Barrada & Roncero, 2018; Domingues & Carmo 2019). Moreover, higher degrees of Neuroticism, Narcissism, and Perfectionism have been linked to Orthorexia Nervosa, related attitudes, beliefs, actions, and emotions in people (Oberle et al., 2017; Leizer & Rigo, 2018). One such study has postulated the complex role personality tends to play in Orthorexic tendencies. For instance, two studies, one from Germany and one from the United States, examined the relationship between Personality Traits, specifically the Big Five model, and Orthorexic tendencies. Findings varied across samples and measures, with inconsistent results regarding the association between Personality Traits like Neuroticism and Agreeableness, and Orthorexic Eating Behaviors (Barthels et al., 2015; Barrada & Roncero, 2018).

The present study helps fill the gap by investigating the *predictors* of Orthorexic Eating Behaviours in the northern region of India. The primary predictor in this study is focused upon Personality Traits, particularly the Big 5 Personality traits (Costa & McCrae, 1998): *Openness to Experience, Conscientiousness, Extraversion, Agreeableness, and Neuroticism*

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since it is included in the majority of personality descriptions and is frequently used to investigate disordered eating behaviours and attitudes in everyday life scenarios, which makes it supporting competent. (Wade et al., 2000; Scott, 2000; Diaz & Marsa, 2000; Larew et al., 2013; Miller et al., 2006). Recognising this predictor is of utmost concern in context to addressing a growing health concern that is stressed on Orthorexic Eating Behaviors which are on the rise globally. Overall, the present study on Personality Traits and as predictors of Orthorexic Eating Behaviours may hold vast significance. It addresses a public health issue within a specific demographic, contributes to understanding this eating pattern, and can help inform healthcare practitioners of the overall well-being of a population that remains underrepresented. By shedding light on the interplay between these factors, this study may suggest for more effective interventions, ultimately promoting healthier relationships with food and better mental health outcomes among working women.

### *Objectives of the Study*

The present objectives the study are:

- Determining the prevalence of Orthorexic Eating Behaviors among working women.
- To assess the severity of Orthorexic Eating Behavior tendencies in the sample population i.e. working women within two threshold range i.e. Below 35 and 40.
- Investigate the role of Personality Traits from *Big Five Personality Model* (Openness to Experience, Conscientiousness, Extraversion, Agreeableness, and Neuroticism), in predicting Orthorexic Eating Behaviors in working women.

### *Hypotheses*

- **H1:** Personality Traits (Openness to Experience, Conscientiousness, Extraversion, Agreeableness, and Neuroticism) are significant predictors of Orthorexic Eating Behaviors among working women.
- **H0:** Personality Traits (Openness to Experience, Conscientiousness, Extraversion, Agreeableness, and Neuroticism) are not significant predictors of Orthorexic Eating Behaviors among working women.

## RESEARCH METHODOLOGY

### *Sample*

The convenient sampling method for this research study is selected to ensure a representative and diverse group. Initially,  $N=113$  participants' responses were received however, the sample size was adjusted to  $N=110$  after excluding three incomplete questionnaires from participants residing in different regions outside the specified criteria. The final sample consists of  $N=87$  participants from Northern region of India, based on careful screening process that involves applying ORTO-15 cut-off scores for Orthorexic Eating Behavior tendencies. The inclusion criteria target Indian working women ages between 21-50 ( $30.05 \pm 3.14$ ), representing a broad age range relevant to the working population.

### *Research Design*

This present study employs a correlational research design to investigate the predictive relationships (Regression analyses/Multiple Regression) between *Big Five* Personality traits, and Orthorexic Eating Behaviors. Openness to Experience, Conscientiousness, Extraversion, Agreeableness, and Neuroticism are seen as *Predictor variables*, and Orthorexic Eating Behaviors is seen as *Criterion variable*.

### *Data Collection Tools*

1. **ORTO-15** (Donini et al., 2005): The ORTO-15 is the first standardised and self-reported instrument with a 4-point Likert-scale developed for Orthorexia Nervosa comprising of 15 items. The items presented in the scale addresses the selection, preparation, effect of, consumption, and attitude towards assumed to be healthy food. The original authors of the test assumed that there are three underlying aspects: the clinical items (3,7,8,9,15), the cognitive-rational items (1,5,6,11,12,14), and the emotional items (2,4,10,13). The responses are marked on a 4-point Likert scale (*Never, Sometimes, Often, Always*), Responses indicating or scoring towards 1 were *Orthorexic*, and Responses indicating towards 4 were *healthy eating*. The maximum and minimum scoring range is: 1560, with lower scores associating with more pathological behaviors. Normally, two cut-off scores for Orthorexic Eating Behaviors were proposed: Below 40 and 35 (Zotes, Bayon & Montserrat,2004).
2. **Big 5 Personality** (John & Srivastava, 1999): The 44-item inventory is designed to measure the five broad personality traits- Openness to Experience, Extraversion, Conscientiousness, Agreeableness, and Neuroticism. The items are marked on a 5-point Likert scale, ranging from *strongly disagree* to *strongly agree*. The reliability coefficients for this scale are 0.70 extraversion, 0.71 agreeableness, 0.72 for conscientiousness, 0.70 neuroticism, and 0.73 for openness. Each personality trait is evaluated on a scale from 1 to 5. The tool conveys good validity.

### *Procedure*

Utilizing non-probability convenient sampling method, data collection occurred through both offline and online mediums, facilitating better understanding of the chosen research variables. For offline data collection, a systematic approach was adhered. Prior to distributing process (questionnaires), participants were provided with detailed information about the research purpose, its objectives, and the importance of their participation. Informed consent was obtained, ensuring that the participants understood the nature and purpose of the study, the voluntary nature of their involvement, and the confidentiality of their responses. Basic instructions and precautions were also conveyed to enhance the accuracy and reliability of the collected data. For online data collection, utilization of a *Google form* was considered, a convenient and accessible platform for participants. The form specifically designed for the research study was shared with working women through various online sites or channels, such as: Social media platforms and mails, as an effective way to reach wider audience. The online distribution allowed for the inclusion of participants who may have not been easily accessible through offline modes, providing a more diverse and geographically dispersed sample. *The Google form* included the same informed consent info. and detailed instructions as the offline questionnaires, ensuring consistency in the data collection process. Additionally, regular monitoring and supervision were conducted throughout the data collection period to address any potential issues.

## **RESULTS**

Independent t-test analyses are conducted to assess the overall Orthorexic Eating Behaviors tendencies in working women across different thresholds of the ORTO-15 tool, i.e. cut-offs, below 35 and 40. The results shows that N = 87 (M = 33.77, SD = 4.76) of working women exhibit Orthorexic Eating Behaviors tendencies, with N= 31 scoring below the 40 ORTO-15 score threshold (M = 37.35, SD = 4.70) and N= 56 scoring below the 35 ORTO-15 (M = 31.78, SD = 4.76) score threshold. Statistically significant differences are also reported between these two thresholds (t= 10.31, p< .001).

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**Table 1. Analyses of overall Orthorexic Eating Behaviors tendencies among working women (N= 87)**

ORTO-15 Score Thresholds	N	Mean	SD	Std. Error Mean	t	df	p
Below 40	31	37.35	1.018	.183	10.314	85	.001**
Below 35	56	31.75	2.914	.393			

Significant  $p < .001$  (2- tailed);  $N = 87$

**Table 2. Coefficient of Correlation in Orthorexic Eating Behaviors and Personality Traits among working women (N= 87)**

Variables	OET	OTE	E	C	A	N
Orthorexic Eating Behaviors	1	-.203*	-.108	-.132	-.053	-.059
Openness to Experience		1	.366**	.383**	.377**	-.035
Extraversion			1	.335**	.181*	-.162
Conscientiousness				1	.407**	-.346**
Agreeableness					1	.028
Neuroticism						1

\*Correlation significant  $p < .005$  level (2-tailed); \*\*Correlation significant  $p < .001$  level (2-tailed); **Abbreviations:** OET: Orthorexic Eating Behaviors, OTE: Openness to Experience, E: Extraversion, C: Conscientiousness, A: Agreeableness, N: Neuroticism

Table 2 depicts the relationship between Personality Traits and Orthorexic Eating Behaviors among working women. The outcome of the present research reveals that four Personality Traits, namely, *Conscientiousness (C)* ( $r = -.13, p = .112$ ), *Extraversion (E)* ( $r = -.10, p = .160$ ), *Agreeableness (A)* ( $r = -.05, p = .312$ ), and *Neuroticism (N)* ( $r = -.05, p = .294$ ), does not demonstrate significant associations with Orthorexic Eating Behaviors. However, *Openness to Experience (OTE)* ( $r = -.20, p = .005$ ) exhibits a significant negative correlation with Orthorexic Eating Behaviors.

**Table 3. Regression analyses of Personality Traits and Orthorexic Eating Behaviors (N= 87)**

Predictors	B	SE	$\beta$	t	p
Constant	42.29	4.60		9.18	< .001
Openness to Experience	-.167	3.10	-.203	-1.91	.005
Conscientiousness	-.903	.076	-.132	-1.22	.224
Extraversion	-.101	.101	-.108	-.988	.321
Agreeableness	-.042	.085	-.053	-.492	.624
Neuroticism	-.038	.069	-.059	-.545	.587
<b>R<sup>2</sup></b>	.058				
<b>F</b>	2.306				.042

\*\***Dependent variable:** Orthorexic Eating Behaviors; **Predictors:** Personality Traits (Openness to Experience, Conscientiousness, Extraversion, Agreeableness, Neuroticism)

The results in Table 3 show that from *Big Five* Personality Traits only one trait emerges as a significant negative predictor against Orthorexic Eating Behaviors with  $R^2 = .058, F = 2.306, p < .042$ . The findings show that only Openness to Experience ( $\beta = -.203, p = .005$ ) found to be significantly (negative) predicted unlike Conscientiousness ( $\beta = -.132, p = .224$ ), Extraversion ( $\beta = -.108, p = .321$ ), Agreeableness ( $\beta = -.053, p = .624$ ), and Neuroticism ( $\beta = -$

.059,  $p = .587$ ) that were found to be non-significant predictors of Orthorexic Eating Behaviors. The findings establish *Big Five* Personality with a 0.05% explained variance in Orthorexic Eating Behaviors in working women.

### DISCUSSION

Energy-restricted diets are thought to be the first line of treatment for weight loss, long-term health effects, and weight management (O'Brien & Skinner, 2019). However, other treatment modalities or strategies may be more advantageous, especially for working women who have demanding schedules and high levels of work pressure (Cai & Lian, 2014). The connection between workplace mechanisms and eating disorders is of great importance, especially when studying Orthorexia Eating Behaviors, which claim a complex relationship between dieting, dietary patterns, and weight management (Langeveld & DeVries, 2015). Hence, eating disorders have been the most common form of mental illness affecting women since the 1950s (Blashill & Wilhelm, 2014).

The present findings highlight the prevalence and correlates of Orthorexic Eating Behaviors with Personality Traits among working women. The descriptive analyses show quite an inclination towards Orthorexic Eating Behavior tendencies among working women, highlighting the global impact Orthorexia encompasses. Therefore, we emphasize the need for further investigations in diverse cultural environments (Moroze et al., 2015). Statistical differences observed between the two ORTO-15 score thresholds stress the importance of considering variations in cut-off scores for Orthorexic Eating Behavior tendencies. It's interesting to note that in line with their multiple regression predictions, the analyses shows that four Personality Traits, *Conscientiousness*, *Extraversion*, *Agreeableness*, and *Neuroticism*, did not emerge as significant correlates of Orthorexic Eating Behaviours, except *Openness to Experience* which shows a statistical negative association. A challenging construct aimed towards previous evidences suggesting links between Personality traits, and Orthorexic Eating Behaviors. (Roncero et al., 2021; Pratt et al., 2023).

The findings of *Openness to experience* aligns with previous literatures postulating that individuals scoring high on this dimension may be more adaptable to diverse eating patterns and be less prone to rigid dietary restrictions. Individuals scoring high on *Openness* tend to exhibit greater psychological flexibility, which may protect against rigid and obsessive tendencies associated with Orthorexic Eating Behaviors (Sutin & Terracciano, 2016). Moreover, it's association with willingness to explore diverse culinary options and dietary preferences may engage them to opt a balanced approach to eating, incorporating variety of foods into their diet and avoiding the extreme dietary restrictions. Supporting the other four personality traits, *Neuroticism*, *Agreeableness*, *Extraversion*, and *Conscientiousness*, may indicate an unclear construct with a variety of forms. While these traits may exhibit negative correlations with Orthorexic Eating Behaviors, their influence on dietary patterns may be different and complex making it challenging to detect significant predictive associations (Sutin et al., 2017).

Each personality trait may employ a unique influence on eating behaviors, with unpredictable degrees of relevance to Orthorexic Eating Behaviors. For example, *Conscientiousness*, a personality trait comprising various factors such as organization, responsibility, self-discipline, and perfectionism. While certain factors may be positively associated with Orthorexic tendencies, others may exhibit neutral or negative relationships. For example, while high levels of organization and self-discipline may promote health-conscious behaviors, excessive perfectionism and rigidity may contribute to maladaptive

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dietary restrictions and obsessive-compulsive tendencies characteristic of orthorexia nervosa (Mackenzie et al., 2019).

Similarly, *Extraversion* and *Agreeableness* may influence social eating behaviors and dietary preferences but may not directly predict Orthorexic Eating Behaviors tendencies (Schumann et al., 2019). There has been no such substantial evidence that suggests any relation between Orthorexic Eating Behaviors with Extraversion, and Agreeableness (Szabo et al., 2013). These findings may suggest that people with Orthorexia Eating Behaviors may have lower levels of Extraversion because they find it harder to relate to others who hold different dietary beliefs. Compared to Neuroticism and Conscientiousness, Orthorexic Eating Behaviors qualities may have lesser associations with extraverted, agreeable, and other pleasant personality types due to the paucity of empirical data.

Viewing Neuroticism as a significant predictor of eating disorder in previous researches (Costa & McCrae, 1992; Cassin & von Ranson, 2005; Roncero et al., 2021), the above mentioned finding poses to view this personality trait differently. It can be interpreted that the manifestation of Neuroticism may differ among populations or culture. Factors like, cultural heritage or social conformity, and societal expectations may influence the expression of Neuroticism and its impact on eating *behaviors* in ways that may have not been fully explained or explored in previous researches. Additionally, the reason for different levels of Neuroticism in various cultures may seem to be related in ways an individual responds to questionnaires or other psychological tools (McCrae, 2022). Thus, differences in *response styles* than personality styles. Studies on resilience among working women, (Ruderman et al., 2002), highlight the ability of working women to adapt and thrive in the face of adversity. Neuroticism, characterized by emotional instability and vulnerability to stress, may interact with resilience factors to influence coping outcomes. For example, working women high in Neuroticism may exhibit resilience by seeking social support or engaging in self-care practices to manage stressors without resorting to maladaptive eating behaviors. While Neuroticism may affect individuals to negative emotional experiences, job satisfaction and a supportive work environment can shield the impact of Neuroticism on psychological well-being. Working women who experience high job satisfaction and low levels of stress may be less likely to involve in Orthorexic Eating Behaviors as a maladaptive coping mechanism (Greenhaus & Powell, 2006)

While the ORTO-15 has been widely used as a screening tool for Orthorexic tendencies, its psychometric properties, including reliability and validity, may vary across different populations and cultural environments. The tool's reliability in accurately detecting Orthorexic Eating Behaviors and its sensitivity to uncover symptom severity may be compromised, leading to measurement error and weakened associations with Personality Traits (Varga et al., 2013). Orthorexia nervosa is a multilayered and complex phenomenon influenced by various psychological, and socio-cultural factors. The heterogeneity of Orthorexic symptoms across individuals may not be adequately captured by the ORTO-15 tool, thereby limiting its ability to detect meaningful associations with Personality Traits. Additionally, the absence of a universally accepted diagnostic criteria for Orthorexia nervosa further complicates the interpretation of results (Depa et al., 2013).

Moreover, studies have found that the role of Personality Traits across cultures are influenced by cultural values prevalent in Indian societies like collectivism and conformity, which can be attributed to the moderate relationship found between Personality Traits and Orthorexic Eating Behaviors. Hence, this creates an urge for future scholars to conduct in-

depth cultural-specific investigations to identify these health-related behaviors. Discovering how these traits can temper Indian Working Women to Orthorexic Eating Behaviors may offer an insightful account into the psychological factors that can contribute to this condition. By identifying these predictors, healthcare professionals can take more effective measures to provide interventional strategies.

### ***Limitations and Future Directions:***

While the present study may contribute valuable insights, it is not without limitations. The use of self-report measures and cross-sectional data may help in introducing biases and limited causal inferences. Longitudinal studies may help studying the tracking changes in Personality traits, and Orthorexic Eating Behaviors over time that would lead in providing more conclusive findings. Additionally, cultural factors are complex and multi-directed, future research scholars are advised to consider a broader range of sample size and other variables that may contribute to study the impact and gain better results and directions.

## **CONCLUSION**

In conclusion, this study sheds light on the predictive role of Openness to Experience in Orthorexic Eating Behaviors among Working Women. While other Personality Traits did not show significant associations, these findings between Personality Traits and Orthorexic Eating Behaviors, challenges the previous studies, and literatures that emphasize the contradictory concepts when investigating predictors of Orthorexia. Practical implications of the study include raising awareness among healthcare professionals about the possible risk factors for Orthorexic Eating Behaviors in Working Women. By recognizing the role of Personality Traits, particularly Openness to Experience, in predicting Orthorexia Eating Behaviors, interventions and support programs can be shaped accordingly for individuals at higher risk. Additionally, promoting a balanced diet approach and stress management techniques in workplace settings can help lessen the risk. In terms of future applicability, the study highlights the importance of considering cultural and contextual factors when examining eating behaviors and mental health outcomes. Further research can be suggested to explore the relationship between Personality Traits, work-related stressors, and sociocultural influences on Orthorexic Eating Behaviors in diverse populations. The relevance of the study lies in its contribution to the growing body of literature on Orthorexia nervosa and its predictors, particularly in the context of Working Women in India.

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The authors declare that they have no conflicts of interest related to the publication of this manuscript.

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