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# **The significant difference in self-concept and self-confidence among obese and non-obese young adults**

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**Abstract**---Obesity and overweight are both described as a build-up of elevated body fat that is hazardous to one's health. A BMI of 25 or above is considered overweight, while a BMI of 30 or higher is considered obese. In 2017, nearly 4 million individuals died as a direct result of being overweight or obese, as per the worldwide burden of disease report. The purpose of this study is to examine self-consciousness from adolescence which is a period in which a person develops ideas about himself physically and mentally. Your self-esteem is the way you see yourself, your strengths, and your unique characteristics. The study contained data collected from 100 adults between the ages of 18-25. The tools used were a self-confidence inventory developed by M.Basavanna and a self-concept scale by Mukta Rani Rastogi. Complete statistical analysis of the obtained data was performed using SPSS. T-testing and correlation of techniques used in the current study. The findings end up suggesting that there is a significant difference in self-confidence and self-concept among obese young adults and non-obese young adults. The results indicate how obesity in a way influences one's image about themselves and how it affects factors of their personality. When comparing both sets of data it can be concluded that obesity has taken a slight toll on the self-confidence and self-concept of those young adults with obesity.

**Keywords**---Obesity, BMI, Self-esteem, Self-concept.

**Introduction**

Obesity is one of the many difficult challenges that the contemporary world is confronted with today. Obesity and obesity-related physical and emotional issues

are on the rise at an alarming rate in these times when individuals are battling to find time for themselves. Obesity has increased dramatically in industrialized and, increasingly, developing countries during the last 30–40 years due to changes in food composition and availability. The way people live has changed tremendously. Instead of focusing on physical activities, there has been a paradigm shift toward adopting non-physical pursuits.

Children used to play in parks and playgrounds with their friends, but now they prefer to play mobile and computer games. Adults, as well as children, have significantly changed their lifestyles. People used to desire to do things by themselves. Everything was done by hand, from chores around the house to shopping for groceries. Since then, though, a lot has changed. Everything is currently on its way to you. One of the problems that has emerged from this way of life is obesity. Obesity is a cause for concern since it has negative health consequences, increasing the risk of a variety of illnesses and health issues. Obesity is defined as having an excessive amount of body fat that jeopardizes your health. Obesity, on the other hand, is not a decision that people make. A lot of body fat can lead to a slew of issues. Overweight and obesity have become a global issue in the previous ten years.

According to a study on the worldwide burden of sickness, approximately 4 million people died as a result of being overweight or obese in 2017. Obesity is a complicated health problem caused by a variety of variables, including heredity and behavior. Physical activity, inactivity, food habits, medication usage, and other exposures are examples of behavioral examples. Obesity has also been linked to a variety of main causes of mortality throughout the world, including diabetes, heart disease, stroke, and certain malignancies. Obesity and overweight are on the rise in both adults and children. Between 1975 and 2016, the global prevalence of overweight or obese children and teenagers aged 5 to 19 years increased by more than fourfold, from 4% to 18%. Obesity has been related to an increased risk of serious illnesses such as Type 2 diabetes, heart disease, and stroke. Obesity has been related to a higher risk of 10 chronic illnesses, including type 2 diabetes, heart disease, and cancer. The body mass index (BMI) is a measurement of a person's size based on their weight and height. Obesity is defined as a BMI of 30.0 or greater in adults, according to the Centers for Disease Control and Prevention Trusted Source (CDC).

Hereditary factors can also contribute to obesity. Due to genetics or heredity, some people are prone to gain weight more quickly than others. Furthermore, some medicines, such as those used by bodybuilders (steroids), antidepressants, and diabetic therapies, change the body's metabolism, causing appetite to increase and weight gain. Some folks are food addicts and couch potatoes who can't stop eating. In such a situation, one's appetite grows, and the risk of overeating junk food increases. Obesity is more likely to result from such behavior. Obesity is on the rise, which is concerning, but there are several therapies available. Furthermore, not all therapies are medical or surgical. Some of the treatments rely on dietary changes and adjusting to new levels of physical activity. You may lose weight by eating a nutritious, fiber-rich, and healthy diet. Obesity can also be avoided by not snacking in between meals and following a diet plan. Obesity is a problem that is affecting a growing number of people. As a

result, it's critical to educate people about the symptoms, causes, and therapies of the condition. This will make it easier to put in place the necessary measures to avoid obesity.

Everyone should strive to live a healthy lifestyle and avoid as many dangerous activities as possible. Although junk food is enticing and a nutritious dish looks to be undesirable, the greatest approach to keep healthy and fit is to choose a healthy plate over junk food. This is the most effective strategy for preventing obesity in oneself and one's family. Aside from the physical impacts of obesity on the body, it also has a mental impact on a person's thinking by reducing self-confidence, esteem, social qualities, and so on. Researches have shown a direct link between obesity and one's mental health though sometimes it may also differ from person to person. Emotional discomfort might contribute to overeating in certain persons. Stress may be eased through eating, which can lead to obesity and weight gain. Others may have mental health problems as a result of their obesity. A person who is overweight may feel self-conscious. Others may stigmatize or discriminate against overweight persons. These events can have a negative impact on a person's self-esteem. Obese people may have a harder time participating in pleasant activities, making coping with negative feelings more challenging.

Obesity and mental health problems frequently coexist. In some people, obesity can contribute to the development of mental health illnesses, while in others, mental health issues can lead to weight gain and obesity. Fortunately, there are things you can do to improve your physical and emotional health while losing weight. The study's necessity and relevance are as follows: Obesity and its impact on many psychological aspects have been the subject of several psychological investigations. However, the majority of them are carried out independently. There are just a few studies that look at all of these factors at the same time. The goal of this study is to look at these two psychological qualities, self-concept and confidence, and see how they interact. The research will assist in understanding the impact of obesity on aspects such as self-concept and self-confidence, which will be beneficial to both instructors and students.

### **Review of literature**

Obesity has been the subject of a few significant studies. Obesity, adolescence, self-esteem, and a range of other characteristics and challenges are examined in these studies. The Relationship Between Body-Esteem and Self-Esteem in Obese and Normal Children was studied by Beverley Katz Mendelson and Donna Romano White. 36 primary school pupils completed the self-esteem and body-esteem questionnaire (20 were under 15 percent overweight and 16 were over 15 percent overweight). The Body-Esteem Scale has been confirmed to be accurate and appropriate for children as young years have passed. Self-esteem and the proportion of overweight persons differed considerably from body-esteem. There was no significant association between self-esteem and relative weight, even though body-esteem and relative weight were linked. Furthermore, the body-esteem and self-esteem of the 20 normal children and the 16 fat children in this group were identical.

A systematic review of self-esteem and quality of life in obese children and adolescents was undertaken by Lucy J Griffiths, Tessa J Parsons, and Andrew J Hill. Despite the fact that an increasing number of youths are becoming obese, the psychological effects of obesity remain little understood. Overweight and overall self-esteem have been connected in a few studies before. However, no research has been done to see how this affects obese young people's multi-component self-esteem and quality of life ratings. According to a study of the literature, there's been 17 self-esteem and 25 quality of life studies using cross-sectional, longitudinal, or intervention methods since 1994. Obese children had substantial reductions in global self-esteem and quality of life, including both child completed and parent proxy assessments. Physical competence, attractiveness, and social functioning were the most affected skills. There were no obvious changes in impacts between children and adolescents, and there was no mention of gender or ethnicity. Increases in competence were found with or without weight reduction, indicating their viability as effective interventions and need for more research.

Elizabeth Wadden, Thomas A. Foster, Gary D. Brownell, Kelly D. Finley, Thomas A. Foster conducted a research on the self-concept of 716 White children in Grades 3–8 were compared (as evaluated by the Piers-Harris Children's Self-Concept Scale), who were classed as obese or normal-weight after age, sex, and height were taken into account. Obese individuals are people that are 20% or more overweight in comparison to their optimal weight. Between the two groups, there were no significant differences in self-perception.

Research on childhood obesity and self-esteem was undertaken by M.D. Karen M. Kaplan and Ph.D. Thomas A. Wadden. The Piers-Harris Self-Esteem Inventory was given to black inner-city youths to see if there was a link between obesity and self-esteem (grades 4 through 12). Only 851 people were included in the research because they had chronic illnesses or were in special education. The BMI was used to quantify adiposity, and data from the Ten State Nutrition Survey was used to build reference growth curves (TSNS). Each child's BMI was determined, as well as their BMI in comparison to the TSNS ideals. Small variations in mean self-esteem ratings were discovered using analysis of variance to compare groups based on relative BMI (3 to 4 units or one-third standard deviation). The clinical significance of these statistically significant differences is unlikely. The link between BMI and self-esteem was modest, accounting for only 1% of the variance in self-esteem scores. In addition, all levels of self-esteem were within normal limits. The relationship was unaffected by age or gender. Obesity in children may have fewer negative implications than previously thought. Our findings might explain why, despite the promise of improved self-esteem, many young individuals do not reduce weight.

Jane Wardle and Lucy Cooke also researched the effects of obesity on mental health. Obese children and adolescents encounter prejudice and stigma in many aspects of their lives, and their mental health is likely to suffer as a result. The most recent empirical evidence on the association between childhood obesity and body dissatisfaction, self-esteem, and depression is examined in this study. In population-based studies, treatment seekers usually have lower psychological well-being than obese and normal-weight controls. Despite modest levels of body

dissatisfaction, community-based research suggests that only a small percentage of obese children are unhappy or have low self-esteem. Females, Caucasians, and youngsters are particularly prone to the link between fat and happiness, which has been revealed to have a variety of essential regulators and mediators. The consequences of therapy are discussed, as well as future research requirements. Even though there has been a lot of research on fat children and adults, this study attempts to fill a vacuum by focusing explicitly on the variations in self-confidence and self-concept of obese and non-obese young people.

A study on obesity research among young individuals in the Middle East was conducted by Atoofi, Qorbani, Asayesh, Rezaei, Saeedi Moghaddam, and Djalalinia. Policymakers and other stakeholders have been attentively following and assessing related scientific material as the alarming trends of pediatric obesity and overweight have sparked their attention. This paper quantifies the findings of research on adolescent obesity/overweight in Middle Eastern countries. From 2000 to 2017, the Scopus database, the most comprehensive multidisciplinary database, was exhaustively examined for any related obesity/overweight concerns, including juvenile age groups. Between 2000 and 2017, Middle Eastern countries produced 2350 articles on the topic of youth obesity, accounting for 0.40 percent of the region's total 591,105 indexed papers. With 574 publications, Iran was top in this area (24.43 percent). With 489 (20.81 percent) and 313 (13.32 percent) articles, Turkey and Saudi Arabia finished in second and third, respectively. According to the data, throughout 18 years, all Eastern Mediterranean nations are taking incremental initiatives to address the issue of adolescent obesity. Iran and Turkey are also experiencing fast expansion (0.77 percent and 0.40 percent, respectively). Between 2000 and 2017, scientometric data like "number of published papers" and "number of citations" found that the P-trends in the overall number of important published articles and citations in region countries were substantial (2168 publications and 34,132 citations, P 0.001). Obesity/overweight articles and references seem to be on the upswing in most nations, both globally and regionally, according to the findings. Iran's standing among them has significantly improved. Maintaining and progressing in this profession necessitates meticulous preparation and dedication. The insights might be utilised to improve health policies and conduct more study.

Harriger and Thompson performed research to better understand the psychological effects of obesity. Overweight and obesity in youngsters have become much more common in recent decades. While it is well known that childhood obesity is linked to a variety of negative health outcomes, such as diabetes and cardiovascular disease, and innumerable adverts have resulted in greater increased physical activity dietary choices in children, there seems to be less research on the negative affective effects of obesity, such as negative body image and body issues. This study looks into weight stigma and body shape disruption in overweight/obese children, mental health issues and early life overweight/obesity, and factors that contribute to body image concerns in overweight and obese teenagers. Weight does not cause negative psychological outcomes when teasing/victimization is taken into account, as per the study. As a result, further research into these characteristics is necessary, as the findings

may have implications for future preventive and treatment efforts. There are a lot of methodological challenges in this field of writing when looking at modern techniques. Self-report evaluations are used in the majority of research, which is a drawback.

Behavioral observations, according to Puhl and Latner (2007), may assist in understanding how overweight/obese children are stigmatized and abused. As per Neumark-Sztainer and colleagues (2002), overweight/obese children are more likely to be teased than children of normal weight, hence using other assessment methods might help to mitigate some of the prejudice in self-report measures. Another issue with current research is that more and more studies rely on data that may be distorted. Unfavorable beliefs and their ties to discriminatory behaviour, according to scholars, should also be explored. Finally, they advocate for more research on the many types of victimisation (physical, verbal, and relational) and how they are associated with bad psychological results. Despite the fact that research has shown that stigmatisation of overweight/obese people is widespread, additional study is needed to properly understand the long-term effects of teasing and stigmatisation on children. There is also a need for more study towards decreasing and preventing teasing and stigmatisation.

Additional study areas identified by Puhl and Latner (2007) include the nature/extent of stigma, origins of stigma, psycho-social implications of shame, eating and other health-related behaviours, and stigma removal. In overweight/obese children, weight stigmatisation and taunting have been linked to a variety of detrimental physical and psychological consequences. As a result, in addition to weight loss, components addressing body satisfaction, healthy eating and exercise habits, and appreciation of varied body shapes should be included in the prevention and treatment of adolescent overweight/obesity. Individuals, families, schools, and healthcare professionals must be taught that weight and body size have no bearing on one's health, and that weight discrimination is a serious problem that must be addressed immediately.

### **Significance of study**

There are various psychological studies regarding obesity and its effect on various psychological factors. But most of them are separately carried out. There are hardly a few studies that examine all these aspects jointly in a single research. This study aims to examine these two psychological aspects namely self-concept and confidence jointly to understand their effect together. The study will aid in understanding the effect obesity has on factors such as self-concept and self-confidence and hence will be of great use to teachers and students alike.

### **Objectives**

To assess self-confidence and self-concept among obese young adults and non-obese young adults and also evaluate the relationship between self-confidence and self-concept.

**Hypotheses**

- There is a significant difference in self-confidence among obese young adults and non-obese young adults.
- There is a significant difference in self-concept among obese young adults and non-obese young adults.

**Method****Participants**

The participants consisted of 100 young adults between the age ranges 18-25, of which 50 are young adults with obesity and 50 are young adults without obesity.

**Tools**

The tools used were 2 questionnaires: The self-confidence Inventory developed by M. Basavanna in 1975 for measuring the level of self-confidence among adolescents and adults and the Dr. (Miss.) Mukta Rani Rastogi established the Self-concept Scale is used to measure the level of self concept. It consists of 51 items relating to eleven components of self-concept, including perceptual (Physical Self-concept), conceptual (Psychological Self-concept), and attitudinal aspects.

**Procedure**

The methods for analyzing the variables were finished, and a google form including those questions was sent to a group of roughly 200 young adults, from whom 100 replies were gathered, 50 of which were from obese young adults and the other 50 from non-obese young adults. Their willingness and anonymity were assured, and the subjects were thanked for their time and cooperation when the forms were completed. The arithmetic mean and standard deviation were utilized as descriptive statistical approaches in this investigation. The t-test and correlation were utilized as inferential statistical approaches in this investigation. The T-test is a statistical test of attribute relevance for small samples ( $n=30$ ) with uncertain demographic standard deviation. Under the premise of a normally distributed population, the t-distribution was calculated theoretically. Correlation is a statistical tool that aids in the analysis of two or more variables' covariation.

**Result**

Mean, standard deviation t-value, and p-value between obese young adults and non-obese young adults are found out. The mean value of self-confidence in obese young adults is 42.08 (SD =5.81). The mean value of self-confidence in non-obese young adults is 45.42 (SD = 7.61). The mean value of self-concept among obese young adults is 137.64 (SD = 21.9). The mean value of self-concept in non-obese young adults is 148.18 (SD = 29.42).

Table 1  
Mean, standard deviation, t-value, p-value, of self confidence between young adults with obesity and young adults without obesity

Variables	Group	No	Mean	S.D	t-value	p-value
Self confidence	Obese young adults	50	42.08	5.81	2.46	0.01
	Non obese young adults	50	45.42	7.61		

Table 2  
Mean, standard deviation, t-value, p-value, of self concept between young adults with obesity and young adults without obesity

Variables	Group	No	Mean	S.D	t-value	p-value
Self concept	Obese young adults	50	137.64	21.9	2.03	0.04
	Non obese young adults	50	148.18	29.42		

Table 3  
Pearson correlation between self confidence and self concept among obese young adults and non obese young adults

Variable	Self confidence
Self concept	<b>**0.0916</b>

### Conclusion

Certain inferences may be reached based on the findings of the preceding investigation. According to the Pearson correlation, there is a non-significant but minor positive association between the two variables. Furthermore, the results show that young people without obesity appear to have higher self-confidence, implying that they are more confident both physically and cognitively, as opposed to young adults with obesity, who appear to have lower self-confidence. A similar observation of particular interest is the scores of the self-concept test which also suggests that young adults without obesity seem to have scored more in self-concept than young adults with obesity. The results indicate how obesity in a way influences one's image about themselves and how it affects factors of their personality. When both sets of data are compared, it can be determined that obesity has had little impact on the self-confidence and self-concept of those young people who are obese. Finally, the data imply that there is a considerable difference in self-confidence and self-concept between obese and non-obese young people.

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