

# Correlational Study between Body Shaming and Depression among Young Adults in North-Eastern State of India

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## ABSTRACT

Expectations that individuals have for themselves lead to the rise of body shaming in society. Anyone who falls short of this norm will be subjected to body shaming. Body shaming involves the actions that subject others to a physical assessment in order to make them feel bad about how they seem. The objective of the current research sought to determine the correlation of body shaming and depression among young adults, in the North-Eastern state, India. The sample consisted of 106 young adults (57 females and 49 males) within the ages of 18-25. A non-random purposive sampling technique was employed for collecting data. The Objectified Body Consciousness Scale (OBCS; McKinley & Hyde 1996) and Beck's Depression Inventory (Beck 1996) was used for measuring body shaming and depression respectively. The student 't' test and correlation coefficient of Pearson served to examine the data. Finding suggested that body shaming and depression had substantial positive connection ( $r=.251$ ). Females were found to be score significantly higher on the level of depression than males. While the gender difference in body shaming was reported to be insignificant. Future research can be conducted on the relationship between gender and body shaming.

**Keywords:** Body Shaming, Depression, Young Adults, Gender

## 1.0 INTRODUCTION

Everyone inevitably hears comments about their body, size, appearance, dress, etc., sometimes positively and sometimes adversely, which can cause mental and emotional triggers in some people. Body shaming constitutes the practise of delivering inappropriate remarks about an individual's size and shape making them feel guilty about their looks. It involves attacking everyone, even those who are underweight, not only those who are overweight. Bullying tactics may include body shaming.

Body shaming is harmful regardless of how it is said; even in humour. On this note Sugiati (2019) highlights, that body shaming occurs in society as a result of the expectations that people have for themselves. The types of body shaming that are tolerated by everyone differ as well, although most people believe that joke-based body shaming is acceptable because it is not done to inflict harm. However, other forms of body shaming, such as mockery, humour, and insults, are meant to harm. The body shaming one experience affects how they, leading to feelings of embarrassment, insecurity, worry, etc. Size humiliation, or harassment based on appearance is a form of pointing out or condemning

someone solely upon their physical attributes. Inadequate self-worth, poor body discontent and feeling depressed are typical outcome of such issues, according to the expanding body of research revealing the harmful effects of appearance-based bullying on young people (Gam et.al, 2020).

Today's youth have a clear idea of what the "ideal physique" should look like. If those ideas they perceive doesn't meet by one, they quickly presume the individual is unhealthy and unattractive. A research revealed that 64% of teenagers and 94% of teenage girls have experienced some type of body shaming. Despite the fact that these figures are very high, they are still increasing every day (Sosa, 2020). It has been discovered that men's self-esteem is tied to their physical characteristics, including their face, hair, and body type (McFarland and Petrie, 2012). Although both sexes tend to experience body shame in different ways, it seems like there are some persistent disparities between how men and women view their bodies. The number of evaluations is comparable for both sexes while they are with their partners, though. Lower body esteem was found to make both men and women negatively evaluate their bodies, including their weight, looks, and other aspects when engaging in sexual activity (Brennan et al., 2010).

Majority of people encounter instances to experience down, but if one is depressed; those feelings linger for more than a few days. Moreover, sufferers of depression might encounter issues with concentration, endure overwhelming shame and insignificance, even experiences constant thoughts of hurting their own. When negative experiences, such as traumatic events in their lives and early hardship coincide with parental sadness and unsupportive family members, younger folks are susceptible for acquiring depression (Burns et al., 2002). The causal structure of depression is intricate and complicated. A broad array of threat and mitigation factors has been identified by the research. Significant contributory factors to depression comprised poor warmth from parents, excessive maternal antagonism and arising adolescent-parent disputes, in addition to gender and heredity. Singh et al., (2017) claims when youths' felt rejected by their parents, instructors or others closed one, their depression complaints may get worsen.

While there is no doubt that women are more susceptible to and prone to depression due to biological causes, the social expectations of masculinity may be the only factor contributing to the huge disparity in the depression between men and women. Due to their propensity to acknowledge their vulnerability and seek assistance, there are more women likely to be diagnosed and receive therapy for depression (Zartaloudi, 2011). In conclusion, just as the societal construct of femininity puts women at higher risk of developing depression, the high prevalence of suicide among men shows how toxic masculinity is and prevents men from seeking the right aid before taking their own lives. Along with being aware of the negative societal effects of gender norms, men and women should also be acknowledgeable of the appropriate medications and psychotherapy that are available for treating depression.

### **1.1 Statement of the Problem**

One of the challenges today's youth face collectively is body shaming, which manifests as a feeling of avoidance and a decision to isolate oneself as a result of the humiliation felt in public or social media. When it came to body shaming people take it lightly about the matter and it's very difficult to

understand what is affecting the victim. Emotionally, physically, and psychological impact the overall well-being, leading to several mental health issues such as poor self-worth, low self-conscious & depressive sign. Therefore the research mainly focuses on correlation between body shaming and depression affecting the mental health of young adults.

### 1.2 Significance of the study

Many researchers have conducted the study regarding the outlook of how one's perceives one's body, with their impact upon physical and mental wellness. Most of the time we believe that body shaming is most significant in females in this society than men, while men are the silent victim of shame. It has been noted in females the fact that self-objectification results from body shame. Victims are accused of not being good enough if they don't suit any particular beauty standard. When it comes to men, body shaming is strongly related to masculinity and 'sissy' behaviour. The major form of it is "shaming", which is an act of prejudice toward males' display of femininity (Li Jiran, 2021). Despite various studies, there seems to be less research on how generally body shaming affects feelings and emotions that can lead to depressive symptoms which impair. If there is any kind of relationship between body shaming and depression are not many resources available. So this research will try to study the connection among depression, body shaming and the consequences of both.

### 1.3 Objectives of the study

- To study body shaming and depression among young adults
- To find out the gender difference in body shaming and depression among young adults.
- To investigate the relationship between body shaming and depression among young adults.

### 1.4 Hypothesis

- There is significant difference in body shaming and depression on the basis of gender.
- Body shaming and depression significantly positively relate to each other.

### 1.5 Review of Literature

Brewis & Bruening (2018) conducted a longitudinal study to examined whether being open to friendship can attenuate or lessen the effects of body shame on depression levels in freshmen university students from the beginning of the year to the end. 1143 students were selected as a sample. While descriptive and regression analyses were employed for analysing the data. According to the study's findings, students with larger bodies are more likely to struggle with body shame and depression. The link tends to be in greater at the initial year, while it also highlighted that a substantial significant factor of higher depression levels involved having fewer friends. A sizable percentage of all students claim to have felt so ashamed of their bodies that they want to hide them from others in public.

Tiggemann and Kuirng (2004) focused on expanding objectification theory testing into the field of depression and looked into how well the theory applied to males. A questionnaire based on self-report was employed in the study, with a sample size of 223 (men 115 and women). In addition to the suggested mediating factors of body shame, appearance anxiety, flow and awareness of interior moods, it evaluated self-objectification, depressive mood, disordered eating, alongside those. It was discovered that self-objectification and its counterpart of regular self-monitoring for women were also indicative

with sad mood & eating disorders. A theoretical approach of meditational links received substantial assistance from path analysis. The structure of interactions was largely the same for males, with the function in self-objection being the notable variations.

Czeczor-Bernat et al., (2021) undertaken a cross-sectional investigation on a sample of 130 adults during COVID-19 with the goal of evaluating the association in body satisfaction with bodies image-related unpleasant emotions or depression, that are mediated via body image-related state of life. Higher levels of body dissatisfaction in obese participants with bad body-image-related satisfaction aspects of life related to body image are linked with greater amount of body dissatisfactions. Only more intense adverse feelings related to body-image are connected to larger levels of body dissatisfaction in obese people with medium quality of life in this area. No such results were seen among those with normal body weight. Consequently, the researchers discovered that body dissatisfaction is moderately influenced by the despair linked to poor regard's for one body.

Sick et al., (2020) evaluated self-comparison as a probable moderating factor to examined connection across body-related shame and depressive symptoms in women and men independently through a sample of 520 participants. The study found a substantial link on body-related shame sensations and worsening depression sign, thereby it is important to discover and comprehend any relevant elements that may mitigate this association. The findings indicate that depressed symptoms were positively and strongly correlated with body-related shame. In addition, the study indicated that, even when self-esteem was taken into account, self-comparison among women rather than among males attenuated the connection between depression and body-related shame.

Carter et al., (2022) centred on investigating how persons of all body weight connect to a sense of shame, internalised criticism with mental wellness in a sampling of 1695 adults. The study's findings revealed that people resulting in greater weight categories concentrate deeper the sort of criticising self, associated with hatred of oneself, that serves as strong predictor of melancholy and anxious symptoms. Additionally, show that bodily weight is not the only factor influencing body shame; perceived body weight is also a factor.

Andrew et al., (2002) try to ascertain whether prior findings from studies that used interviews, such as Andrews (1995), to suggest a potential link between shame and psychopathology could be confirmed using questionnaires. A longitudinal questionnaire survey included 163 college students in total. Experience of Shame Scale, a questionnaire designed around a prior testing and established shame scale served as a means to examined the relation of shame and indications of depression. At time 1, both scales significantly contributed independently to the depressive symptoms. But when time 1 symptoms were taken into account, ESS solely estimated substantial variance in time two symptoms. The two scales performed differently, and it was determined that this was because the TOSCA assessed overall shame and might occur farther susceptible to mood state influences, whereas ESS, as similar to shame examination, assessed certain aspects concerning shameful connected to oneself and its functioning.

Kim et al., (2011) intended at assessing how differently shame and guilt are associated with depression symptoms. The extent of relationships between shame and guilt and depressive symptoms

was statistically summarized in this study. A total of 108 studies involving 22,411 participants yielded 242 effect sizes. Compared to guilt, shame had a much stronger correlation to depressed sign than guilt. The relation that exists in complaint of depression and shame was statistically equivalent to the correlation between two maladaptive variants of guilt. The impacts were also tempered by other variables. External shame, which consists of unfavourable perceptions of oneself as observed by others, was linked to a stronger effect.

Sjöberg et al., (2005) examined the existence of a connection among adolescent obesity and depression within a nonclinical group and explored relevant contributors covering interpersonal factors, financial circumstances, and personal feelings of guilt may be to blame. Researchers looked at the relationships between self-reported a person's body mass index and depression after adjusting considering factors like sex, guilt, parent employment, separation, and economics. Survey approach is used to collect information from 4703 adolescents in Vestmanland, Sweden, on their adolescent lives. The study's findings indicate that among young people aged 15 to 17; obesity was substantially associated with depression, depressive symptoms, and shame. As stated in the DSM- IV Edition, all associations between BMI categorization and depression that were statistically significant vanished after parental employment, experiences with shame, and other factors were taken into account.

Wang et al., (2020) tried to identify the degree on body discussion how social media platforms had been positively related to body dissatisfaction, the mediated effect of peer appearance pressure, and the moderating function of self-compassion. 413 students completed the questionnaire, which asked about demographics, SNS use extent, body discourse, and societal pressure to look good, self-care and body discontent. Nine students declined to participate in the survey. The outcome of the study's suggested that bodily talk on those with SNSs was associated to body –shaming and monitoring of one's body in a favourable way. Additionally, body monitoring mediates the connection between body and SNS body talk. Self-awareness moderates indirectly to interaction of SNS body discussion and body dissatisfaction coupled with pressure from peers toward looking.

## 2.0 METHODOLOGY

**2.1 Research Design:** A cross-sectional quantitative technique had been opted to obtain the information with purpose of understanding the link between the variable specifically body shaming concerning level of depression implementing the survey technique of inquiry.

**2.2 Study Area:** This study has been carried out in North-eastern region of India.

**2.3 Sample:** The sample of the study consists of 106 young adults. Age of subjects ranged between 18 to 25 years, out of which were female 54.2% and male 45.8% respondents.

**2.4 Sampling Technique:** Purposive sampling method has been opted for selecting the sample by the researchers. It is a type of non- probability sampling that entails choosing subjects for a research on predetermined standards or traits pertinent to the study's aim.

## 2.5 Sampling Criteria:

Inclusion criteria

- i. Willing participants through online.
- ii. Both males and females of ages 18 to 25 years.
- iii. Young adults of North-East India.

Exclusion criteria:

- i. Young adults from the other region.
- ii. Those who haven't given the concern.

## 2.6 Tools

1. Objectified Body Consciousness Scale- The OBCS is a self-report questionnaire designed to examine a person's objectified body awareness or the degree on which people judge and interpret them through their outward appearance (McKinley and Hyde, 1996). It consists of 24 items that capture three distinct dimensions and their typical Cronbach's alpha values lie between 0.70 and 0.85, which denotes high accuracy. On a Likert scale, that normally ranges from 1-7, participants rate their agreement and total the responses interpreting that higher the scores greater susceptibility to body consciousness.
2. Beck Depression Inventory 1- It is a prominent self-assess test developed by Aaron T. Beck in 1961. There are 21 items intended to determine how severely depressed symptoms affect a person. With Cronbach's coefficient often averaging from 0.73-0.92, the BDI-1 has shown to have strong internal consistency. A scale from 0-3 is used to grade each item, which has an overall scoring from 0-63.

## 2.7 Procedure

The purpose underlying the study had been laid out to the participants over the online mode and their willingness to engage was ascertained. A Google form is being employed to acquire data for the Objectified body consciousness scale (24 items) & Beck depression inventory (21 items) with appropriate instruction. The participant's responses were compiled. Two questionnaires were graded and results are interpreted, in accordance to the manual.

## 2.8 Analysis of the data

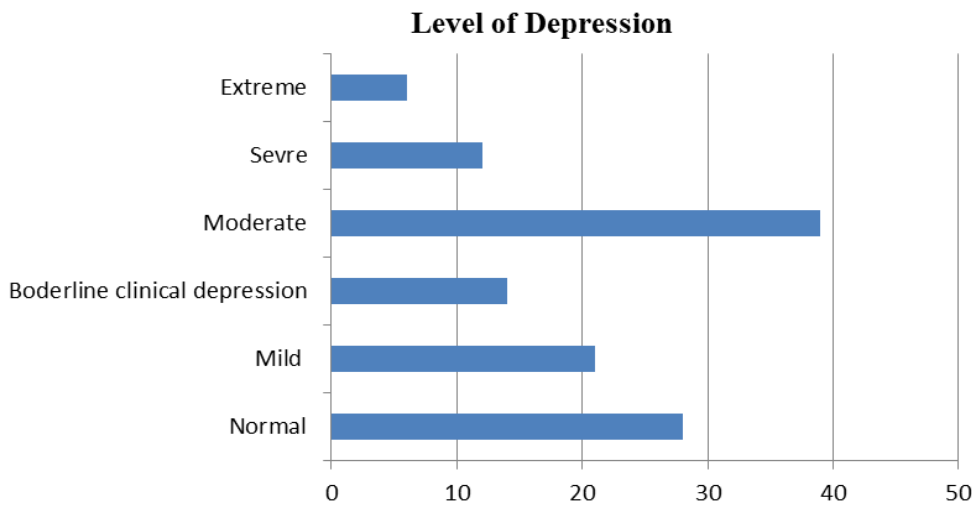
The statistical studies of gathered information's were done utilizing SPSS 16.0. Initially, descriptive, independent test statistics and Pearson's correlation are employed for study. The gender differences had been assessed by utilizing independent 't' test and for measuring the correlation, Pearson correlation method to explore the relation between key variables like body shaming and depression were used.

**2.9 Sources of data collection:** The first hand information has been collected by the researcher through Google form. While, previously published primary research, journal, and articles etc were utilised in the study.

## 3.0 RESULTS AND DISCUSSIONS

The findings obtained from data collection of the participants are analyzed as follows

**Figure 1 . The level of Depression**



Based on the bar graph, aproximately 32.5 % of the subject had “Moderate level of depression”, 23.3% of the subject is found to not have any depressive symptom, 17.5% fall into “Mild depression”, 11.7% had fall into “Boderline clinical depression”, 10.0% under “Severe depression” and 5.0% under the “Extreme”.

**Table 3.1 Objectified Body Consciousnes Scale**

	N	%
Low body consciousness	42	35.0%
Average body consciousness	39	32.5%
High body consciousness	39	32.5%
Total	120	100.0%

From the above table, it clearly indicates that majority of the psarticipants about 35.0% had fall into “low body consciousness”, 32.5% each fall into “average body consciousness” and “ high body consciousness”.

**Table 3.2 t-test for body shaming and depression**

Variables	Gender				t	df	P
	Male		Female				
	M	SD	M	SD			

Body Shaming	88.09	13.03	89.06	15.95	.361	118	.719
Depression	16.96	12.82	21.86	9.82	2.366	118	.020

The t-test calculation used for investigating the study’s formulated assumption can be observed in Table I. Two samples- male and female young adults-with a combined total of 55 and 65 respectively were compared. The mean difference in body shaming between male ( $M=88.09$ ,  $SD=13.03$ ) and female ( $M=89.06$ ,  $SD=15.95$ ) founds to above be insignificant from the above table with  $t$  value (118) = 0.361,  $p>0.05$ . Additionally, study’s revealed that there’s a gender significant differences in depression across male ( $M=16.96$ ,  $SD=12.82$ ) and female ( $M=21.86$ ,  $SD=9.82$ );  $t(118) = 2.366$ ,  $p<0.05$ , indicating female young adults exhibiting higher depressive symptoms than male young adults.

**Table 3.3 assessing the relation between OBCS and BDI**

	OBCS	BDI
OBCS	–	
BDI	.251	–

The evaluation of Pearson Correlation among body shaming and depression is shown in Table II. The finding demonstrates a weak positive relation between the two variables ( $r=.251$ ,  $p<0.01$ ) and these outcomes are statistically significant. Hence, the hypothesis is supported. This suggests the fact higher body consciousness would result in high degree of depressive symptoms and the less consciousness of body could diminish the depression.

#### 4.0 CONCLUSION

The study’s objective aimed for examining the interaction of body shaming and depression then gender differences among the young adults of the North Eastern State of India. The data was collected through Google form. The participants were provided with demographic detail in data sheet and the tool used for the study i.e. Objectified Body Consciousness Scale and Beck’s Depression Inventory. The technique used for the purpose were correlation and t-test, major finding of the investigation was there seem no disparities in body shaming among young adults across gender, both male and female do have equal body consciousness and perception of their body image, it doesn’t conclude that only female concern about their look, preference of the clothes that better suit with them, comparison with others was also found in male also, so it is better for both those who have higher body shaming to take easy about their physical appearance to keep and maintain their own mental health. Usually those who have overweight body of both sexes have inclined to make or keep friends, which further increased their depressive symptoms

Also, it was seen that there existed a gender difference in depression among young adults. The depression scores were more in females as compared to males, which indicates that women tends to take things seriously and have a higher range of mood swings, get frustrated and react to the things easily



which can lead to the feeling of sadness, rumination, worthlessness, loss of appetite, difficulty sleeping etc. It would be better if those people who have severe depression to share out little of their problems to their closed ones to at least know what they are going through.

Lastly, not the least the study found the existence of a link between body shaming and depression. We all live in a society where people have a tendency commenting on one physical appearance intentionally or unintentionally. By hearing such kind of criticism one can take lightly and someone can take it to their heart which can result in developing self-doubt, creating or developing avoidance and irrational thoughts based on the obsessed feelings about their physical appearance. There are high chances of causing misinterpretation about their body image and misunderstandings about people's comments due to wrong perception and irrational cognition, eventually leading to depression which can also develop anxiety. It can be concluded that it's important for one to cultivate self-love by taking care and knowing the value of self without focusing on things that can effect negatively on their mental health and shouldn't be ashamed of who they are. Usually those who have overweight body of both sexes have inclined to make or keep friends, which further increased their depressive symptoms (Brewis and Bruening, 2018).

## 5.0 SCOPE FOR FURTHER RESEARCH

The present research can be expanded to comparing the effect of body shaming among the young adults in urban and rural areas in the North-Eastern region state of India. In addition, further research can dwell on the varied gender-based correlations between body-shaming, depression and other variables such as (age, location, income, Education levels etc.)

## 6.0 LIMITATION OF THE STUDY

The research does have specific limitations. Firstly, the study is confined to the North-Eastern state of India; hence the data gained cannot be regarded as the genuine representation of broader population. Even though the survey is done on the basis of self-report, it cannot be assured that whether the participants has responded to the questionnaire honestly or not, as the survey was done through online mode. A large scale investigation will more clearly demonstrate the influence of body shaming on depression more. The OBCS had been into three categories by finding the median from the respondent's scores. Additionally, the current evaluation is unable to draw an inference that depression is just a result of body shaming, there many factors such as anxiety, eating disorder, stress etc. Lastly, this research can be investigated further as there may be lack of evidence in the finding of the study.

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