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EVALUATION OF OBESE ADOLESCENTS AND OBESE ADULT RELATED TO BODY PERCEPTIONS AND BODY IMAGES

Yasemin Akman Karabeyoğlu*, Tuğçe Balkir, Şengül Başari, Güzde Evram, Yasemin Sorakin

Department of Psychological Counselling and Guidance, Near East University, Nicosia, North Cyprus, Via Mersin 10, TURKEY

ABSTRACT

The study is a qualitative study and aims to evaluate the opinions of obese adolescents and obese adults about body perception and body images. Within the scope of the study, 30 obese subjects, 15 adolescents and 15 adults, whose body mass index (BMI) is over 25, constitute the study group. In this study, "Personal Information Form and Interview Form" which were developed by the researchers were used as data collection tools. The analysis was analyzed by the content analysis method. As a result of the research, when the points of view of the obese adolescents and obese adults are compared, the two groups have similar and different views.

INTRODUCTION

Primary objective of individual, family and community is the individual to be healthy and productive. The World Health Organization defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity [1].

Human life consists of development stages that contain physiological and psychological characteristics. These phases are childhood, adolescence, adulthood and old age. Adolescence is a transition stage, which is between childhood and adulthood and in which bodily, physical and social growth is rapid [2]. Even though there are developments in weight and height of adolescents, it is seen that girl and boy adolescents are taller and have more weight when compared with adolescents of previous years [3]. The effect of hormones that change within the body during adolescence increase with the contribution of the increased appetite and a tendency towards gaining excessive weight is seen. The mistakes that are made on particularly nutrition are the reason for gaining weight. Obesity is a chronic disease, which is sourced when energy intake is more than energy spent and which depends on the increase of body fat tissue. Body Mass Index is commonly used for the description of obesity. Body mass index is calculated by dividing body weight, which is measured as kilograms, by the square of body height, which is measured in meters, and adults whose Body Mass Index is between 18,50 and 24,99 and children and adolescents, whose Body Mass Index is between 15 and 85 percentages are accepted as having normal weight [4]. Having 30 or more Body Mass Index is accepted as obesity [5]. According to the research carried out by Turkish Statistical Institute on health, body mass indexes of adolescents are determined to be within normal value as 69,2% [6].

When related literature is reviewed, it is found that obesity is seen among every age. Three periods are underlined to be important for the development of obesity. These are; prenatal, 5-7 ages and adolescence. The last critical stage, in which permanent fat is created, is adolescence. In accordance with the results of many researches, being overweight that begins at the childhood continues at adulthood as well. A study indicates that 26-41% of children that are overweight at preschool ages and 42-63% of children that are overweight at school ages remain being overweight at adult ages [7]. Another study carried out by Öncü (2009) [8] states that 1/3 of obese children and 80% of obese adolescents remain obese when they become adults. When related literature review is carried out, it appears that approximately 30% of obesity cases seen in adulthood are based on childhood ages [9].

A majority of conducted studies indicate that body dissatisfaction exists among obese individuals. Excessive weight gain that occurs as a result of unhealthy nutrition of individuals during their adolescence causes disruption on their body images. There is a positive image between being physically attractive among girls and having athletic body structures among boys with having a positive sense of self according to the studies conducted [10].

Body and mental health is known as a whole at the present time. When teenagers don't like their appearances, this can create negative sense of self and low self-esteem. In accordance with Rosenberg, self-esteem is a part of assessor attitudes that they attribute on the individuals or the individuals' perception of his/her self-value [11]. In addition, self-esteem is accepted as feelings of love, respect and confidence against themselves as a result of individuals to accept their abilities and powers by knowing and assessing themselves [12]. It is pointed in the literature that self-esteem decreases among adolescents with gaining weight. Researches which show that there is no relationship with obesity and decrease of self-esteem among adults have been found. Dissatisfaction on body perception is seen as the reason for obese individuals to want to lose weight. Moreover, there are studies that show that dissatisfaction on body is related with the perceived body weight instead of the body weight [13].

KEY WORDS

Body Mass Index, self-perceptions, body

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*Corresponding Author

Email:
yasemin.akmankarabeyo-
glu@neu.edu.tr

An increase has been seen in the number of obesity rate within our community and the importance of raising awareness on that has been highlighted [14]. Obesity is assessed as a psychosomatic disease and it is seen that a multi-dimension treatment approach is required for its treatment. The majority of the studies that are carried out on psychosocial aspect of obesity are conducted among adults. Conducted studies show that individuals that apply for treatment are in need of psychosocial support [15].

On the basis of personal expressions of adolescents and adults, their opinion on their senses of self and body are aimed to be presented with this study. Problem statement for the purpose of the study can be expressed as follows: "How is the assessment of opinions of adolescents and adults, whose Body Mass Index is high, on their senses of self and their body images?" Opinions of senses of self and body images of adolescents and adults, whose Body Mass Index is high, will be assessed comparatively in this study and it is aimed to present clues for psychosocial support studies that will be provided.

MATERIALS AND METHODS

Model of the study

Case study of qualitative research patterns has been used in this study. Case study is an approach, in which factors (environment, individuals, incidents, processes, etc.) of a situation are examined with a holistic approach and it focuses on how they affect the related situation and how they are affected from the related situation [16].

Study group

The study group is composed of 30 individuals in total, whose body mass index level is over 30 as 15 obese adults, 7 of which are women and 8 of which are men, and as 15 obese adolescents, 9 of which are girls and 6 of which are boys. Maximum variation sampling of sampling methods has been used for creating the study group. People from different sex and age groups of 30 obese individuals, whose body mass index is high, constitute the study group. Thus, different perspectives are going to be presented on the subject of the study. Personal information form has been applied on 30 obese individuals during interviews. The general [Table 1] that is given below has been created as a result of the answers given by 30 obese individuals to the personal information form.

Table 1: Personal information of obese adolescents and adults

Variable		Adolescents	Adults
Sex	Female	9	8
	Male	6	7
Age	15-17	11	
	12-14	4	
	24-30		4
	31-42		2
	50-74		9
Civil Status	Married		13
	Single		2
Educational Status	Primary School		2
	Middle School		2
	High School		7
	Undergraduate		3
	Graduate		1
Level of the school they study	Student	15	
	Middle School	4	
Level of the school they study	High School	11	
Birth order in family	1. born	5	6
	2. child	6	5
	3. child	3	3
	4. child	1	1
Body Mass Index (BMI)	32.3-34.1/ 33.2-38.13	6 (Female)	5 (Female)
	36.3-36.6/39.1-45.1	3 (Female)	3 (Female)
	30.0-34.9/30.0-35.5	3(Male)	4 (Male)
	37.0-41,5 / 38,8-45,1	3(Male)	3 (Male)

Data collection tools

The data of the study has been gathered with the Personal Information Form, which is prepared by the researchers in order to gather information from obese adolescents and adults, and with the semi-structured Interview Form on Senses of Self and Body Images of Obese Adolescents and Adults, which is also prepared by the researchers. Questions, which are prepared to determine sex, age, civil status,

educational status and occupations, weight and height of obese adolescents and adults, have been included in the personal information form. Questions that are prepared to compare senses of self and body images of obese adolescents and adults, whose body mass index is high, have been given within the framework of Interview Form on Senses of Self and Body Images of Obese Adolescents and Adults.

Collecting data

In order for the individuals to get over their fear of being exposed and to feel safe, the interviews have been completed as taking notes during the collection of data. Therefore, individuals that participated in the study were enabled to give reliable answers. In addition, names and surnames of the individuals that participated in the study have been kept confidential and their confidentiality rights have been respected.

Permissions were taken from the participants before interviews were made with obese adolescent and adult individuals, whose body mass index is high. Researchers spent long time with the interviewers during the time the interviews were held at different locations (house, school, etc.). To establish a trust environment, collected data to reflect the truth and to be strong for the validity of the study has been aimed that way.

Data analysis

Data of this study has been analyzed with the content analysis method. Interviews were written first then they were prepared to be analyzed by the researcher while the content analysis was being made.

Each question on Interview Form on Senses of Self and Body Images of Obese Adolescents and Adults that is the data collection tool has been accepted as a category. Firstly, two main categories that are sense of self and body image have been taken as basis. Two main categories in the study have been presented as fundamental category at the findings section accordingly. Titles under each category have been taken as basis as subcategories and analysis has been made. Code analysis (keyword) has been made first of all with each question. Keywords in the answers given by the participants to each question have been determined accordingly. Codes in each question have been joined and themes have been obtained. Findings of the study have been presented with the basis of themes. Themes have been shown in tables and the frequency of each theme has been determined. Findings have been explained in written form under the tables and themes have been explained by giving quotations from the interviews of the participants.

Validity: Findings obtained from interviews made with 30 obese adolescent and adult individuals have been written in a detailed way and then the way of reaching deductions have been expressed. Opinions at the interviews have been given with direct quotations; thus the validity of the study has been made.

Reliability: The researchers avoided leading the participants in this study. Data that was obtained through interviews have been analyzed by the researchers and categories have been determined with coding method. In order to show the reliability of the coding used in this study, the researchers and two experts that are experienced on qualitative research have worked together at data analysis process. As codes have been accepted as themes directly, internal reliability has not been checked. One of the measures that will be taken by the researchers on external reliability is that defining individuals, which are data sources in the study, in a clear way. Data have been kept in a way that can be analyzed by someone else.

FINDINGS AND INTERPRETING

Findings on senses of self

Table 2: Opinions of obese adolescents and adults on knowing themselves

Self knowledge at obese adolescents	f	Self knowledge at obese adults	f
Yes	11	Yes	12
No	4	No	3
Total	15	Total	15

As it can be seen in [Table 2], 30 answers have been given to the question; "Do you believe that do you know yourselves enough?" that was asked to 30 obese individuals. 11 of obese adolescent individuals that participated in the study said "yes", 4 of them said "no;" whereas 12 of obese adult individuals said "yes" and 3 of them said "no."

The detailed response of a 42 years old male adult on the general answer of "yes" is as follows:

"The experiences I had at dorm, military service and marriage enabled me to know myself. I was well connected at my dorm life and during my military service and I learned to get over some difficulties. I learned life at marriage." (K2)

Table 3: Opinions of obese adolescents and adults on their characteristics

Personality characteristics of obese adolescents	f	Personality characteristics of obese adults	f
Good social relations, fun and cheerful	4	Successful, fun, good social relations	6
Successful and ambitious	4	Helpful	3
Sensitive and delicate	3	Emotional	2
Sympathetic	1	Ordinary	1
Confident	1	Good looking and sympathetic	1
Aggressive	1	Inactive and overweight	1
Doesn't go beyond his/her limits	1	Poor social relations	1
Total	15	Total	15

30 obese individuals that participated in the study were asked "How do you describe yourself?" and 30 answers were given as it can be seen in [Table 3]. 4 obese adolescents that participated in the study said "good social relations, fun and cheerful," 4 of them said "successful and ambitious," 3 of them said "sensitive and delicate," 1 of them said "sympathetic," 1 of them said "confident," 1 of them said "aggressive" and 1 of them said "he/she doesn't go beyond his/her limits." 6 of obese adults that participated in the study said "successful, fun and good social relations," 3 of them said "helpful," 2 of them said "emotional," 1 of them said "good looking and sympathetic," 1 of them said "inactive and overweight" and 1 of them said "poor social relations."

The detailed answer of a 28 years old female adult on the general answer of "successful, fun and good social relations" is given below:

"I think of myself as successful, steady and fun according to the atmosphere I'm in." (K14)

The detailed answer of a 17 years old female adolescent on the general answer of "sensitive and delicate" is as follows:

"I have a very sensitive and delicate structure." (K9)

Table 4: Opinions of obese adolescents and adults on what would they change with themselves if they had a magic wand

The parts obese adolescents want to change with themselves	f	The parts obese adults want to change with themselves	f
Weight	14	Weight	11
Eye colour	1	Doesn't want to change anything	2
		Increasing education level	1
		Breasts	1
Total	15	Total	15

As it can be seen in [Table 4], 30 obese individuals that participated in the study were asked "What would you like to change with yourself if you had a magic wand?" and 30 responses were given. 14 of obese adolescents that participated in the study said their "weight", 1 of them said "the colour of his/her eyes"; whereas 11 obese adults said their "weight", 2 of them said they "don't want to change anything," 1 of the said "increase his/her education level" and 1 of them said "breasts."

The detailed answer of an adult on the general answer as "weight" is given below:

"I would like to lose weight and have a weight of 75 kilograms." (K9)

Table 5: Opinions on their strong aspects when obese adolescents and adults compare themselves with individuals at the same age

Opinions of obese adolescents on their strong aspects	f	Opinions on obese adults on their strong aspects	f
Strong, make themselves listened to	7	Strong, confident	6
Being fun	3	Smart, ingenious	4
Good at social relations	2	No difference	2
Successful	2	Being healthy	1
Having nice skin	1	Good at social relations	1
Total	15	Total	14

As it can be seen in [Table 5], 30 obese individuals that participated in the study were asked "When you compare yourselves with individuals at the same age, what do you think your strong and poor aspects

are?" 15 responses were given by obese adolescents that expressed their strong aspects and 14 responses were given by obese adults. 7 obese adolescents that participated in the study said "strong, make themselves listened to," 3 of them said "being fun," 2 of them said "good at social relations," 2 of them said "successful" and 1 of them said "having nice skin." 6 obese adults that participated in the study said being "strong, confident," 4 of them said "smart, ingenious," 2 of them said "there is no difference," 1 of them said "being healthy" and 1 of them said "good at social relations." One of the obese adults did not answer this question.

Table 6: Opinions on their poor aspects when obese adolescents and adults are compared with individuals at the same age

Opinions of obese adolescents on their poor aspects	f	Opinions of obese adults on their poor aspects	f
Weight	3	Weight	7
Poor social relations	3	Being restricted on movements	4
Emotional	3	Not being attractive	3
Being quiet	1	Emotional	1
Looking tough	1		
Total	11	Total	15

30 obese individuals that participated in the study were asked "When you compare yourselves with individuals at the same age, what do you think your strong and poor aspects are?" as it can be seen in [Table 6], 11 obese adolescents and 15 obese adults that expressed their poor aspects gave response to the question. 3 obese adolescents that participated in the study said "weight," 3 of them said "poor social relations," 3 of them said "emotional," 1 of them said "being quiet" and 1 of them said "looking tough." 4 obese adolescents did not respond to that question. 7 of the obese adults that participated in the study said "weight," 4 of them said "being restricted on movements," 3 of them said "not being attractive" and 1 of them said "emotional."

The detailed answer of a 51 years old male adult on the general answer of "being restricted on movements" is given below:

"My poor aspect is that I have more bulky and heavy structure when compared with them." (K1)

The detailed answer of a 15 years old male adolescent on the general answer of "weight" is as follows:

"My poor aspect is having more weight according to people of my age." (K5)

Table 7: Opinions of obese adolescents and adults on their senses of self as of gaining weight

Opinions of obese adolescents on themselves after gaining weight	f	Opinions of obese adults on themselves after gaining weight	f
Sad	7	No change	5
Being restricted on movements	3	Being restricted on movements	3
Not affected negatively	3	Not admiring himself/herself	3
Being angry	2	Being excluded from social circle	2
		Not wanting to be in social environments	2
Total	15	Total	15

30 obese individuals that participated in the study were asked "How does this situation affect you after gaining weight?" as it can be seen in [Table 7] and 30 responses were given to that question. 7 of the obese adolescents that participated in the study said "sad," 3 of them said "being restricted on movements," 3 of them said they were "not affected negatively" and 2 of them said "being angry" whereas 5 of the obese adults said there is "no change," 3 of them said "being restricted on movements," 3 of them said "not admiring himself/herself," 2 of them said "being excluded from social circle" and 2 of them said "not wanting to be in social environments."

The detailed answer of a 16 years old female adolescent on the general answer of "sad" is given below:

"I started to feel so sad after I started to gain weight. Nothing I wear looks good on me." (K8)

Findings on body images

Table 8: Opinions of obese adolescents and adults on the parts they like in their appearances

Parts that obese adolescents like physically	f	Parts that obese adults like physically	f
Eyes, face	7	Hands, face	9
Hands	2	Breasts	1

Arms	1	Hips, legs	1
Shoulders	1	Shoulders	1
Total	11	Total	12

As it can be seen in [Table 8], 30 obese individuals that participated in the study were asked “What are the parts you like and you don’t like on your body the most?” 11 responses given by obese adolescents and 12 responses were given by obese adults. 7 obese adolescents that participated in the study said their “eyes, face,” 2 of them said their “hands,” 1 of them said “arms” and 1 of them said “shoulders.” 3 of the obese adolescents did not answer to that question. 9 obese adults that participated in the study said their “hands, face,” 1 of them said “breasts,” 1 of them said “hips, legs” and 1 of them said “shoulders.” 3 of the obese adults did not answer to that question.

Table 9: Opinions of obese adolescents and adults on the parts they don’t like in their appearances

Parts that obese adolescents don’t like physically	f	Parts that obese adults don’t like physically	f
Belly, hips, legs	7	Belly, hips, legs	8
Body	4	Hands, feet	3
Don’t like himself/herself	3	Breasts	2
Eyes	1	Don’t like himself/herself	2
Total	15	Total	15

As it can be seen in [Table 9], 15 obese individuals that participated in the study were asked “What are the parts you like and you don’t like on your body the most?” 15 responses were given by obese adolescents and 15 responses were given by obese adults on the parts they don’t like on their bodies. 7 obese adolescents that participated in the study said “belly, hips, legs,” 4 of them said their “bodies,” 3 of them said they “don’t like themselves” and 1 of them said he/she doesn’t like his/her “eyes.” 8 of the obese adults that participated in the study said their “belly, hips,” 3 of them said “hands, feet,” 2 of them said their “breasts” and 1 of them said he/she “doesn’t like himself/herself.”

The detailed answer of a 28 years old female adult on the general answer of “belly, hips and legs” is given below:

“The parts that I don’t like in my body are my belly, legs and hips of course, in brief I don’t like any part of myself except for my face.” (K15)

The detailed answer of a 14 years old female adolescent on the general answer of “don’t like themselves” is as follows:

“I don’t like anywhere on my body. I don’t want to look into mirrors.” (K2)

Table 10: Opinions of obese adolescents and adults on mirrors

Opinions of obese adolescents on mirrors	f	Opinions of obese adults on mirrors	f
Good	9	Good	12
Bad	6	Bad	2
		Not bad	1
Total	15	Total	15

As it can be seen in [Table 10], 30 obese individuals that participated in the study were asked “How is your association with mirrors?” and 30 responses were given to that question. 9 of the obese adolescents that participated in the study said it was “good” and 6 of them said it was “bad” whereas 12 of the obese adults said it was “good,” 2 of them said it was “bad” and 1 of them said it was “not bad.”

Table 11: Opinions of obese adolescents and adults on shopping

Obese adolescents’ enjoying shopping	f	Obese adults’ enjoying shopping	f
Yes	5	Yes	12
No	10	No	3
Total	15	Total	15

As it can be seen in [Table 11], 30 obese individuals that participated in the study were asked “Do you enjoy going shopping?” and 30 responses were given to that question. 5 of the obese adolescents that participated in the study said “yes” and 10 of them said “no” whereas 12 of the obese adults said “yes” and 3 of them said “no.”

The detailed answer of a 57 years old woman on the general answer of “yes” is as follows:

"I like shopping very much. I prefer to go particularly to shops that sell plus size." (K12)

The detailed answer of a 15 years old male adolescent on the general answer of "no" is given below: "I don't go to shopping. My mother buys my clothes instead of me. Besides the things that she buys is always the same style. As I am overweight, fashionable clothes are always small for me." (K3)

Table 12: Opinions of obese adolescents and adults on choosing outfits

Obese adolescents' choosing outfits	f	Obese adults' choosing outfits	f
Loose clothes	13	Loose clothes	10
Wear anything (Doesn't choose outfits)	2	Wear anything	2
		Suits	2
		Tight clothes	1
Total	15	Total	15

30 obese individuals that participated in the study were asked "What kind of outfits do you prefer to wear?" as it can be seen in [Table 12] and 30 responses were given to that question. 13 obese adolescents that participated in the study said they prefer "loose clothes" and 2 of them said they "wear anything (they don't choose outfits)." 10 of the obese adults that participated in the study said they prefer "loose clothes," 2 of them said they "wear anything," 2 of them said they wear "suits" and 1 of them said "tight clothes."

The detailed answer of a 24 years old female adult on the general answer of "wear anything" is given below:

"I continued to wear whatever I want even after I gained weight. I even wear bikinis in summer. I've never had such obsessions." (K8)

The detailed answer of a 16 years old male adolescent on the general answer of "loose clothes" is as the following:

"I usually prefer to wear loose t-shirt and jeans. I buy dark colored and loose t-shirts to cover my belly." (K4)

Table 13: Opinions of obese adolescents and adults on the emotions they feel when there are outfits they don't like on themselves even though they want to wear them

Emotions obese adolescents feel when there are outfits they don't like on themselves even though they want to wear them	f	Emotions obese adults feel when there are outfits they don't like on themselves even though they want to wear them	f
Sad	9	Sad	10
Regret	4	Don't feel anything	3
Don't feel anything (nothing)	2	Get angry (infuriated)	1
		Regret	1
Total	15	Total	15

As it can be seen in [Table 13], 30 obese individuals that participated in the study were asked "How did you feel when there are outfits that you don't like on yourself even though you really want to wear them?" and 30 responses were given to that question. 9 of the obese adolescents that participated in the study said they felt "sad," 4 of them said "regret" and 2 of them said they "did not feel anything (nothing)." 10 of obese adults that participated in the study said they were "sad," 3 of them said they "did not feel anything," 1 of them said he/she "got angry (infuriated)" and 1 of them said "regret."

The detailed answer of a 31 years old female adult on the general answer of "sad" is as the following:

"Of course I feel said if I see something nice and if it doesn't fit me. Sometimes I want to be like other women. My sister is having a wedding; I want to wear a mermaid dress; but what's the point if I look funny." (K3)

The detailed answer of a 15 years old female adolescent on the general answer of "regret" is given below:

"I liked a very beautiful dress for the graduation ceremony that was held last year and I went to shopping with my friends. Everyone were fitted the dresses they liked; but I was the only one that was fat and I couldn't even get in the dress. I never forget that day. I regretted so much as I did not take care of my nutrition." (K6)

DISCUSSION, CONCLUSION AND RECOMMENDATIONS

When perspectives of obese adolescents and adults on themselves are compared as a result of the study, the similar and different opinions of both groups (opinions of 8 or more participants in each group) can be summarized as follows:

- Majority of the participants in both groups express that they know themselves well.
- Adolescents express themselves as people that socially communicate well, that are fun and cheerful; whereas adults express themselves as successful, fun, helpful and emotional.
- Both adolescents and adults state that they want to get rid of their excessive weight. Conducted studies have indicated that most of the obese individuals want to lose weight due to their dissatisfaction of their bodies [13]. In accordance with Rosen (2002) [17], obese individuals want to lose weight because they don't like their appearances, because they believe that losing weight will increase their appearance and their appeal and they will feel better if they lose weight.
- When adolescents compared themselves with the people at the same age and position, they consider themselves as people that make themselves listened to as their strong aspect. Adults consider themselves as strong and confident individuals. Both adolescents and adults express that being overweight restricts their social relations in their lives as their poor aspects. Schwimmer, Burwinkle and Varni (2003) [18] stated that high level of body mass index at children and adolescents restrict social relations and dynamism. In addition, in the study carried out by Öksüz (2012) [19], it was stated that people, who are not pleased with their own bodies, have personality characteristics that are more pessimistic, that feel inadequate and insecure and that requires approval.
- Adolescents state that gaining weight affect their selves in a negative manner. The effect of gaining weight is seen as adolescents have desire to be admired with regard to their developmental period. On the contrary, they say that their social relations decreased and they abstain from being in social environments. The fact that the feelings and opinions of an individual on himself/herself affect his/her body image has been also seen in the studies of Heinberg et al (2007) [20] and Taşkın (2009) [21].
- Adults like their hands and faces and they complain about their belly and hips in particular. The majority of adolescents don't agree on the parts they like or don't like on their bodies.
- The majority of the participants in both groups state that their feeling for mirrors were good. It was stated in the study conducted by Cooper, Fairburn and Hawker (2003) [22] that behaviours such as examining their bodies in front of the mirror, measuring specific parts of their bodies again and again, squeezing some parts of their bodies with their fingers or controlling their body weight by weighting themselves all the time are seen in people, who were diagnosed with obesity.
- Adults enjoy going shopping; whereas adolescents don't enjoy. Accordingly, it can be said that obese adults are comfortable in their own skin and they enjoy shopping because they do not avoid their own body images for being overweight. In contradiction to the result of the study, Cooper, Fairburn and Hawker (2003) [22] stated that because of the negative body image obese individuals have, they tend to avoid going shopping for clothes, doing some sports such as playing tennis or swimming, some physical activities such as dancing, having sexual intercourse or attending social meetings and being weighted.
- Both groups of participants prefer wearing loose clothes. Reas, Grilo, Masheb and Terence Wilson (2005) [23] stated that obese individuals prefer to wear loose clothes, they show behaviours such as hiding their bodies and therefore these behaviours of them detract them away from their fears to gain weight. Parallel to the results of the study, Çimen Yavuz and Çimen Bölgen (2016) [24] stated that obese individuals prefer to wear less revealing outfits when compared with thin individuals. Likewise, Reas et al (2005) [23] expressed that obese individuals avoid wearing clothes that reveal their body images. The reason for obese adolescents and adults for wearing loose outfits may be resourced from cognitive thought that obese individuals have such as "I should hide my hips; otherwise everyone will see how big they are," as it is stated by Cooper, Fairburn and Hawker (2003) [22].
- Both groups that participated in the study said that they were sad and regretted for not being able to wear the clothes, which they really want to wear but that don't fit their bodies because of their weight. In accordance with Çivitçi and Harmankaya (2012) [25] 90.4% of obese children and adolescents state that they cannot find clothes that fit their bodies and 84.6% could not find clothes according to their wishes. It is also in line with the results of this study.

The following recommendations have been given by the researchers in this study:

- In order to gain healthy nutrition habits, conference and seminar studies should be given by health experts for the families of children that are diagnosed with obesity.
- Applied nutrition training should be provided for students to make them gain healthy nutrition habits and to increase their quality of life within the scope of counselling services at secondary schools.
- Young people, their families and experts should gain awareness on this subject so as to determine the reasons that cause obesity and to take preventive measures.
- Before entering obesity limit, individuals should attend trainings to arrange and protect their life styles. Effects of metabolic and social problems that are related with obesity should be

decreased and necessary help should be taken from mass media such as media, TV and internet.

Without doubt, making contribution for individuals to gain healthy nutrition habits starting from childhood would support the development of healthy personality in addition to body health.

CONFLICT OF INTEREST

There is no conflict of interest.

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REFERENCES

- [1] WHO. [2003] World Health Organization. WHO definition of health. <http://www.who.int/about/definition/en/print.html> (Erişim Tarihi: 05.05.14).
- [2] Wenar C, Kerig P. [2005] Developmental psychopathology from infancy through adolescence. Fifth Edition. London: Mc Graw Hill.
- [3] Okyay, P., & Ergin, F. (2012). Physical growth and development in adolescence period. In Eskin M & et.al (Ed.), Youth in Turkey (pp. 3–52). Ankara: Turkey Association of Child and Adolescent Psychiatry.
- [4] World Health Organization (WHO) [2013] Obesity and overweight fact. Sheet No:311. <http://who.int/mediacentre/factsheets/fs3117en/print.html> (Date of Access: 17.04.2014).
- [5] Tezcan B. [2009] Self-respect, body image and traumatic past experiences at obese individuals. Dissertation, Bakırköy Prof. Dr. Mazhar Osman Mental Health and Neurological Disorders Training and Research Hospital, 2. Psychiatry Clinic, İstanbul.
- [6] Turkish Statistical Institute (TSI) [2013] household labour force statistics 2013 press releases. (<http://www.tuik.gov.tr/PreHaberBultenleri.do?id=13651>)
- [7] Köksal G, Özel H. [2008] Obesity at childhood and adolescence period. Ministry of Health Publication No: 729. Ankara: Klasmat Typography.
- [8] Öncü İ. [2009] Relationship of metabolic parameters with diet and exercise at childhood age obesity. Thesis for Specialty in Medicine. Çukurova University Faculty of Medicine Department of Child Health and Diseases, Adana.
- [9] İmamoğlu Ş. [2009] Diabetes mellitus. Asst. Ed: Özyardımcı-Ersoy C. İstanbul, Deomed Medikal Publishing. 21.
- [10] Erden M, Akman Y. [2016] Educational Psychology. Ankara: Arkadaş Publishing House.
- [11] Farid MF, Akhtar M. [2013] Self-esteem of secondary school students in Pakistan. Middle-East Journal of Scientific Research. 14(10):1325-1330.
- [12] Ogden J, Evans C. [1996] The problem with weighting: Effects on mood, self-esteem and body image. Int J Obes Relat Metab Disord. 20(3):272-277.
- [13] Karakaya K, Baran E, Tüzün H, Göçmen L, Erata M, Arıkan D, Kökalan Yeşil H. [2012] Body weight perception study of Turkey. Ministry of Health, General Directorate for the Improvement of Health, Ankara.
- [14] Erol A, Toprak G, Yazıcı F. [2002] Affects that predict eating disorder and general psychological affects among university student women. Turkish Psychiatry Journal, 13 (1):48-57.
- [15] Deveci A, Demet M, Özmen B, Özkaya Kafesçiler S, Özmen E, Hekimsoy Z, Güçlü F. [2006] Response to treatment at obesity and alexithymia. Clinical psychiatry Journal, 9(4):170-176.
- [16] Yıldırım A, ve Şimşek H. [2013] Qualitative research methods at social studies. Ankara: Seçkin Publishing House.
- [17] Rosen JC. [2002] Obesity and body image. Eating disorders and obesity: A comprehensive handbook. Ed: CG. Fairburn and KD. Brownell. Newyork, Guilford. 399-402.
- [18] Schwimmer JB, Burwinkle TM, ve Varni JW. [2003] Health-related quality of life of severely obese children and adolescents. Journal of the American Medical Association. 289(14):1813-1819.
- [19] Öksüz Y. [2012] Relations among self-determination levels and body perceptions of university students. Gazi University Journal of Industrial Arts Education Faculty. 28:69-77.
- [20] Heinberg LJ, Kudel I, White B, et al. [2007] Assessing body image in patients with systemic sclerosis (scleroderma): validation of the adapted Satisfaction with Appearance Scale. Body Image. 4(1):79-86.
- [21] Taşkın L. [2009] Gynaecological diseases and obstetrical nursing (2. Printing). Sistem Ofset, Ankara. 100-101.
- [22] Cooper Z, Fairburn CG, Hawker DM. [2003] Cognitive behavioural treatment of obesity: A clinician's guide. New York, Guilford Press.
- [23] Reas DL, Grilo CM, Masheb RM, Terence Wilson, G. [2005] Body checking and avoidance in overweight patients with binge eating disorder. International Journal of Eating Disorders. 37:342-346.
- [24] Yavuz Çimen MB, VE Bölgen Çimen Ö. [2016] Obesity and Vitamin D. Mersin University Journal of Health and Science. 9(2):102-112.
- [25] Çivitçi Ş, Harmankaya H. [2012] Characteristics of clothes preferred by 6–16 years old obese children and adolescents. Electronic Journal of Vocational Colleges. 2(1):49-60.