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# ВЗАИМОСВЯЗЬ САМООТНОШЕНИЯ И ЛИЧНОСТНОЙ ТРЕВОЖНОСТИ С РАЗВИТИЕМ РАССТРОЙСТВ ПИЩЕВОГО ПОВЕДЕНИЯ У ДЕВЯТИКЛАССНИКОВ

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#### Аннотация

Введение. Расстройства пищевого поведения (РПП) — феномен, который был обнаружен недавно, поэтому причины данного явления до сих пор не изучены. Развитие РПП может быть детерминировано психологическими, социальными и физиологическими процессами. При этом важно исследовать факторы, способствующие развитию РПП в подростковом периоде, поскольку, согласно статистике, их манифестация происходит у детей в этом возрасте. Цель исследования - выявление взаимосвязи самоотношения и личностной тревожности с развитием РПП у девятиклассников. Материалы и методы. Исследование проводилось посредством методик: «Шкала оценки пищевого поведения», «Личностная шкала проявлений тревоги Тейлора» и «Опросник самоотношения» (В.В. Столин, С.Р. Пантелеев). Статистическая обработка

результатов осуществлялась с помощью программы STATISTICA 13 с использованием критерия г-Спирмена и Н-критерия Краскала-Уоллеса. Результаты. Обнаружены корреляционные связи между уровнем тревожности и шкалами оценки пищевого поведения, а также корреляции между тревожностью и характеристиками самоотношения, что позволяет судить о причинах личностной тревожности школьников. Обсуждение. Результаты согласуются с теоретическими представлениями К. Фейрберна о развитии РПП. Недостатками исследования являются отсутствие самоотчёта испытуемых и низкий процент участвовавших юношей. Ограничение работы: выборка включает лишь подростков, проживающих в небольшом городе Свердловской области. Выводы. Исследование пищевого поведения у подростков показало, что признаки РПП могут быть детерминированы некоторыми показателями самоотношения и тревожности. Установлено, что уровень тревожности, обусловленный детерминирует показателями самоотношения, развитие расстройств у учащихся.

Ключевые слова: расстройства пищевого поведения, тревожность, подростки

# THE CORRELATION OF SELF-ATTITUDE AND PERSONAL ANXIETY WITH DEVELOPMENT OF EATING DISORDERS IN NINTH GRADE STUDENTS (14-15 YEARS OLD)

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#### **Abstract**

**Introduction.** Eating disorders (EDs) have been discovered recently, so there has been no consensus for the reason of this phenomenon. Psychological, social and physiological processes can determine the development of EDs. And it is important to investigate the factors that cause the disorders in adolescence, because according to statistics, their manifestation occurs at this age period. The aim of the study – to establish the correlation between self-attitude, personal anxiety and development of EDs in ninth grade students. Materials and methods. The survey was conducted using the following methods: "Eating Disorder Inventory", "Teilor's manifest anxiety scale" and "Self-attitude test" (V.V. Stolin, S.R. Panteleev). STATISTICS 13 software, the r-Spearman criterion and the Kruskal-Wallis H-test were used for statistical data processing. Results. The correlations between the level of anxiety and the scales of EDs and correlations between anxiety and self-attitude were found. This fact may indicate that the self-attitude level may cause the personal anxiety in adolescents. Discussion. The results are consistent with Ch. Fairburn's studies about the development of EDs. The disadvantages of the research are the lack of subjects' self-report and the low percentage of boys in the test group. A limitation of the study is that the sample includes adolescents living in a small town in the Sverdlovsk Oblast. Conclusions. Some parameters of self-attitude and anxiety can determine the symptoms of EDs. It has been revealed that the level of anxiety caused by indicators of self-attitude determines the development of EDs in students.

**Keywords:** eating disorders, anxiety, adolescents

#### INTRODUCTION

Different factors affect human health and can have both positive and negative effects. Medical scientists have identified the etiology of various diseases; psychologists have identified the causes of some psychological problems. However, eating disorders (EDs) are relatively recent in clinical psychology, therefore science still does not know what determines this phenomenon.

Scientists from different countries actively discuss the problem. W. Gull made a significant contribution to the development of anorexia nervosa (AN) problem. He proposed the term and established that it is a psychological disorder. Then H. Bruch investigated the differential signs of AN [1]. J. Russell, Ch. Fairburn and P. Cooper found out bulimia nervosa (BN) is a significantly different disorder compared to AN [2]. The scientists identified the features of BN, and it served as a starting point for future research directions. A. Stankard discovered the diagnosis "Binge eating", when he noticed this phenomenon in people with obesity. The psychological (low selfesteem level, perfectionism), social (low socioeconomic status, low level of medical services) and physiological (genetic predisposition) processes can determine the development of EDs. It is important to focus on the age of a person suffering from EDs, because mental health providers must not only choose the correct therapeutic methods, but also detect the disorders in the early stages or prevent it. More than 90% of people with EDs are women, and 3/4 of them suffer from the disorders since adolescence. According to statistics, the Eds manifestation occurs in children in the pubertal period; and epidemiological data indicate an increase in the number of adolescents with EDs [3]. That is why it is necessary to focus on the study of the individual characteristics of adolescents who have signs of EDs.

The aim of the study - to establish the correlation between self-attitude, personal anxiety and development of EDs in ninth grade students (adolescents 14-15 years old).

## MATERIALS AND METHODS

The study involved 52 people (34 girls and 18 boys) who are ninth grade students of municipal budgetary general education institution secondary general school №6 in Verkhnyaya Salda. The average age of children was 14,9 years; it allows us to attribute the subjects to the awkward age people.

The "Eating disorder inventory" (EDI) was used for screening diagnostics of eating disorders. Then the level of personal anxiety was measured using the Taylor's Manifest Anxiety Scale (TMAS) adapted by T.A. Nemchinov. Anxiety can be situational in nature, so the levels of self-attitude indicators were identified using the questionnaire of self-attitude developed by V.V. Stolin and S.R. Pantileev. The STATISTICS 13 software was used for statistical data processing. The correlation analysis was carried out using the r-Spearman criterion and the samples were compared using the Kruskal–Wallis H-test.

#### **RESULTS**

First, an EDs screening diagnostic was conducted using the EDI technique. The results showed that students are most characterized by high levels in the subscales "Drive for thinness" (19 people – 36.5%), "Bulimia" (25 people – 48.1%),

"Ineffectiveness" (18 people -34.6%) and "Interoceptive awareness" (23 people -44.2%). The average levels of "Body dissatisfaction" (27 people -51.9%), "Perfectionism" (26 people -50%) and "Interpersonal distrust" (27 people -51.9%) are also characterize the adolescents. The data present that many respondents have characteristics and clinical signs, so the EDs may be assumed in the subjects.

Then, using the TMAS, it was identified that the highest percentage of adolescents has an average level of anxiety with a tendency to low (21 people -40.4%). 18 people in the sample (34.6%) have a high anxiety level, and the percentage of people with an average level with a tendency to high is lower (11 people -21.2%). Only 2 students (3.8%) had low anxiety level. In this way, we found that the study participants perceive different situations positively and there are no emotionally destabilizing factors in their lives. However, there are many people in the sample with high anxiety, what indicates that they may have an emotional lability and inadequate perception of difficulties.

Students have also been tested using the questionnaire of self-attitude by V.V. Stolin and S.R. Pantileev. The results are presented in table 1.

Table 1
The diagnostic results of self-attitude according to the questionnaire of attitude towards himself (V.V. Stolin and S.R. Pantileev)

Scales	Percentage of test subjects, %		
	Sign is very	Sign is	Sign is not
	pronounced	pronounced	pronounced
S - integral	48 (25 students)	21 (11	31 (16 students)
		students)	
I - self-respect	35 (18 students)	21 (11	44 (23 students)
		students)	
II - autosympathy	<b>50</b> (26 students)	17 (9 students)	32 (17 students)
III - expected attitude from	40 (21 students)	23 (12	37 (19 students)
others		students)	
IV - self-interest	12 (6 students)	32 (17	<b>56</b> (29 students)
		students)	
1 – self-confidence	15 (8 students)	27 (14	<b>58</b> (30 students)
		students)	
2 – others' attitude	27 (14 students)	27 (14	46 (24 students)
		students)	
3 – self-acceptance	32 (17 students)	48 (25	19 (10 students)
		students)	
4 – self-consistency	38 (20 students)	31 (16	31 (16 students)
		students)	
5 – self-blame	15 (8 students)	8 (4 students)	<b>77</b> (40 students)
6 – self-interest	44 (23 students)	19 (10	37 (19 students)
		students)	
7 - self-understanding	42 (22 students)	27 (14	31 (16 students)

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The data were processed using the r-Spearman criterion and the correlations (p  $\leq 0.01$ ) between the results of EDI and TMAS were found: there are positive correlations (Spearman R  $\geq 0.50$ ) of anxiety with drive for thinness, body dissatisfaction, ineffectiveness and interoceptive awareness. It means that adolescents with high personal anxiety are most disposed to deviations in eating behavior. A correlation analysis of the results was carried out according to the questionnaire of self-attitude to explain the possible causes of anxiety and exclude its situationalness. Statistical relationships (p  $\leq 0.01$ ) were found between Scale I and personal anxiety (Spearman R  $\leq$  -0.70) and between anxiety and Scales S, II, IV, III and 7 (Spearman R  $\leq$  -0.50). It means that high anxiety in adolescence is determined by low indicators of self-attitude. Adolescents, who experience an integral sense "for" their "I", are less prone to the anxiety. It also indicates a lower risk of developing EDs.

Comparison of the results of EDI and TMAS using the Kruskal-Wallis H-test revealed relationships ( $p \le 0.01$ ) in the level of anxiety and eating behavior. There is a linear dependence: the indicators of EDI (drive for thinness, bulimia, body dissatisfaction, ineffectiveness, interpersonal distrust, interoceptive awareness) tend to increase in adolescents with high anxiety. The perfectionism scale is an exception, because there was found no significant relationship. Differences in the level of anxiety may be associated with the physiological characteristics of an adolescent, with his personal characteristics, etc. [4]. In addition, personal anxiety may be associated with self-attitude. Comparison of self-attitude indicators between children with different anxiety presented significant differences ( $p \le 0.01$ ) in the Scales S, I, II, III, IV, 2, 3, 5, 6 и 7. A statistically significant difference was also found in the scales of eating behavior by comparing the EDI results and self-attitude. The relationship between the drive for thinness and Scales S, I, II, and IV was found at a high level of significance (p  $\leq$  0.01). The relationship (p  $\leq$  0.05) of drive for thinness and Scales III, IV, 2, 4, 5µ7 was also revealed. Analysis of bulimia scores showed the relationship (p  $\leq 0.05$ ) with Scale IV. We also found an association (p  $\leq 0.01$ ) of body dissatisfaction with Scales S, I, II, III, and IV, and an association ( $p \le 0.05$ ) with Scales 3, 5, and 7. After the study of ineffectiveness differences were found in Scales S, I, II, III, IV, 3 (p  $\leq$  0.01) and in Scales 5 and 7 (p  $\leq$  0.05). Comparing the levels of the perfectionism, a difference (p  $\leq 0.05$ ) in Scale 4 was found. The relationship between interpersonal distrust and when analyzing the indicators of distrust in interpersonal relationships and interoceptive awareness was also revealed with Scale 7 ( $p \le 0.05$ ).

## **DISCUSSION**

The relationship between factors of self-attitude, personal anxiety and development of EDs in adolescents aged 14-15 was found. The results show that eating behavior deviations at puberty are associated with personal determinants. It is consistent with the Ch. Fairburn's studies, in which the scientist states that personal characteristics play an important role in the development of EDs.Ch. Fairburn notes that "patients with BN and AN were very obedient and responsible in childhood. They were often withdrawn and experienced difficulties in communicating with other

children" [2, p. 113]. Low self-esteem, perfectionism and high anxiety level are personality traits that are often found in people with EDs.

The disadvantage of the study is the lack of subjects' self-report, which makes it impossible to speak about cause-effect relations; high anxiety and self-attitude may not determine the course of development of eating problems, on the contrary, EDs determine personality characteristics. The causes of EDs in boys were also insufficiently studied, because their percentage in the sample is only 34,6%.

A limitation of the study is that the sample include adolescents living in a small town in the Sverdlovsk Oblast. Based on Fairburn's theory that the development of EDs may be due to the surrounding society and ethnicity [2], it is possible that the data of similar studies in other settlements will be different. It determines the prospects for further study of the problem.

## **CONCLUSIONS**

The study revealed that there is a tendency to EDs among adolescents. Respondents have a high anxiety level positively correlated with high rates of EDs, i.e. we can talk about the presence of a linear dependence between anxiety and the drive for thinness, bulimia, body dissatisfaction, ineffectiveness, a sense of detachment in contacts with others and a lack of confidence in recognizing feelings of hunger and satiety.

Statistical analysis established the association between anxiety and self-attitude: a teenager with high anxiety level probably has low indicators of self-attitude. A teenager is characterized by an increased tendency to worry when he is not confident in his abilities, has not learned to recognize feelings "for" and "against" himself and to evaluate his capabilities, does not understand himself. In order to avoid high anxiety, a teenager needs to develop an interest in his/her own thoughts and feelings, self-confidence and a high level of self-esteem.

The results also allow to suggest a personal determinism that affects the occurrence of EDs. Whether a teenager will overly worry about weight and systematically try to lose it is indicated by their degree of respect and interest in himself, autosympathy, self-consistency, self-blame, self-understanding and the teenager's expectation of a certain attitude from other people. The urge to overeat with a purge, which usually occurs in bulimia, is associated with a lack of self-interest. Body dissatisfaction and ineffectiveness among students are associated with almost all indicators of self-attitude: this indicates that a distorted perception of the body, feelings of loneliness, lack of a sense of security and inability to control one's own life can be due to a high level of indifference to oneself. Relationship between perfectionism and self-consistency have also been found. There are also significant association of low self-understanding with interpersonal distrust and interoceptive awareness.

Statistical data processing revealed that the level of anxiety caused by indicators of self-attitude determines the development of EDs in ninth grade students. The results form the basis of decision-making related to preventive measures against EDs in the puberty period.

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## УДК 101.1

## ОСОБЕННОСТИ ИНКЛЮЗИИ ЛИЦ С ИНВАЛИДНОСТЬЮ В СОВРЕМЕННОМ МИРЕ

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#### Аннотация

Введение. Инвалидность – явление не только биологическое, но и психосоциальное. Отсюда появляется необходимость привлечь внимание общества к проблемам, с которыми сталкиваются люди с ограниченными возможностями здоровья, и помочь им реализоваться в современном обществе. Цель исследования – изучить проблемы инвалидности как социального феномена современного российского общества и теоретические модели инвалидности, а также определить инновационные подходы к организации социальной инклюзии и перспективы развития данных моделей. Материалы и методы. Изучение литературы и средств массовой информации, анализ с синтезом, наблюдение, сравнение. Результаты. К 2021 г. число лиц с инвалидностью приблизилось к 12 млн, что составляет почти 9% населения РФ. Оставшееся большинство считает их жизнь тяжелой и беспросветной. Сами люди, имеющие инвалидность, и те, кто с ними знаком, считают данное мнение несправедливым и придерживаются социального подхода понимания инвалидности. Обсуждение. Трудности в жизни людей с ограниченными возможностями создаёт несовершенство социально-культурной среды. Поэтому