



PERSONAL CHALLENGES, CRITICISM AND EXPERIENCES WITH BODY IMAGE OF ADOLESCENT GIRLS IN SCHOOLS OF CHANDIGARH, INDIA

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Article Received on 03/09/2023

Article Revised on 24/09/2023

Article Accepted on 15/10/2023

ABSTRACT

Adolescence is a crucial time that could either mould or upend a person's eventual maturity as they do not have enough psychological development in this stage. As a result, incidents like body shaming, weight discrimination can have an influence later on. Additionally, in case of female adolescents these problems are made worse by the particular difficulties they encounter in daily life. **Objective:** To explore opinions and experiences of adolescent girls regarding personal challenges and criticism concerning physical appearances. **Methodology:** A cross-sectional study was conducted in schools of Chandigarh with 168 adolescent girls' participants between the age group of 13-19 years. Multi-stage random sampling was done for data collection. **Result:** Among the (N=168) participants, (n=50) 29.8% disclosed experiencing incidents of body shaming. A significant (n= 91) 54.2% expressed self-consciousness regarding their body weight, while (n= 67) 39.9% had attempted various remedies to improve their physical appearance, including achieving fairer skin. Remarkably, (n= 129) 76.8% of the girls believed that one's physical appearance exerted an influence on the mental well-being of adolescents. Furthermore, the girls shared a range of day-to-day challenges they encountered, suggesting potential areas for intervention. A substantial (n=142) 84.5% reported experiencing academic pressure, while (n=107) 63.7% felt constrained in their decision-making freedom. Issues like social discrimination, comparisons, societal judgments and many more were also cited by the respondents. **Conclusions:** The significant incidence of body shaming and other cited issues highlights the need for intervention because they present chances to improve adolescent wellbeing and lessen potential future psychological health issues.

KEYWORDS: Body Shaming, Personal Challenges, Adolescent health, Physical Appearance.

INTRODUCTION

Adolescence is defined by the World Health Organization (WHO) as the period of life that occurs between the ages of 10 and 19 and is considered to be the transitional period between childhood and adulthood.^[1] This stage is characterized by considerable growth on both a physical and psychological level. A variety of physical changes, including weight increase, the growth of body and facial hair, changes in female breast size, changes in masculine voice, etc., are brought on by hormonal changes during adolescence. Increased self-consciousness about their physical appearance is frequently the result of these changes. In this time of adolescence, people frequently strive for perfection in a variety of spheres of their lives, including their pursuit of what is considered to be the "perfect body shape." People in their environment or other peers may make body-shaming comments to those who fall short of this standard.

The act of making derogatory remarks about someone's body size, shape, or attractiveness in personal interactions or on social media is known as body shaming.^[2] Such situations frequently occur among adolescents. However, as more women strive to have a body that is picture-perfect, there have been increased reports of female body shaming in newspapers, news, social media, etc.^[2,3] Body shaming has a huge impact on the mental health of the adolescents as they may suffer from low self-esteem, diminished self image, social isolation etc. In today's age of social media and globalization, the concept of a natural, unaltered body has become less prevalent. Unfortunately, this pursuit frequently exposes adolescents to body shaming and criticism, which is the first focus of the current study. The second aspect addressed in this study pertains to the personal challenges that adolescent girls encounter as they navigate the complexities of growing up. From academic pressures to the uncertainty of school admissions, from physical and sexual abuse to coping

with body-shaming remarks and comments on clothing, adolescents face a multitude of challenges. Unfortunately, these issues often go unaddressed by parents, schools, and society at large. The development of one's physical and mental health must occur during adolescence. The consequences of ignoring these adolescent problems in a timely manner can be lifetime psychological anguish. If these personal problems are not resolved right away, the young people have a higher risk of developing mental health problems like stress, depression, and anxiety. According to research, 25 to 35 percent of people experience body shaming.^[4] Studies examining the unique difficulties faced by adolescent girls as they travel through their developmental path, which can have a considerable impact on their physical and emotional well-being, are noticeably lacking, though. Present study is an attempt to explore opinions and experiences of adolescent girls regarding personal challenges and criticism concerning physical appearances.

METHADODOLOGY

Study Area: The study was conducted in Government and Private Schools of Chandigarh, India. Chandigarh is a union territory and planned city in northern India, serving as the shared capital of the surrounding states, namely Punjab to the north, west and the south, and Haryana to the east.^[5] It has a total of 115 government and 79 private schools. Of which 2 Government schools, 1 private school were approved for data collection by the Department of Education, Chandigarh Administration. **Study Design:** Cross-sectional study was conducted among the school going adolescent girls students belonging to 13 to 19 years of age group from selected government and private schools. **Sample Size:** Assuming 60% of the prevalence of health issues as psychological and behavioral in nature among the adolescents of Chandigarh^[6] and assuming the 90% confidence coefficient and 10% relative precision the sample size comes to be 168 adolescent girls of 13-19 years. **Study Design:** Stratified Multistage Random Sampling Technique was used. In the first stage the sample were divided into 5 clusters (Students from class IX, X, XI, XII and College 1st year), in the second stage the samples from these cluster sample were selected randomly. **Inclusion Criteria:** All the school going adolescent girls within the age group of 13-19 years was included. **Exclusion Criteria:** The girls above or below the specified age group, married adolescents (as they may have certain other issues) were excluded. **Study tool:** A pre-tested, semi-structured questionnaire was administered to get a deep insight of study population perspective and SPSS version 26 was used for statistical analysis. Study was conducted for a period of 6 months January 2023 to June 2023.

Ethical Consideration: Prior data collection formal permission was taken from the "Department of Education, Chandigarh and from the principles of the respective schools. All possible information regarding

the study was given and an Informed consent was taken from the students. Confidentiality of the study subject was strictly maintained.

RESULTS

The study was conducted on 168 school going adolescent girls between the age group of 13 to 19 years. There were (n=71) 42.3% of respondents from age 13-15 years and (n=97) 57.7% respondents were from age 16- 19 years with a mean SD of 15.08 +/-1.68.

Among the 168 participants (n= 74) 44% students were from class 9th and 10th, (n= 83) 49.4 % from 11th and 12th and only (n=11) 6.5% accounted for 1st year college students.

70.8% (n=119) of participants lived in a nuclear family. The joint and extended families came up to be almost similar count with a percentage of (n=25) 14.9% and (n=25) 14.3% respectively. The total number of family members were also asked and evaluated. It was seen that (n=103) 61.3% of girls had 1to 5 members in their family, 34.5% (n=58) had 6-10 members, 3.6% (n=6) had 11-15 members and only (n=1) 0.6% reported to have family members above 15. Table 1, illustrate that (n=160) 95.2% of the girls lived with their parents, 5% were living away from their family with 3.6 % (n=6) living in Hostels and around 1.2% (n=2) were living PG's and others (Personal Flat/ accommodation etc.)

Among all the participants (N=168) 81% (n=136) were Hindus, (n=21) 12.5% were Sikh, (n=6) 3.6% were Muslims and (n=5) 3% were Christians. Large number of the respondents i.e. 66.1% (n=111) lived in the urban area of the city where as only 33.9% (n=57) lived in rural area of Chandigarh (Table 1).

Comparing the educational status of father and mother of the participant, high illiteracy level was seen among the mothers as compared to fathers. The maximum level of educations the parents had received was high school i.e. up to 10th standard of school. Within that also the percentage of fathers (34%) was more than mothers (28%). Considering the fathers occupation 27.4% (n=46) were Service man, 26.2% (n=44) were laborers, 19.6% (n=33) were involved in other kind of jobs, 14.3% (n=24) were skilled workers (tailors, carpenters etc) and 12.5% (n=21) had their own business. Whereas the situation was totally opposite in case of mothers where 89.9% (n=151) of mothers are housewife and working mothers accounts for only 10.1% out of which 4.8% (n=8) were in Service, 0.6% (n=1) Laborer and 1.8% (n= 3) were skilled workers (tailors, beauticians etc.), 2.4% (n=4) were involved in other kind of work. Only 0.6% (n=1) had own business. Fathers and mothers occupation were studied as there was a significant association between stress of the respondents and occupation of parents with a p-value 0.01 which is less than the level of significance (0.05) during chi-square analysis.

Table 1: Demographic characteristics of participants.

| Age of respondent | | |
|--|-----------|------------|
| Age | Frequency | Percentage |
| 13- 15 Years | 71 | 42.3 |
| 16-19 Years | 97 | 57.7 |
| Class/Standard in which respondents were studying | | |
| Class | Frequency | Percentage |
| Class 9th and 10th | 74 | 44 |
| Class 11th and 12th | 83 | 49.4 |
| College First year | 11 | 6.5 |
| Type of Family | | |
| | Frequency | Percentage |
| Joint | 25 | 14.9 |
| Nuclear | 119 | 70.8 |
| Extended | 24 | 14.3 |
| Current living place of the respondents | | |
| | Frequency | Percentage |
| With Family | 160 | 95.2 |
| Hostel | 6 | 3.6 |
| Paying Guest/other | 2 | 1.2 |
| Locality where the respondents were living | | |
| | Frequency | Percentage |
| Urban | 111 | 66.1 |
| Rural | 57 | 33.9 |
| Socio-economic Status (SES)* | | |
| | Frequency | Percentage |
| Low SES | 103 | 61.3 |
| Lower middle SES | 32 | 19 |
| Middle SES | 14 | 8.3 |
| Upper Middle SES | 19 | 11.3 |

*To distribute the participants as per their socio-economic condition, the monthly family income of the respondents was evaluated and were divided in four intervals as Rupees 30000 and below (as Low), 30001 to

60000 Rupees (as Lower Middle class family), 60001-90000 Rupees (as Middle class family) and 90001 and above Rupees (as Upper Middle Class).

To get a deep insight of the perspective of body shaming issues and personal challenges the personal interview were conducted. Girls' perceptions of their body and appearance yielded varied responses. Among the participants, (n=91) 54.2% expressed self-consciousness about their bodies, while (n=42) 25% indicated dissatisfaction with their looks and overall appearance. Additionally, (n=67) 39.9% were engaged in activities aimed at enhancing their appearance (table 3). A notable (n=50) 29.8% reported encountering comments related to body shaming. Out of the total 168 respondents, (n=130) 77.4% opted to disregard such comments, (n=20) 11.9% experienced tears in response to such incidents, and (n=18) 10.7% acknowledged experiencing anger issues as a result of such occurrences. Physical and sexual abuse frequently occurs among children, with girls being more likely to experience such issues at some point in their lives. 9.5% (n=16) reported of sexual abuse and 6% (n=10) of physical abuse. The looks and appearance influence the adolescence mental health at level that they try to use over the counter beauty products, medicated products without any prescription just by the influence of social media and internet. In the study 16.1% (n=27) girls reported that they have used over the counter products to enhance their beauty, however they were not sure about the side effects of the same. Additionally, 4.8% (n=8) reported to have undergone professional treatments to enhance their beauty (Table 2). More than half i.e. 76.8% (n=129) believed that physical looks and appearance influence the mental health of the adolescents.

Table 2: Perceptions of Participants Regarding Physical Appearance.

| N= 168 | Yes | | No | |
|---|-----------|------|-----------|------|
| | Frequency | %age | Frequency | %age |
| Do you ever feel conscious about your weight? | 91 | 54.2 | 77 | 45.8 |
| Are you satisfied with your looks and appearance? | 126 | 75 | 42 | 25 |
| Have you ever tried to improve your physical looks? | 67 | 39.9 | 101 | 60.1 |
| Have you ever faced body shaming at school/college/playground/parties? | 50 | 29.8 | 118 | 70.2 |
| Have you ever been physically abused? | 10 | 6 | 158 | 94 |
| Have you ever been Sexually abused? | 16 | 9.5 | 152 | 90.5 |
| Have you ever tried over the counter beauty products to improve your looks and appearance? (without prescription) | 27 | 16.1 | 141 | 83.9 |
| Have you ever taken professional treatment to improve your appearance? | 8 | 4.8 | 160 | 95.2 |
| Do you think physical appearance influences the mental health of adolescent girls? | 129 | 76.8 | 39 | 23.2 |

Table 3: Actions opted by the adolescent girls to enhance their physical appearance and personal issues reported by them.

| Actions opted by the adolescent girls to enhance their physical appearance (N =168) | | |
|--|-----------|------------|
| Actions | Frequency | Percentage |
| Overeating for Weight Gain | 53 | 31.5 |
| Weight Loss | 36 | 21.4 |
| Trying Hair Color | 12 | 7.1 |
| Using fairness creams | 45 | 26.8 |

| | | |
|--|-----------|------------|
| Home remedies for skin and hair | 61 | 36.3 |
| Dental Treatment to improve dentition | 11 | 6.6 |
| Sports and Physical activity to improve physique | 53 | 31.5 |
| Trying variety of clothing ideas to improve appearance | 22 | 13.1 |
| Problems faced by adolescent girls (N= 168) | | |
| Issues | Frequency | Percentage |
| Academic Pressure | 142 | 84.5 |
| Peer Pressure | 89 | 53 |
| High Parental Expectation | 50 | 29.8 |
| Stress of physical looks and appearance | 72 | 42.9 |
| Discrimination | 80 | 52.4 |
| Lack of freedom to take decision | 107 | 63.7 |
| Restriction on clothing | 103 | 61.3 |
| Restriction on going out | 93 | 55.4 |
| Compulsion to do house hold chores after studies | 7 | 4.2 |
| Lack of privacy | 118 | 70.2 |
| Pressure to be family's son in case of single girl child | 10 | 6 |
| Comparison with other children | 103 | 61.3 |
| Body Shaming | 50 | 29.8 |
| Sexual Abuse | 16 | 9.5 |
| Safety Issues in public and private transport | 113 | 67.3 |
| Societal Judgment | 59 | 35.1 |
| Eve teasing | 37 | 22 |

The table 3 illustrates the various issues and difficulties that adolescent girls encounter in their daily lives. A significant majority of respondents express concerns about academic pressure (84.5%, n=142), lack of privacy (70.2%, n=118), safety issues in both public and private transportation (67.3%, n=113), and limited decision-making freedom (63.7%, n=107). These findings suggest that many adolescent girls may experience restrictions and hindered opportunities for self-expression when they require it. Girls who were the single child in their families also felt a sense of responsibility, as they perceived that there were elevated parental expectations

placed on them in such situations. Peer pressure, high parental expectation, discrimination among the siblings or at school or in the society, restriction on going out, clothing in a certain way etc were also reported as some of the day to day issues. All the reported issues can be addressed and resolved, either through parental involvement, improvements in schools, or societal changes. It is crucial to remember that adolescents are the building blocks of future healthy and content adults. If they do not feel safe and are unable to express themselves, the likelihood of them developing a healthy mindset for the future becomes significantly reduced.

Table 4: Relationship between body shaming experiences of respondents with their demographic characteristics.

| Body shaming experience | Age of the respondents (N=168) | | | | | | | | |
|--|---------------------------------------|------------|---------------------|-------------|--------------------|-------|--------------------|---------|--|
| | 13-15 years | | | 16-19 years | | | Pearson Chi-Square | P-value | |
| | Frequency | Percentage | Frequency | Percentage | | | | | |
| | Yes | 19 | 11.3 | 31 | 18.4 | 0.53 | 0.467 | | |
| | No | 52 | 31 | 66 | 39.3 | | | | |
| | Type of School of respondents (N=168) | | | | | | | | |
| | Government | | | Private | | | Pearson Chi-Square | P-value | |
| | Frequency | Percentage | Frequency | Percentage | | | | | |
| | Yes | 35 | 20.8 | 15 | 8.9 | 14.34 | 0 | | |
| | No | 109 | 64.9 | 9 | 5.4 | | | | |
| Class of the respondents in which they were studying (N=168) | | | | | | | | | |
| IX and X Standard | | | XI and XII Standard | | College First year | | Pearson Chi-Square | P-value | |
| Frequency | Percentage | Frequency | Percentage | Frequency | Percentage | | | | |
| Yes | 20 | 12 | 23 | 13.7 | 7 | 4.1 | 6.47 | 0.03 | |
| No | 54 | 32.1 | 60 | 35.7 | 4 | 2.3 | | | |

With statistical analysis a significant association was found between the type of school (govt. and private) and the class in which the respondents were studying with the body shaming experience of the adolescent girls as the p-value i.e. 0.00 and 0.03 respectively was less than the level of significance ($\alpha = 0.05$). However, the age and socioeconomic status of the respondents depicted an insignificant association with the body shaming experiences as their p-value 0.46 and 0.52 respectively was more than the level of significance.

DISCUSSION

In the present study, total prevalence of body shaming was found to be 29.8% (n=50) which is less than the other studies^[4] where it was reported to be 44.9%. It was seen that the adolescent girls are very conscious about their body and looks. To fit into the picture perfect society they tend to use various chemicals for their hair and body like using hair coloring agents, use of fairness creams and serums and use of over the counter beauty products. Over eating to gain weight and fasting for weight loss is not a healthy lifestyle idea however the girls are into such things to achieve a good body shape without knowing the future consequences. In earlier studies conducted in North Karnataka 1.6% girls reported sexual abuse whereas in the present study 9.5% (n=16) of the girls reported the incidence of sexual abuse^[7]. Similarly, the incidence of eve teasing was also high in present study with 22% (n=37) whereas the similar studies reported it to be 8% in Karnataka^[7] the mere reason for that could be the change in area and the population size since they considered girls of 13-14 years and the present study studies the age range of 13-19 years. The present study shows that majority (76.8%, n=129) of the adolescents are in favor that physical appearance influence the mental health of adolescent girls. Secondly, not much of the studies are there that have focused on the personal issues and challenges that the adolescents are facing in their daily life which could be a hindrance in their normal growth and development. Academic pressure, peer pressure, lack of privacy, body shaming, fear of social judgment etc. are all modifiable factors that the children, parents and society needs to work on to give our youth a healthy future. Another facet of this societal issue is that the challenges preventing young people from fully enjoying their lives could be alleviated if society and parents displayed greater empathy and understanding towards them.

The study has merit of presenting opinion of girl students aged 13-19 years regarding their physical appearance aspects and their day to day challenges which had not been addressed in previous studies. However, the study was confined to female adolescent students only and hence results can't be generalized as boys and those not studying currently may also face several such issues. A study with larger sample size may have provided broader perspectives of the opinion of adolescents. The study may be helpful in bringing challenges concerning body shaming and criticisms on physical to light, this study

aims to fill this vacuum. The goal is to increase awareness within society so that it can comprehend these difficulties and equip children and their parents to help transition successfully from infancy to adulthood.

CONCLUSIONS AND SUGGESTIONS

The study's findings indicate that a majority of girls have encountered criticism regarding their body image at some point in their lives, and this criticism may lead various adverse consequences on their psychological health. The significant incidence of body shaming and other sited issues highlights the need for intervention because they present chances to improve adolescent wellbeing and lessen potential future psychological health issues. A number of girls were turning to a variety of techniques to improve their looks or conform to the norms they see on social media rather than accepting their natural bodies and finding contentment in their own flesh. In spite of the fact that it might not always reflect actual health on the inside, they frequently find themselves in a persistent quest of a particular exterior image.

The study suggests creating a healthy positive environment wherein the human body should be seen as a normal human being rather than a thing that one needs to be conscious about. Adolescents should be educated at various levels by teachers and parents to have a strong mindset to accept the changes in body they go through to have a healthy psychological health. Adolescent friendly environment with secure and free mindsets is suggested with full acceptability of thoughts and feelings of adolescents irrespective of their physical appearances and there should not be any place of body shaming in the society.

ACKNOWLEDGEMENTS

Authors are thankful to Department of Education, Chandigarh Administration for granting permission to conduct the study and also to the students, principals and teachers who have been the key elements for the study. We also express our thankfulness to Centre of Public Health, Panjab University Chandigarh for granting permission and providing all facilities for conducting the study.

Funding: No funding sources

Conflict of interest: None declared.

Ethical approval: The study was approved by the Institutional Ethics Committee.

REFERENCES

1. World Health Organization, Adolescent health and development: https://www.who.int/health-topics/adolescent-health#tab=tab_3: Accessed 27 Sep 2023.

2. ÇETİN, E. Body shaming experiences of elite female athletes. *OPUS Journal of Society Research*, 2023; 20(52): 179-190.
3. Dacosta, M. D. D., Keraf, M. A., & Damayanti, Y. Body Shaming with Acceptance of Body Shape in Female Students. *Journal of Health and Behavioral Science*, 2023; 5(1): 150-158.
4. Gam, R. T., Singh, S. K., Manar, M., Kar, S. K., & Gupta, A. Body shaming among school-going adolescents: prevalence and predictors. *International Journal Of Community Medicine And Public Health*, 2020; 7(4): 1324.
5. Chandigarh - Wikipedia : Assessed 29 Sep 2023.
6. Kumar, R., Prinja, S., & Lakshmi, P. V. M. Health care seeking behavior of adolescents: comparative study of two service delivery models. *The Indian Journal of Pediatrics*, 2008; 75: 895-899.
7. Beattie, T. S., Prakash, R., Mazzuca, A., Kelly, L., Javalkar, P., Raghavendra, T., & Watts, C. Prevalence and correlates of psychological distress among 13–14 year old adolescent girls in North Karnataka, South India: a cross-sectional study. *BMC public health*, 2019; 19(1): 1-12.