

## **THE RELATIONSHIP BETWEEN EATING ATTITUDES AND SELF-ESTEEM AMONG UNIVERSITY STUDENTS**

**Cansu Ecem KESGIN\***

### **ABSTRACT**

Due to the prevalence of disordered eating habits and distorted body image perceptions eating attitudes and body image—especially with female participants—have been studied. The degree to which, connections between feelings of inadequacy and unhealthy eating attitudes are the main objectives of the study. To examine the relationship between self-esteem and eating attitudes, participants are asked by questions in two different measurement instruments. The purpose is to reflect the women's beliefs about themselves and their eating habits. Besides, elaborating issues related to false cognition about dieting and self-esteem is another principal object of the study. There are some studies related to the relationship between eating disorders and self-esteem among adolescents and adult women in clinical practice and research. The main issue underlying this connection is the self-criticism of women—regarding their eating attitudes and physical appearance. To figure out the degree of the relationship between self-esteem and eating attitudes of female students attending Girne American University, the study will include two distinct measurement instruments for understanding the degree of self-esteem and eating attitudes. The research is quantitative and involves data analysis of total scores of the used scales; as well as scores of subscales for a deeper understanding of the scope of self-esteem and eating attitudes.

**KEYWORDS:** Eating Attitudes, Self-Esteem, Eating Disorders, Physical Appearance, Self-Criticism

---

\* Girne American University, Cyprus

## INTRODUCTION

Most countries have associated slimness with beauty, attractiveness and possibly happiness (Smolak & Levine, 1994a). People, especially young women have idealized the idea of staying thin and healthy which they call it attractiveness. This ideal is aided by varieties of food programs and diet packages. Food no longer plays the sole role in surviving, but it effects being slim and attractive. Apart from its position for survival, recently food has been perceived for different needs. Due to increased knowledge and awareness about food and additional roles of eating, consumption attitudes and their association with emotional and psychological well-being has gained interest in clinical practices and researches (Fairburn, 1995). Additionally, eating disorders and body image disorders have become severe psychological matters that are affecting many individuals in various countries. Anymore, considering the changes in perception about eating and the thin ideal and anti-fat attitudes in society play a vital role. (Carney & Louw, 2006). Eating attitudes have been studied through their connections with individuals' emotions, social identity, interpersonal relationships, and psychological well-being (Schmidt, 1995; Fairburn, 2008). Sociocultural risk factors such as ideal weight, body size, and weight discrimination may lead to disordered eating and distorted body-image perception. Individuals may encounter problems to express themselves adequately in interpersonal relationships, either, with maintaining self-discipline due to unrealistic expectations from society (Farley, 2011; Kelly & Carter, 2013). Unhealthy eating patterns may stem from false cognitions; regarding thinness, success, and attractiveness (Kelly & Carter, 2013).

### Problem Statement

Media influence can be considered as a significant threat regarding transmitting knowledge about “acceptable” criteria; such as, body size, weight, and eating patterns. Therefore, individuals may be influenced negatively by these subliminal or conscious messages through television programs and advertisements (Farley, 2011). As a result, individuals may need to reach “acceptable” standards of body size and weight through unhealthy eating attitudes (Farley, 2011). False connections between beauty and thinness can be associated with striving for unreal expectations about body image and weight. Additionally, self-esteem is a critical phenomenon which can manifest itself during adolescence (Peck & Lightsey, 2008). According to numerous studies, female adolescents reported lower self-esteem than male adolescents. These results implied that

some expectations like how women can be presentable might lead to feelings of inadequacy (Verplanken&Tangelder, 2011). Aetiology of eating disorders includes individual, family, social, physiological, and emotional risk factors. One of the individual risk factors is individuals' self-esteem. Cases related to eating disorders reflect that individuals have disordered eating habits, low self-esteem, and even negative mood; such as depression and anxiety. Studies show that individuals with low self-esteem tend to associate their self-worth with their physical appearance (Kelly & Carter, 2013; Peck & Lightsey, 2008; Verplanken&Tangelder, 2011). Thus, an individuals' eating and exercise habits might be tailored by their lowered self-esteem to compensate for their self-worth through reaching acceptable and a presentable look (Verplanken&Tangelder, 2011).

### **Purpose of the Study**

Several studies help to understand why individuals have unhealthy or distorted relationships with food. It may include escape and masking theories of eating disorders which imply that some individuals who are coping strategies for adverse life events tend to turn to specific self-soothing strategies for evading the influence of negative emotions and unpleasant events (Fairburn, 2008; Sevincer&Konuk, 2013). Food can be perceived as self-soothing, fun, and functional in addition to its core function for survival (Schmidt, 1995).

### **The significance of the Study**

Eating is a basic need and a vital drive for survival. During the last several decades, researchers and practitioners have studied disturbances about eating and feeding beyond its function for mortality. Additionally, the main reasons underlying the awareness of eating disorders is about their severe comorbidity and relationship with other psychiatric conditions (Fairburn, 2008). With the rapidly increased prevalence of eating disorders in the past decades, eating disorder types and the possible triggering factors such as individual, social, psychological, physiological, and interpersonal factors have gained interest in clinical practice and research (Schmidt, 1995). Disturbances in eating attitudes and behaviours, as well as body image perception, might lead to disordered eating—especially among women in many countries mostly under the influence of Western cultures (Farley, 2011). Throughout history, eating habits, as well as problems in eating attitudes have been transformed by the needs and perceptions of individuals in different cultures

and periods (Keel, 2006). Thus, disorders related to nutrition and appetites have been very prevalent in many countries. Preoccupation and over-evaluation of body image, weight, and food have often led to problems in eating attitudes (Fairburn, 2008). Problems in eating attitudes may manifest themselves with different types. There are certain types of eating disorders which are categorized regarding their distinctive symptoms. These types include anorexia nervosa, bulimia nervosa, binge eating disorder, atypical eating disorders, and eating disorder not otherwise specified (EDNOS) (American Psychiatric Association, 2013).

In many countries around the world, problems in eating attitudes have increased very rapidly. Increases in strict dieting, dietary restraint, increases in the fast food industry, as well as mass media's impact on individuals about body image and eating attitudes have become critical factors on the prevalence of eating disorders and body dissatisfaction (Farley, 2011; Peck & Lightsey, 2008). Opinions about female beauty, attractiveness, and body image have influences on individuals' self-perception, changes in eating attitudes, and self-worth (Kelly & Carter, 2013). Inevitably, Western culture imposes the idea that physical attractiveness may be linked to thinness (Carney & Louw, 2006; Farley, 2011). Therefore, individuals will often have problems with their looks and eating habits; they will adopt unhealthy eating habits in order to reach an unrealistic but acceptable body image (Farley, 2011). Finally, due to body image, individuals may find themselves in a vicious cycle with feelings of inadequacy unhealthy eating and unwanted consequences such as weight gain, extreme weight loss, and distorted body image (Fairburn, 2008).

Thinking about one's physical appearance negatively can be a triggering factor for one's unhappiness and depression (Verplanken & Tangelder, 2011). Besides, depressive thoughts about physical appearance may be the result of body dissatisfaction, mainly stemming from societal pressure regarding thinness and low self-esteem (Kelly & Carter, 2013; Verplanken & Tangelder, 2011). Due to media exposure about the ideal body size, individuals, especially women, tend to associate self-worth with thinness (Carney & Louw, 2006). Messages from the media often imply that women have to be thin to look attractive and be successful in society (Farley, 2011). Media, through advertisements and movies, also shows that happiness is directly related to being thin (Verplanken & Tangelder, 2011).

In psychopathology and diagnosis, eating disorders have become a dangerous phenomenon. The main aim of this study was to cover the underlying aspects of specific types of eating disorders. The different types, etiologies, risk factors, and treatment methods are among the most critical issues which were covered as well as specific information about eating disorders. The study focused on one of the individual factors called self-esteem and its relationship with eating attitudes among female university students in order to understand the severity and prevalence of problems in eating attitudes as well as the scope of the emotional well-being of female university students.

### **Theoretical Framework**

Eating disorders are defined as psychiatric conditions influenced by social, emotional, interpersonal, and psychological factors (Fairburn, 2008; Keel, 2006). Eating psychology has been studied by this definition to understand the determinants of normal and abnormal eating attitudes (Fairburn, 2008). In recent studies, eating attitudes has been elaborated by considering the relationship with individual factors such as self-esteem, self-awareness, and self-control (Kelly & Carter, 2011; Lampard, Byrne, & McLean, 2011). For example, in Turkey, eating psychology has become an area of practice and research with an increase in the prevalence of eating disorders (Sevincer&Konuk, 2013). Therefore, related to disordered eating, it is important to examine possible triggers as well as risk factors. Clinical research regarding eating attitudes suggests that unhealthy eating habits due to psychosocial factors have been observed mostly among females (Fairburn, 2008; Schmidt, 1995). Additionally, as well as interpersonal relationships, women, have been influenced by the idealisation of body image through mass media (Farley, 2011; Smeesters, Mussweiler& Mandel, 2010). Unhealthy associations regarding physical appearance might give rise to abnormal eating and exercise patterns to attain society's body image standards (Farley, 2011).

### **Self-esteem**

Self-esteem (SE) refers to the evaluative sense of one's self (Wang & Ollendick, 2001), and an individual's self-concept. It includes their mental and physical characteristics and self-evaluation. SE is the discrepancy between what an individual is (self-image) and what an individual would like to be self-ideal (Baumeister, 1999). During adolescence, SE is affected by

an individual's judgment of self-competence in areas of high value. Research has shown that the development of a high SE such as physical attractiveness and acceptance by peers requires experiences of success within fields perceived to be of importance in someone's life (Whitesell, Mitchell, & Spicer, 2009). It is clear that for a good sense of self-esteem to develop, it is vital to have a caregiver's support and guidance during childhood and adolescence. At the childhood stage, self-esteem develops in response to the rejection or acceptance obtained from caregivers or significant others. Furthermore, adolescence positive and warm interaction with caregivers has been found to be associated with the positive representation of self and high self-esteem. Studies have shown a strong association between low SE and increased concerns about fatness among adolescents. High self-esteem has been shown as protective against disordered eating habits, and patients presenting eating disorders have lower levels of self-esteem (Blascovich & Tomaka, 1991)

Self-esteem during childhood is different between boys and girls (Baumeister, 1999). Girls look more dissatisfied with their body weight and have a poorer body image than boys. According to Baumeister, (1999) because of body image dissatisfaction and puberty associated issues and increases again during adulthood, self-esteem declines during adolescence. Other studies have shown low self-esteem in males and females to be associated with increased levels of body image dissatisfaction. A significant association between muscle dissatisfaction in men and poor self-esteem is demonstrated. Compared to those with high self-esteem, the majority of adolescent males who use steroids had low self-esteem (Baumeister, 1999).

### **Gender Differences in Self-esteem**

Observation of increasing gender divergence has occurred throughout the lifespan, and space expands during adolescence when boys' SE increases while girls' decreases. The spacing continues during adulthood and narrows or even disappears in old age (Kelly & Duckitt, 1995). A longitudinal study done by Brown and colleagues found that there was a decrease in self-esteem as age increased in adolescent girls than boys. Also, girls have lower self-esteem compared to boys in early adolescence. Methodological differences have been found between global self-esteem and the multi-dimensional self-concept measuring tool. Self-knowledge and evaluation of the value of one's capabilities formed through experiences are targeted by self-concept through

measuring perceptions. Self-concept constricts the focus to a more concise topic such as academic self-concept and addresses a more factual side of life and can be different throughout an individual's life. In contrast, global self-esteem measures feelings an individual has about himself or herself. The dependence of self-esteem is on attitudinal factors. The main difference between self-esteem and self-concept is that self-esteem deals with the feelings and emotions of an individual. Research on self-concept shows that it is an element that differs little over time whereas self-esteem flows throughout a lifetime (Kelly & Duckitt, 1995).

### **Influencing Factors in Eating Attitudes, Body image and Self-esteem**

Previous research has found biological, psychological and socio-cultural factors to be strongly associated with eating attitudes, body image and self-esteem in children and adolescents.

1. Body mass index (BMI) is acknowledged as the primary biological risk factor for body dissatisfaction and dieting behaviours in children and adolescents of both sexes. A relationship between obesity and weight control behaviours among adolescents have been found by both longitudinal and cross-sectional research (Burger & Doiny, 2002). BMI in males is related to the pursuit of muscularity as a low BMI would imply a small size. Thus, a desire to get bigger and more muscular and a high BMI might imply that a person is overweight or obese and thus is seeking to reduce their body fat. In cross-sectional studies, there are only weak associations between high BMI and dieting and other weight control behaviours among adolescent boys and girls. Low BMI is related to steroid use, overeating and the use of food supplements in males (Burger & Doiny, 2002). On the other hand, a higher BMI was found to have a linear association with body image dissatisfaction among female college students; another study found high BMI to be strongly correlated with negative body image.

2. Studies have shown adolescent gender differences in body dissatisfaction, self-esteem and eating disorders. Females are more likely than males to experience body image disturbances, and eating disorders (Robins et al., 2002). Also, males are less likely than females to weigh themselves—often, describe themselves as obese, and take part in dieting behaviours. Although men compared to women can have a positive self-image, physical growth is viewed more positively in males than females. However, males are not insusceptible to body image dissatisfaction, while females struggle for a thin body with slim hips, bottom and thighs; V-



shaped body is desired by males with massive biceps, chest and shoulders (Robins et al., 2002). Body dissatisfaction in males and females habitually develop into eating disorders.

3. During adolescence, socio-cultural factors have also been revealed to be the most significant risk factors for eating disturbances, body dissatisfaction and low self-esteem. Socio-cultural factors include media, family, cultural taboos, and social norms. The tripartite influence model of body dissatisfaction and eating disturbances in adolescents is well-known to signify the three most common socio-cultural factors of family, peers and the media, which translate into the processing of impossible ideals promoting a thin body image for female identity and societal approval. The model also illustrates the social assessment and thin-ideal internalization mechanism that mediate between the three factors. Human beings evaluate themselves through social comparison processes whereby they liken themselves to others by evaluating their ability, attitude and physical appearance. The social comparison process is divided into three main parts; 1) acquisition of social comparison information; 2) thoughtful relating information to self; 3) reacting to the information (Robins et al., 2002). Two cross-sectional studies have shown that perceived pressure from parents, peers and media to increase muscle in males and leanness in females were connected with weight change and muscle gain strategies.

4. According to Research, it has been widely acknowledged that there is a significant relationship between exposure to media and body image (Palmer, 2003). Eating disorders and body dissatisfaction have been detected to rise among girls and women who take part in subcultures that view thinness as desirable and beautiful. Media studies have reported that various advertising industries are targeting children and adolescents as consumers of fashions, cosmetics and exercise products (Palmer, 2003). This has caused an increase in the proportion of young girls with unhealthy eating habits such as dieting, induced vomiting, fasting, and using laxatives. Various Studies have also examined the relationship between disordered eating attitudes and exposure to and use of images in the mass media, and have emphasized stereotypes associated with body size (Rosen, 1996). Media places pressure on women being thin suggesting that larger size reflects unattractiveness and thinness is associated with attractiveness.

5. Some studies have reported peers to be a significant factor in adolescent body image (Burger & Doiny, 2002; Rosen, 1996; Fairburn, 2008; Schmidt, 1995). Several studies have revealed among boys that greater peer acceptance and popularity may be achieved by achieving a more muscular body that exhibits physical strength and athletic success (Burger & Doiny,



2002). Additionally, more adolescent males that are on the rocks were found to use steroids compared to those who had better peer relations. Cross-sectional studies have shown that parents and peers exert their influence via modelling and encouraging body change strategies in both female and male adolescents. However, according to a longitudinal study that followed up adolescent boys for eight months, weight loss strategies were identified to be only weakly connected with perceived parental and peer pressure to lose weight.

6. Similarly, perceived pressure to be thin from family, friends, dating partners and the media were positively related to bulimic symptoms. Another study found that pressure from fathers on male adolescents does not result in dieting behaviours (Fairburn, 1995). However, mothers were exposed to be more influential than fathers in emphasizing the need to lose weight among their sons and daughters. Additionally, a longitudinal study confirmed that perceived messages from parents and peers cause an increase in weight and muscle among male adolescents throughout 8 months. Studies have also shown that adolescent males with low self-esteem and high negative emotional affect are easily influenced by social messages from parents, peers, and media (Fairburn, 1995).

### **The relationship between Eating Attitudes and Self-esteem**

The purpose of the study was to examine the relationship between self-esteem and eating attitudes among female university students attending Girne American University (GAU). Self-esteem is one of the most determining factors which play a role in shaping eating attitudes and body image perception. Self-esteem can also be considered an individual's competence regarding their potential for improving effective coping mechanisms for daily life problems and negative experiences (Rosenberg, 1965). Individuals with low self-esteem mostly have problems dealing with everyday life crises as well as the influence of negative emotions (Peck & Lightsey, 2008). These individuals escape their negative feelings and experiences by adopting certain compensatory behaviours such as substance abuse or unhealthy eating (Fairburn, 1995).

### **Social Comparison Theory**

Social comparison theory was founded by Leon Festinger in 1954, indicating the importance of self-enhancement, self-evaluation, and upward and downward social comparisons. Specifically, the theory asserts that individuals try to obtain information for self-enhancement and explicit

self-evaluation by nonsocial and social means. Additionally, individuals may prefer superior or inferior models for comparisons of their actions and behaviours (Festinger, 1954). The theory was mainly based on nine distinct hypotheses emphasising the dynamics of social correlations under different conditions (Festinger, 1954). Briefly, the hypotheses were based on the various factors for individuals—such as strength, attractiveness, and similarity of opinions—when comparing themselves with other people or groups (Festinger, 1954).

Eating attitudes and self-esteem have been categorised as two research areas studied with the possible connections of social comparison processes of individuals (Tylka & Sabik, 2010). Specifically, media exposure regarding the false association of physical appearance and attractiveness enables individuals to compare themselves with the people and groups presented through mass media (Farley, 2011; Smeesters, Mussweiler & Mandel, 2010). Images transmitted through media may trigger individuals to adopt negative self-criticism regarding their body image and diet (Farley, 2011). Thus, it may also influence the self-esteem and self-evaluation of individuals in their physical appearance and dieting.

Many university students view television programs about cooking, eating, dieting, as well as celebrity lifestyles. Therefore, individuals have gained information about socially accepted standards of eating behaviour and physical appearance through these types of television shows. Negative self-criticism is one of the most critical psychological risk factors mostly studied with eating disorder patients and individuals with unhealthy eating (Kelly & Carter, 2013; Noodenbos, Aliakbari & Campbell, 2014). Related to these areas, they may experience the adverse effect of being in a vicious cycle of being depressed due to feelings of physical unattractiveness and feeling unhealthy with media exposure (Fairburn, 2008).

## **Research Design**

There have been many studies that are demonstrating factors of unhealthy eating attitudes among various age groups. However, recent studies on eating disorders have mostly focused on adolescents and young adults, including university students. According to this research, the main reason underlying the increase in eating disorder cases is based on individual, psychological, social, familial, and cultural factors. The primary purpose of this study is to show the relationship

between self-esteem, which is a critical psychological factor for an individuals' social and emotional well-being, and eating attitudes which is vulnerable regarding being influenced by different individual and societal factors. This study was maintained using two instruments for data collection which provide information regarding eating attitudes and self-esteem.

### **Instruments/Materials**

There were two instruments utilised for data collection in this study. The first scale used was the Rosenberg Self-Esteem Scale. It is perhaps the most widely-used self-esteem measure in social science research. It is a 10-item scale that measures global self-worth by measuring both positive and negative feelings about the self. All items are answered using a 4-point Likert scale format ranging from strongly agree to disagree strongly. The second scale used for this study was the Eating Attitude Test. It was used for understanding the behaviours of standard patterns and eating disorders of the participants. The EAT was developed by Garner and Garfinkel (1979), and it is probably the most widely used standardised self-report measure of symptoms and concerns characteristic of eating disorders.

### **Hypothesis**

The study hypothesised that self-esteem levels in female university students attending GAU are linked to coping with daily life stressors and overwhelming experiences and their eating attitudes. In other words, the students who score higher on the Rosenberg Self-Esteem Scale should display lower scores on the EAT-40, whereas, students scoring lower on the Rosenberg Self-Esteem Scale should report higher scores on the EAT-40. Therefore, the first hypothesis is:

H1. There will be a significant negative relationship between self-esteem and positive eating attitudes among GAU female students.

H2. There is a significant difference between Turkish and international students in negative eating attitudes.

### **Participants**

The research was conducted with 150 female university students who are attending Girne American University (GAU) in Kyrenia, Cyprus. Besides, socioeconomic and cultural

differences are clearly seen. The participants were recruited from various faculties at the university, and each participant was informed of the purpose of the study and confidentiality was maintained with each student. Therefore, informed consent was obtained by the participants to provide information about the nature and purpose of the study. Eligibility requirements (inclusion/exclusion criteria) were required for this study. The sampling needed to be enrolled at the university had to be female, and between the ages of 18 and above to participate in the study. Also, questions regarding the participant's educational level and location were obtained in order to understand socioeconomic and cultural differences.

### **Assumptions**

One of the assumptions of this research is that it will help individuals to gain insight and a more profound understanding of the importance of self-worth without over-evaluating thinness through education and psychotherapy intervention. Besides, the results of this study will help to collect information about the degree of the relationship between self-esteem and eating attitudes as well as the general idea about self-worth and self-esteem among participants, and overall, eating habits of the participants.

### **Limitations**

One of the limitations of this study was the small sample size. Since the study was conducted at a single university with limited sample size, the recruitment method and inclusion requirements of the participants might hinder generalizability of the results. Another limitation of this research was the instruments used. Because of the participants' native languages, there was limited access to different language versions of the scales utilised. The study could be enhanced with additional instruments if there were no limitation regarding language. The third limitation was the underlying risks of the self-report measurements. Social desirability and misunderstanding the questionnaire during survey completion may be considered as a limitation during the process.

### **Data Analysis**

For this study, correlational design was used for understanding the strength of the association between self-esteem and eating attitudes of female university students attending GAU. The self-report demographic questionnaire and surveys were distributed to several students and then

gathered after all inventories were completed. The surveys were used to collect data from the participants at various times during a school semester. The data from the study were analysed using the SPSS (Statistical Package for the Social Sciences) program. The analysis determined the effects and factors of eating attitudes involved in causing low self-esteem in female university students studying at GAU in the TRNC.

### Description of the Sample

Participants were 150 students recruited from Girne American University, TRNC in response to advertising posters that were distributed around the school. Table 1 shows the demographic characteristics of the sample. The mean age of the sample was 21.4 years (SD 11.1) and ranged from 18 years to 35 years of age.

Table I: Summary of Demographic information

Demographic variables		N	%
Gender	Female	150	150
Age	18-21	58	38.7
	22-25	70	46.7
	≥ 26	22	14.7
Nationality	Turkish	52	34.7
	International	98	65.3

### Hypothesis Testing

*Hypothesis One:* There will be a significant negative relationship between self-esteem and positive eating attitudes among GAU students.

Pearson Product-Moment Correlation Coefficients was performed to measure the strength and direction of the relationship between intercultural communication, interpersonal stress, core culture shock, and culture shock. Pearson Product-Moment Correlation Coefficients ranges from +1 to -1.

Table 2.

**Correlation of self-esteem (SE) and eating behaviour (EB)**

		SE	EB
SE	Pearson Correlation	1	-.329**
	Sig. (2-tailed)		.000
	N	150	150
EB	Pearson Correlation	-.329**	1
	Sig. (2-tailed)	.000	
	N	150	150

\*\*\*\* Correlation is significant at the 0.01 level (2-tailed).

Table 2 showed the relationship between self-esteem and eating attitudes among international students, and Turkish students in GAU. The results of the analysis revealed a negative relationship between SE ( $M = 21.62$ ,  $SD = 6.9$ ) and EB ( $M = 20.93$ ,  $SD = 9.7$ ) and a statistically significant correlation [ $r(148) = -.329$ ,  $p < .01$ ], suggesting that students with higher levels of self-esteem, tended to experience good eating attitudes.

**Hypothesis Two:** There is a significant difference between Turkish and international students in negative eating behaviour.

Dependent Variables	Nationality			
	International (N= 98)	Turkish (N= 52)		
	Mean/ SD		t	P- Value
Eating attitudes	30/ 9.0	29.6/ 9.6	.34	.77

**Discussions**

The results of this study showed that a negative relationship exists between self-esteem and positive eating attitudes among GAU female students. Negative relationship and no significant difference between Turkish and international students in negative eating attitudes are evidently shown. The results obtained in this study are consistent with several other works and theories developed about self-esteem, media, body image satisfaction and eating pathologies. The results are consistent with the work of Shafran & Robinson (2004) that defined body image as “a subjective concept of one’s physical appearance based on self-observation and the reaction of others” (p. 98). He claimed that several factors that can influence human physical appearances such as genetics, physiology, physical behaviours and the standards of one’s cultural norms of

which these multiple factors make the presence of people to differ to a great extent. Regardless of the vast difference that exists among human physical appearance, western cultures tend to emphasize slimness on women, and strong muscular body as an ideal body physique for women and men respectively. The media often depict the shape of men as broad and muscular, and women as slender and slim as the idea body physique.

According to Kelly & Carter, (2013) small size zero, and muscular body, which was attributed in the past to working class, are increasingly becoming the accepted, and desirable body type of choice by women and men respectively in western world which usually have devastating consequences such as eating disorders, and body image dissatisfaction among people. Kelly & Carter, (2013) claimed that these culturally stipulated ideals often mount pressure on people to conform which may invariably lead to increase in body image distortions, and bad eating habits, and negative body perception. According to Fairburn, (1995) the image distortion is inferred in many ways such as trying physically alter your appearance or making negative remarks about other people appearance. According to Baumeister (1999), there is always unwritten rules which are embedded in western cultures that pressurize people to seek to conform consciously. Therefore, the impact of cultural values on the ideals of body image is imperative to study.

According to Fairburn, (1995) self-esteem and media, as one of the chief agent of socialization, mirrored the socio-cultural environment to people, and are a constant influence on how people of all ages evaluate themselves as well as others. Media are responsible for creating and propagating the culturally fabricated ideal body physique which, Kelly & Carter, (2013) and Stock (2010) claimed to have a severe impact on body image perception. Issues about the media effect on body image perception have been much-debated topics among researchers from various backgrounds. For the aetiology and impacts, most researchers agreed that exposure to mass media contribute to an extent, to the misperception, unsatisfactory body perception and unhealthy eating habits that are prevalent among people nowadays.

## **Conclusion**

Dieting behaviour and the consistent thin image media presentations and self-esteem was the central issue in this thesis. The result demonstrated that eating attitude is negatively associated



with low self-esteem and that ethnicity may play a crucial role in eating habits. Thus, using the sociocultural theory explanation, the conclusion is that self-esteem is critical in eating pathologies.

The sociocultural theory offered insight into how people develop attitudes about ideal body shape and desirability. Culture influences as described by Davis and Katzman (1999) greatly determine we eat, wear and dress. There is an influence on people, especially women and girls, in the western culture about the unrealistic thin idea, which consists of being told that thin is beautiful. The sociocultural theory was defined when discussing body image by King. Moreover, as the aggregate experience of cultural pressure that emanate from different societal sources like the family, peers, and media to maintain specific idealized body image is socially acquired and reinforced through comparison to others.

Social psychological with cultural aspects such as media, family, friends and history are a combination of the sociocultural theory's ideas and concepts. Internalization of sociocultural messages concerning thinness, or idealized desirable body image influences body image disturbance (Kelly & Carter, 2013). Slimming down and weight conscious culture has made society think that weighing the body brings about the certainty of the self. Society implies that the right person is the physical body, that a good shape is a proper person, in this case being the ideal thin, or muscular and that the lousy form implies a wrong person—not the perfectly thin, or muscular.

Kelly & Carter, (2013) acknowledged that historically sociocultural factors have been the primary sources of body image distortions and eating attitudes. He suggested that most of the sociocultural problems originate from the incessant idealization of the culturally stipulated ideal body image, propagated by the media, which ignore the uniqueness of human. Cultures, especially western culture, idolizes thinness for women, broadness and muscular for men, encourages physical fitness, and derogate overweight (Kelly & Carter, 2013). Women especially are strained in culture to be the ideal body type, and this may lead to eating disorders.

## REFERENCES

- Bailey, S.D., & Ricciardelli, L.A. (2010). Social Comparisons, Appearance Related Comments, Contingent Self-Esteem and Their Relationships with Body Dissatisfaction and Eating Disturbance among Women. *Eating Behaviors*, 11(2), 107-112.
- Baumeister R., F (1999). *The Self in Social Psychology. Key Readings in Social Psychology*. New York, NY, US: Psychology Press.
- Blascovich, J., & Tomaka, J. (1991). Measures of Self-esteem. In J. P. Robinson, P. R. Shaver, & L. S. Wrightsman (Eds.), *Measures of personality and social psychological attitudes: Vol 1. Measures of psychological attitudes* (pp. 115-160). San Diego, CA: Academic Press.
- Brauhardt, A., Rudolph, A., & Hilbert, A. (2014). Implicit Cognitive Processes in Binge-Eating Disorder and Obesity. *Journal of Behavior Therapy and Experimental Psychiatry*, 45(2), 285-290
- Carney, T., & Louw, J. (2006). Eating Disordered Behaviors and Media Exposure. *Social Psychiatry & Psychiatric Epidemiology*, 41(12), 957-966.
- Cooper, M.J., & Proudfoot, J. (2013). Positive Core Beliefs and Their Relationship to Eating Disorder Symptoms in Women. *European Eating Disorders Review*, 21(2), 155-159.
- Fairburn, C.G. (1995). *Overcoming Binge Eating*. New York: The Guilford Press.
- Fairburn, C.G. (2008). *Cognitive Behavior Therapy and Eating Disorders*. New York: The Guilford Press.
- Farley, S. (2011). Mass Media and Socio-Cultural Pressures on Body Image and Eating Disorders among Adolescent Women. *Perspectives (University of New Hampshire)*, 100-107.
- Fitzsimmons-Craft, E.E. (2011). Social Psychological Theories of Disordered Eating in College Women: Review and integration. *Clinical Psychology Review*, 31(7), 1224-1237.
- Franzoi S., L., & Shields SA (1984). The Body Esteem Scale: Multidimensional Structure and Sex Differences in A College Population. *Journal of personality assessment*.
- Kelly M., & Duckitt, J. (1995) Racial Preference and Self-Esteem in Black South African Children. *South African Journal of Psychology*.

- Kelly, A.C., & Carter, J.C. (2013). Why Self-Critical Patients Present with More Severe Eating Disorder Pathology: The Mediating Role of Shame. *British Journal of Clinical Psychology*, 52(2), 148-161.
- Lampard, A.M., Byrne, S.M., & McLean, N. (2011). Does Self-Esteem Mediate the Relationship Between Interpersonal Problems and Symptoms of Disordered Eating? *European Eating Disorders Review*, 19(5), 454-458.
- Magallares, A. (2013). Social Risk Factors Related to Eating Disorders in Women. *Revista Latinoamericana De Psicología*, 45(1), 147-154.
- Mas, M.B., Navarro, M.L.A., Jimenez, A.M.L., & San Gregorio, M.A.P. (2011). Personality Traits and Eating Disorders: Mediating Effects of Self-Esteem and Perfectionism. *International Journal of Clinical Health & Psychology*, 11(2), 205-227.
- Noordenbos, G., Aliakbari, N., & Campbell, R. (2014). The Relationship among Critical Inner Voices, Low Self-Esteem and Self-Criticism in Eating Disorders. *Eating Disorders*, 22(4), 337-351.
- Palmer, C. J. (2003). Body Mass Index, Self-Esteem and Suicide Risk in Clinically Depressed African American and White American Females. *Journal of Black Psychology*, 29, 408-428.
- Peck, L.D., & Lightsey Jr., O. (2008). The Eating Disorders Continuum, Self-Esteem and Perfectionism. *Journal of Counseling and Development*, 86(2), 184-192.
- Powers, M.A., Richter, S., Ackard, D., et al. (2012). Characteristics of Persons with an Eating Disorder and Type 1 Diabetes and Psychological Comparisons with Persons with an Eating Disorder and No Diabetes. *International Journal of Eating Disorders*, 45(2), 252-256.
- Robins R.W., Trzesniewski K.H., Tracy J.L., Gosling S.D., Potter J. (2002) Global Self-esteem Across the Life Span. *Psychology and ageing*.
- Rosen, J. C. (1996). Body Image Assessment and Treatment in Controlled Studies of Eating Disorders. *International Journal of Eating Disorders*, 20, 331-343.
- Rosenberg, M. (1965). *Society and the Adolescent Self-image*. Princeton, NJ: Princeton University Press.
- Sevincer, G., & Komuk, N. (2013). Emosyonel Yeme. *Journal of Mood Disorders*, 3(4), 171-178.

- Shafran, R. & Robinson, P. (2004). Thought-Shape Fusion in Eating Disorders. *British Journal of Clinical Psychology*, 43, 399-407.
- Smeesters, D., Mussweiler, T., & Mandel, N. (2010). The Effects of Thin and Heavy Media Images on Overweight and Underweight Consumers: Social Comparison Processes and Behavioral Implications. *Journal of Consumer Research*, 36(6), 930-949.
- Smolak, L., & Levine, M.P. (1994a). Critical Issues in The Developmental Psychopathology of Eating Disorders. In L. Alexander-Mott & D.B. Lumsden (Eds.), *Understanding obesity: Anorexia nervosa, bulimianervosa, and obesity* (pp. 37-60). Washington DC: Taylor & Francis.
- Tylka, T., & Sabik, N. (2010). Integrating Social Comparison Theory and Self-Esteem within Objectification Theory to Predict Women's Disordered Eating. *Sex Roles*, 63(1/2), 18-31.
- Verplanken, B., & Tangelder, Y. (2011). Nobody Is Perfect: The Significance of Habitual Negative Thinking about Appearance for Body Dissatisfaction, Eating Disorder Propensity, self-esteem and snacking. *Psychology and Health*, 26(6), 685-701.
- Wang, Y. & Ollendick T., H. (2001) A Cross-Cultural and Developmental Analysis of Self-Esteem in Chinese and Western Children. *Clinical child and family psychology review*.
- Whitesell N.R., Mitchell C., M., Spicer P. A (2009) Longitudinal Study Of Self-Esteem, Cultural Identity, and Academic Success among American Indian Adolescents. *Cultural diversity & ethnic minority psychology*.