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Perception of Body Image in Students and Related Factors

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Abstract: Body Image Concern (BIC) is dysmorphic appearance concern includes intense concern and preoccupation with a perceived defect in appearance as well as behaviors connected to this concern. The subjective perception that an individual has of his body may be more important than objective reality of his appearance. Few studies have assessed the perception of body image in students; therefore this study was designed to determine the affecting factors in perception of body image in student. This is descriptiveanalytical survey and the population consisted of students of Urmia University (Iran). Simple random sampling was used and 260 of students participated in this study. Data were collected by using a Body Image Concern Inventory (BICI) that developed by Littleton. Validity of scale was determined by content and translation validity. Reliability of scale determined by conbach alpha ($\alpha = 0.88$). The results of this study revealed that perceived body image concern in students was moderate (57.47±5.6). There was a statistically significant difference between medical and nonmedical groups (p<0.0001) and also between married and unmarried students (p<0.004). Females were significantly more concern about body image (p<0.02) but was no significant correlation between BICI and age (r = -0.07, p<0.25). As body dissatisfaction is considered to be associated with the low self-esteem, higher number of depressive, anxiety and obsessive-compulsive syndromes the identification of this group of individuals and related factors that affect body image may permit the development of early preventive strategies.

Key words: Body image, student, reliability, self representation, appearance, Iran

INTRODUCTION

Body image is an important aspect of self-representation and self-evaluation throughout life. Body image is a multidimensional construct; it is more frequently defined as the degree of satisfaction about oneself in regard to size, shapes and general appearance (Cash and Deagle, 1997).

Body Image Concern (BIC) is dysmorphic appearance concern includes intense concern and preoccupation with a perceived defect in appearance as well as behaviors connected to this concern. Dysmorphic appearance concern is characteristic of individuals with Body Dismorphic Disorder (BDD) and also common among individual with eating disorders (Littleton *et al.*, 2005).

Body dysmorphic disorder is defined as a preoccupation with an imagined or slight defect in appearance resulting in significant distress or impairment in important areas of functioning (APA, 2000). These patients are often concerned with facial features and are also likely to present to cosmetic surgery settings for treatment of their perceived defect

(Phillips and Diaz, 1997). When physical attractiveness affects the value attributed to an individual, the importance of an aesthetically pleasing appearance increases and body image concerns become more likely (Cockerham *et al.*, 1988). While some body dissatisfaction can be considered normative, for a minority of individuals, preoccupation with bodily flaws (though slight or even non-existent) can result in excessive psychological distress and significant functional impairment in daily activities (APA, 2000).

Body image concern typically begins in adolescence, however it is usually diagnosed years later, partly because of the sufferers' reluctance to discuss their concerns (APA, 2000). Phillips and Diaz (1997) determined in their large sample that the mean age of patients who present for treatment is early to mid-thirties while the mean age of onset was 16. Another study investigating the demographic features associated with body image concern reported that the average age of onset was 17.9 years (Veale *et al.*, 1996). In a recent study, 19% of men and 25% of women in an American population sample reported marked concerns about their physical

appearance (Harris and Carr, 2001). Dissatisfaction with one's appearance can commonly occur; however, it generally fails to significantly affect one's life. Alternatively, body image concerns can be excessive and quite devastating (Bohne *et al.*, 2002a). High levels of perceived stress have been reported among persons of body image concern (DeMarco *et al.*, 1998).

Some researchers suggested that a negative self-perception of one's body image can be related to low self-esteem and a higher number of depressive, anxiety and obsessive-compulsive symptoms (Biby, 1998; King et al., 1996; Bohne et al., 2002b). Phillips (2000) conducted an investigation of the quality of life of 62 persons with body image concern using the Medical Outcomes study 36 item short form health survey. Scores of individuals that have body image dissatisfactin were compared to quality of life norms for the general U.S. population and for patients with depression or a medical illness. Individual with dysmorphic appearance concern sufferers scored lower in all areas of mental-health related quality of life as compared to the U.S. norms and patients with diabetes, depression or myocardial infarction (Phillips, 2000).

The emotional pain and desperation experienced by some body dissatisfaction sufferers can lead to suicidal ideation and suicide attempts. According to one study, 40% of individuals that suffer from appearance, experienced suicidal ideation during the course of their illness (Phillips and McElroy, 1993).

Studies and surveys have shown that dysmorphic concerns and body image dissatisfaction is increasing in the population (Sarwer et al., 1998; Cash et al., 1986). Over the last 20 years there has been an increase in the frequency of problems associated with body image and abnormal eating behavior in children and adolescents (Littleton and Ollendick, 2003). Many studies have demonstrated high levels of body image dissatisfaction (Wood et al., 1996). Body image dissatisfaction has been found to be more prevalent in student populations as compared to community samples (Cansever et al., 2003; Otto et al., 2001). It is important to discern whether students have any element of body image disturbance, because this may have some impact on their practice (Phillips et al., 1993, 2006; Gunstad and Phillips, 2003). Therefore, this study was conducted to determine the perception of body image concern and effective factors in students.

MATERIALS AND METHODS

This is descriptive-analytical survey and the population consisted of students of Urmia Univercity. Simple random sampling was used and 260 of students

participated in this study. The exclusion criteria were students who reported a diagnosis of anorexia nervosa or bulimia nervosa. Data were collected by using a questionnaire that comprised of two parts: the first part covered demographic information and the second part incorporated a Body Image Concern Inventory (BICI). Demographic information consisted of five parameters: age, gender, major, class of enrolment in college and marital status.

BICI developed by Littleton *et al.*, 2005 and the items of that were developed based on published cases of BDD and extra measures for use with individuals with BDD. Items evaluate dissatisfaction with appearance, checking and camouflaging of perceived appearance defects, reassurance seeking about appearance and social concerns and avoidance related to appearance defects. BICI comprised of 19 items, each question had responded in the form of 5 point Likert scale (never = 1, rarely = 2, sometimes = 3, often = 4, always = 5). The measure is scored by summing all the items. Scores can range from 19-95. Higher scores represented higher levels of dysmorphic concern (Littleton *et al.*, 2005).

Validity of scale was determined by content validity with cooperation of ten faculty members of Nursing-Midwifery School of Urmia City (Iran) and validity of translation assessed by one English language expert. Reliability of scale determined by conbach's alpha with participation of 30 students ($\alpha = 0.88$).

Study participants were asked to fill out questionnaires and then return them. Data were analyzed by using independent t-test and Pearson's Correlations, p = 0.05 was used to determine statistical significance.

RESULTS AND DISCUSSION

A total of questionnaire that distributed between students were returned, there were 116 (44.6%) male and 144 (55.4%) female students. Ages ranged from 18-25 years (mean = 20.56, SD = 1.52). Most of the students (88.1%) were unmarried, approximately 115 (44.6%) of participant were medical students and 144 (55.4%) were nonmedical students.

The results of this study revealed that perceived body image concern in students were moderate (57.47±5.6) and the items that create most concerns were: I feel others are speaking negatively of my appearance (3.83±0.75) and I fear that others will discover my flaws in appearance (3.49±0.92).

The mean BICI score among women was 85.57 ± 5.60) and among men 56.16 ± 4.54), also there was a statistically significant difference between women and men groups (p<0.0001) (Table 1). Women had a higher mean BICI

Table 1: Differences and frequency of reported BICI in male and female students

Parameters	Mean score	SD	N (%)	t-test
Male	56.16	4.54	116 (44.6)	-
Female	58.57	6.13	144 (55.4)	< 0.02
Total	57.47	5.60	260 (100)	-

Table 2: Differences and frequency of reported bic in married and single students

students				
Parameters	Mean score	SD	N (%)	t-test
Married	57.02	5.20	31 (11.9)	< 0.004
Single	60.35	7.10	229 (88.1)	-

score compared to men's group. The mean BICI score among married student was $60.35~(\pm 7.10)$ and among unmarried students $57.02~(\pm 5.20)$. The data indicated that there was a statistically significant difference between married and unmarried students (p<0.004) (Table 2). Single students reported that they were more concerned about some aspect of their appearance.

The results also show that there was no significant correlation between BICI and age (r = -0.07, p<0.25). In a comparison of medical and nonmedical students, significant group differences were found in scores on the BICI (p<0.0001). Body image concerns were significantly greater in medical students than nonmedical students.

The finding of this study clearly suggests a high frequency of body image concern in the sample. This is comparable with finding of Bohne *et al.* (2002a, b) that show body image concerns is common among American students. Nearly three-quarters of the American sample endorsed concerns about their physical appearance and approximately one-third reported preoccupation with their concerns and a large proportion of students (23.1%) reported that they compulsively checked their image in mirrors very often (Bohne *et al.*, 2002a, b).

Crystal et al. (1995) found that a higher percentage of Americans than Asians expressed the desire to improve their physical appearance when asked what they would like to change about themselves (Crystal et al., 1995). An early study of the prevalence of Body Dysmorphic Disorder (BDD) was conducted among a sample of American undergraduate students (n = 258, 57% female) investigators asked the students to rate the extent to which they agreed with each question on a Likert scale (1 = strongly disagree to 6 = strongly agree). About 70% of the sample reported some dissatisfaction with their bodies.

About 46% reported experiencing preoccupation with some aspect of their appearance and 48% noted that they tend to exaggerate the extent of the defect (Fitts *et al.*, 1989). Regarding to gender differences results show that female had more body image concerns (Table 1). The finding were concurrent with Moreira *et al.* (2005) study done on the Bahia, Brazil University with 88 female and

75 male medical students completed the Body Shape Questionnaire (BSQ) results show a great number of subjects had high BSQ scores. Body image dissatisfaction and overconcerns in reaching the ideal of an extremely thin body proved to be a frequent finding in female undergraduate medical students and there was statistically significant difference between women and men groups. Women had a higher mean BSQ score compared to men's group (Moreira *et al.*, 2005).

Fallon and Rozin (1985) concluded that 33% of men and 70% of women rate their current figure as larger than ideal and that body dissatisfaction among women is much larger than men.

One reason of most often cited for this continuing body dissatisfaction among women is the influence of the media and also reflect cross-cultural differences in the value placed on physical attractiveness and the resulting socio-cultural pressures.

The study indicated that body image concerns were more prevalent in single students (Table 2). This information is according to finding of Tom et al. (2005), in this study, the researcher investigated the importance of current body image dissatisfaction compared with the ideal for married couples and for single people. The results indicated that although body image dissatisfaction exists in both married and single people, this discrepancy is of significantly less importance to married couples.

The present study revealed that there was not significant relationship between age and body image concerns (Table 3) but according to another studies were found significantly relationship. For example, Tiggeman and Pennington (1990) researched body size dissatisfaction for children, adolescents and adults and found significant differences between the age groups. The results of Prevos (2005) show that ideal body shape increase as women get older, with a mild positive correlation between ideal body shape and age (Prevos, 2005).

This could support the theory of Fallon and Rozin (1985) as it could be argued that as women get older, being attractive to the other gender plays a lesser role in their lives. One reason for different results of the study with another is that the age group in this study are not broad and further refinement could be achieved by using broad range of age in participants.

The body image concerns were high in the medical student in the study (Table 4). The study of Taqui *et al.* (2008) appear that Body image dissatisfaction was quite high in the medical students. The majority (78.8%) of the students reported that they were concerned about some aspect of their appearance (Taqui *et al.*, 2008). This is slightly higher than the levels

Table 3: Relationship between age and BICI scores in students

Parameters	Mean score	SD	Pearson correlation	p-value
Age	20.56	1.52	-0.07	< 0.25
BICI	57.47	5.60	-	-

Table 4: Differences and frequency of reported BICI in medical and nonmedical students

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Parameters	Mean score	SD	N (%)	t-test
Medical	59.52	6.36	116	-
			(44.6%)	< 0.001
Non-medical	55.81	4.25	144	-
			(55.4%)	

of body image dissatisfaction reported in the study by Bohne *et al.* (2002a, b) on American college students (74.3%) and Fitts *et al.* (1989) on college students (70%). The higher prevalence of body image concerns in the sample could be accounted for by a number of different factors. Medical students might be more conscious about their physical appearance than students in most other fields of study because of society's high expectations from a doctor in terms of grooming and appearance.

CONCLUSION

This study has confirmed most of the findings of earlier researches. In summary, the analysis of this sample of students in the Urmia University of Iran confirmed the general impression that body dissatisfaction is frequently found in contemporary societies. As body dissatisfaction is considered to be associated with the low self-esteem, higher number of depressive, anxiety and obsessive-compulsive syndromes the identification of this group of individuals may permit the development of early preventive strategies.

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