



THE RELATIONSHIP BETWEEN EATING DISORDERS AND PERSONALITY TRAITS

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ABSTRACT:

A link exists between certain personality qualities and various psychiatric diseases. This article provides a thorough examination of the relationship between personality types and eating disorders, specifically focusing on the degree of connection between the two. It presents a complete overview of the fundamental categories of eating disorders and personality traits. Research and theory suggest that personality factors play a crucial role in explaining the diverse range of differences in the timing, intensity, and duration of symptoms seen in people with eating disorders within the same group. The objective of this article is to investigate the correlation between personality qualities and eating disorders. According to the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association, feeding and eating disorders are characterized by persistent disturbances in eating or eating-related behavior that result in alterations in food consumption or absorption and have a substantial impact on physical health or psychosocial functioning. The general populace has a fundamental understanding of these disorders. To summarize, there is a correlation between certain personality qualities and the likelihood of developing an eating issue.

KEYWORDS:

EATING DISORDER, PERSONALITY TYPE, ANOREXIA, BULIMIA.

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INTRODUCTION

Research on eating disorders has long played a significant role in psychology studies conducted in a variety of international settings. Even among members of the same group, there is a great deal of variation in the time it takes for symptoms to appear, how severe they are, and how long they last, all of which are assumed to be influenced by personality traits. Both theory and science corroborate this variation. Anorexia nervosa is a complex mental illness that has devastating effects on a person's mental and physical health. People who struggle with anorexia nervosa have an unhealthy obsession with food, their weight, or their perceived physical beauty. Binge eating disorder, anorexia, and bulimia are all forms of eating disorder. There are successful treatments for eating disorders. Serious and even deadly consequences may develop for those who do not get treatment for their eating problems. The total of a person's traits that influence their feelings, ideas, and behavior is their personality. Investigations on the potential link between personality traits and eating disorders have been conducted. To help therapists achieve better treatment results, more study on this link might be helpful.

OBJECTIVES OF THE STUDY

- ♣ To Understanding eating disorders.

- ♣ To investigate the etiology and attributes of eating disorders.
- ♣ To examine the correlation between eating disorders and personality factors.
- ♣ To explore strategies for the prevention of eating disorders.

EATING DISORDERS

The cause of dietary difficulties may be complex and the underlying elements are not fully understood. Multiple factors, such as genetic predisposition, family dynamics, traumatic experiences, and individual psychological traits, contribute to the development of food-related problems. Given the widespread occurrence of dietary issues throughout adolescence, it is reasonable to assume that there are other factors influencing growth. Typically, students with dietary difficulties may experience dissatisfaction or low self-worth, which they attribute to their body image. Adopting an irregular eating pattern might be seen as an attempt to regain a sense of control during periods of general chaos. These individuals often depend on their dietary habits as a way to meet their needs and manage high levels of stress. The individual's flawed cognitive patterns sustain and reinforce this behavior. This evaluation examines the many cognitive

and behavioral aspects linked to eating and body perception.

The examination has sub-scales that examine the propensity for thinness, proclivity towards bulimia, and dissatisfaction with one's physical appearance. Furthermore, it assesses other attributes such as ineffectiveness, inclination towards compulsion, ambiguity in interpersonal relationships, sensitivity to physical sensations, and worries related to personal growth. Clinical specialists have recognized these traits as key to the psychiatric disease of anorexia nervosa. Gaining knowledge about individuals' dietary habits is an essential component in comprehending the prevalence of obesity. The weight of an individual can be influenced by various factors related to food consumption, such as the frequency of meals, the habit of skipping breakfast, the regularity of eating meals prepared outside of the home, irregular eating intervals, and excessive calorie intake. These factors, collectively referred to as "eating patterns," play a role in determining an individual's weight. Continued adherence to this eating habit may lead to the development of nutritional deficiencies throughout adolescence. Over time, this might give rise to issues such as the development of an eating disorder.

CAUSES OF EATING DISORDERS

Eating disorders arise from a combination of genetic, environmental, and social factors. Individuals afflicted with eating disorders may resort to drastic methods in order to restrict their consumption of food or abstain from certain food categories when they have difficulties in managing other facets of their life. An excessive preoccupation with food may develop into a maladaptive coping method for dealing with challenging emotions or experiences. Therefore, eating disorders generally center on seeking effective methods to regulate one's emotions rather than obsessing over food. Several variables might augment the probability of having an eating problem. These factors include a familial background of eating disorders, addiction, or other psychological conditions such as depression. A chronicle characterized by distressing encounters, including physical, emotional, or sexual aspects. Prior history of anxiety, sadness, or obsessive-compulsive disorder. An abridged synopsis of the historical progression of dieting.

HIERARCHIES OF EATING DISORDERS

- Anorexia nervosa.
- Bulimia nervosa.
- Binge eating disorder.
- Avoidant/restrictive food intake disorder
- Rumination disorder.
- Pica.

Due to the fact that bulimia and anorexia are the two eating disorders that are the most widespread subtypes, we will be focusing our attention entirely on these two conditions. The fact that there has been a rise in the

prevalence of different feeding and eating disorders, as well as excess weight and obesity, which are related with an unhealthy diet and lifestyle, is something that should be taken into consideration in today's culture. Bulimia nervosa is identifiable when a person partakes in episodes of excessive eating, followed by severe measures to manage their weight, such as inducing vomiting, fasting, misusing enemas, laxatives, or diuretics, and/or engaging in excessive exercise (Bulimia Nervosa, 2010). Additional indications of bulimia include a heightened preoccupation with body weight and physical fitness as well as an intense dread of gaining weight. It is worth noting that the individual's weight may be within the normal range, unless anorexia is also present.

FEATURES OF DISEASES RELATED TO EATING

The existing amount of research on eating and feeding disorders has provided insight into the intricate and diverse factors contributing to the emergence of these issues. However, the impact of traditional beauty norms is also rather significant. Their impact on distorted perceptions of the body is substantial, which contributes to many diseases (Arévalo, et al., 2015).

PERSONALITY TRAITS

The distinctive set of characteristics that influence an individual's thought processes, feelings, and actions across time is known as their personality (Cervone 2009). Some research suggests a correlation between personality traits and eating disorders; studies have compared the characteristics of patients with bulimia nervosa, anorexia nervosa, restricting type, binge-eating disorder, and other eating disorders to those of controls and individuals without the disorder. Any stage of life is vulnerable to the onset of an eating problem. People of all sexes, colors, and nationalities are impacted. The idea that females are more likely to suffer from anorexia nervosa is false. Danger may strike at any time to either youngsters or men. Individuals suffering from eating disorders were also more likely to have personality issues than those in the control group. No study published in the last decade has used anything other than the DSM-IV as its diagnosis instrument.

SIGNIFICANCE OF THE STUDY

There seems to be a clear correlation between the significant increase in stress levels seen in contemporary society and the noticeable surge in the prevalence of mental health challenges among individuals. Throughout the last several decades, there has been a steady increase in the prevalence of eating disorders and obesity among individuals. This pattern is seen in both men and females. The results of this investigation will provide new insights into the hitherto unexplored issue of eating disorders. The researchers anticipate that this study will significantly augment the current corpus of knowledge on eating disorders.

EATING DISORDERS AND PERSONALITY TRAITS

Specific personality traits increase the probability of having eating disorders. Individuals suffering from eating

problems often display characteristics of perfectionism. Individuals often encounter both intrinsic and extrinsic pressures to achieve outstanding results. If people fail to meet their own predetermined standards, they may feel a sense of insignificance and self-awareness, perhaps leading to the adoption of eating disorder behaviors. Moreover, individuals could exhibit increased sensitivity, making them more susceptible to derogatory comments about their physique or weight. Individuals with impulsive tendencies have an increased susceptibility to developing eating disorders, such as bulimia or binge eating. Commonly associated with eating disorders include heightened levels of perfectionism, impulsivity, harm avoidance, reward dependence, sensation seeking, neuroticism, and obsessive-compulsive tendencies. Moreover, there is a decrease in levels of independence, self-assurance, and readiness to cooperate.

The association between these two measures indicates that certain traits may have a major influence on the emergence and progression of eating and feeding difficulties. Several studies have shown a strong association between having a neurotic temperament and the onset of eating problems. Nevertheless, every distinct subdivision is intricately linked with other features. Individuals afflicted with anorexia nervosa often display obsessive behaviors and a pronounced need for autonomy. Moreover, researchers highlight the importance of inflexible cognitive processes, namely those linked to harmful beliefs. Moreover, persons diagnosed with anorexia nervosa often exhibit a tendency towards increased self-reliance and introspection. Understanding personality disorders is crucial for grasping many aspects of personality. There is a significant correlation between personality traits and eating disorders. Various studies suggest that the proportion has the capacity to vary from 53 to 93 percent.

Conversely, individuals diagnosed with bulimia nervosa often have reduced ability to cope with irritation and effectively regulate their impulses. Furthermore, those suffering from anorexia may encounter a decline in their self-esteem, a surge in their anxiety levels, and heightened sensitivity in their interpersonal interactions. They have a proclivity for impulsive actions, which might result in highly unforeseen conduct. The role of personality is crucial in the treatment of eating disorders due to the inherent intricacy of these conditions. Patients may encounter problems while working with therapists and other healthcare practitioners owing to their inclination towards exerting control, impulsive behavior, and lack cognitive flexibility. Therefore, it is crucial to engage in discussions and actively cultivate these facets of one's character during treatment sessions. Ultimately, they significantly impact the continuation of cognitive distortions (inflexibility of thinking), the occurrence of bouts of excessive eating followed by purging (lack of self-restraint), and the adherence to severe dietary limitations (need for control).

PREVENTION

In order to intervene quickly in cases when an eating problem is present in our family, it is vital to be familiar with the signs and symptoms of this condition. Seeking treatment as soon as possible is essential for addressing and overcoming harmful eating behaviors. One way to lessen the likelihood of acquiring an eating disorder is to get help for mental health issues such as depression, anxiety, or OCD. If we want to be good role models for our family, we need to eat a balanced diet and not label items as good or bad. Refrain from talking about diets, making negative remarks about people's bodies, and going on diets yourself. For many people, the key to overcoming an eating disorder is cognitive behavioral therapy. The hope is that by undergoing this form of therapy, we might be able to pinpoint the faulty reasoning that drives our feelings and actions and change them. Worry and depression are symptoms experienced by some people who struggle with an eating problem. These conditions may be treated with antidepressants and other drugs. To modify your nutrition and create a balanced meal plan, you may want to see a registered dietitian who specializes in eating disorders. For most mental, behavioral, and physical health issues, a multidisciplinary team approach is the most effective course of treatment.

CONCLUSION

Personality traits have been found to be associated with the probability of experiencing eating difficulties. There is a significant connection between the neuroticism trait and the desire to be thin, the disorder known as bulimia, and that of being unhappy with one's body. The primary component that is responsible for determining the variances in all three characteristics is this one. In addition, when neuroticism is taken into consideration, trait conscientiousness also plays a significant role in the prediction of bulimia. On the other side, there is a negative correlation between body dissatisfaction and extraversion as well as their openness to experience. It is essential to prioritize health promotion, early intervention, and identifying vulnerable and at-risk individuals from a young age. Studies have indicated that eating and body disorders during adolescence can be important predictors of mental health challenges in the future (Linardon, et al., 2021). Adopting healthy coping mechanisms to address the condition's internal and external challenges is a key component of therapy for binge eating disorder. During treatment and rehabilitation, it is important to include positive coping techniques like journaling, art therapy, running, or self-care into your routine. Additionally, intuitive eating may be a helpful tool. Future research should investigate the longitudinal association between personality characteristics and eating disorders in relation to treatment strategies in order to further our knowledge of the interaction between the two (Levallius et al, 2015).

RECOMMENDATION

The majority of eating disorders stem from an unhealthy concern with one's weight, body shape, and food. This

might lead to dangerous eating habits. If we continue to practice these patterns, we may struggle to get the nutrition our bodies need. Anorexia, bulimia, bulimia nervosa, and other eating disorders may all lead to serious health consequences. Some ailments may arise as a consequence of them. They have also been linked to depression, anxiety, self-harm, and suicidal ideation. Through effective treatment, we can regain a more balanced approach to our eating habits and develop a healthier mindset towards food and our bodies. We have the expertise to potentially address and alleviate the significant issues resulting from the eating disorder.

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