

Body image and borderline personality disorder among psychiatric inpatients

Randy A. Sansone^{a,b,*}, Jamie W. Chu^{c,d}, Michael W. Wiederman^e

^aPsychiatry and Internal Medicine at Wright State University School of Medicine, Dayton, OH 45408, USA

^bPsychiatry Education at Kettering Medical Center, Kettering, OH 45429, USA

^cPsychiatry at Wright State University School of Medicine, Dayton, OH 45408, USA

^dDepartment of Psychiatry at Miami Valley Hospital, Dayton, OH 45429, USA

^eDepartment of Human Relations at Columbia College, Columbia, SC 29203, USA

Abstract

Objective: With the exclusion of studies in individuals with eating disorders, few investigators have examined body image issues in patients with borderline personality disorder (BPD). In this study, we examined among psychiatric inpatients relationships between body image and BPD.

Method: In a cross-sectional sample of convenience, we surveyed 126 women in an inpatient psychiatric unit using 5 measures for body image and 2 measures for BPD.

Results: Using standardized cutoffs for BPD diagnosis, participants with BPD demonstrated a number of differentiating features with regard to body image issues. Explicitly, BPD did not seem to be related to being self-conscious about one's appearance, although BPD was related to being more self-conscious, in general. Individuals with BPD were not more invested in their appearance as a source of self-definition but evaluated their own appearance more negatively and were more likely to believe that attractiveness is an important factor for happiness and acceptance. Although BPD was not related to perceptions about the strength and competence of one's own body, those with BPD indicated less comfort and trust in their own bodies. In general, it appeared that body image measures that were more perceptually grounded were more likely to be similar to non-BPD participants, whereas body image measures that were more cognitively grounded were more likely to be statistically significantly different in comparison with non-BPD participants.

Conclusions: Psychiatric inpatients with BPD demonstrate a number of disturbances in body image.

© 2010 Elsevier Inc. All rights reserved.

1. Introduction

Body image, or the subjective view of one's physical appearance, is a complex construct and includes a range of dimensions [1]. These dimensions are also referred to as facets or components [2] and appear to be derived from perceptual and cognitive/affective processes [3]. According to current research, negative body image is a potential precursor to future psychopathology, including the development of eating disorders [3,4]. With regard to body image distortion in those with eating disorders, in a meta-analytic examination of 83 studies on body image, researchers reported varying degrees of body image disturbance as a

function of eating disorder diagnosis (anorexia nervosa demonstrated the greatest divergence with norms), considerable heterogeneity across studies that was partially attributed to the assessment approach used, and a stronger disturbance in cognitive/affective components than perceptual components [5].

Little is known about body image in borderline personality disorder (BPD). This relationship may ultimately be clinically relevant in a number of ways. For example, does poor body image potentially have any mediating effects on self-harm behavior (ie, does it facilitate self-directed self-harm behavior)? Likewise, are there any potential interrelationships between poor body image and quasi-psychotic phenomena including dissociation? However, as a preliminary investigation, the first task is to identify possible differences in body image between those with vs without BPD.

* Corresponding author. Sycamore Primary Care Center, Miamisburg, Ohio 45342, USA. Tel.: +1 937 384 6850; fax: +1 937 384 6938.

E-mail address: randy.sansone@khnetwork.org (R.A. Sansone).

Empirical studies on the relationship between body image and BPD are scant. Excluding studies of eating disorder samples, we were only able to locate 3 such studies. In the first study, Sansone et al [6] examined 48 women in an adult outpatient psychiatric clinic; after controlling for body mass index, investigators found relationships between self-rated bodily attractiveness (inverse relationship), facial attractiveness (inverse relationship), and social avoidance due to body image concerns, and scores on a self-report measure for BPD. In a German study, Haaf et al [7] examined 47 women with BPD, patients with bulimia nervosa, and healthy controls and found significant differences in body image scores among the 3 subsamples. However, the original report is in German, and the abstract did not indicate the body image factors that differentiated the BPD subsample from the other 2 subsamples. In a third study, Kazuko and Inoue [8] investigated 32 Japanese outpatients with BPD and compared them with other psychiatric outpatients and 216 college student controls. Distortion in body image was 1 of the 2 factors that most discriminated the BPD subsample from the other 2 subsamples, although the characterization of this feature was not available from the abstract (the original report is in Japanese). To summarize, little is actually known about the specific body image difficulties encountered in individuals with BPD, although such disturbances appear to vaguely characterize these patients.

In the following study, we examined several measures of body image in relationship to BPD among 126 female psychiatric inpatients. We hypothesized that those participants with BPD features would evidence higher disturbances on most of these measures compared with non-BPD participants.

2. Method

2.1. Participants

Participants were female psychiatric inpatients, 18 years or older, who were hospitalized in the psychiatric ward of a suburban hospital in a medium-sized, Midwest city. Both residents and faculty in the department of psychiatry are treatment providers in this setting. The sample was cross-sectional and one of convenience. Exclusion criteria were cognitive (eg, dementia), medical (eg, pain), intellectual, and/or psychiatric impairment (eg, psychosis) that would preclude the completion of a research booklet. A total of 154 inpatients were approached and 126 agreed to participate for a response rate of 81.8%.

The working sample for this study consisted of 126 women who ranged in age from 18 to 74 years (mean, 34.84; SD, 12.19). As for ethnicity, most respondents were white (81.0%), followed by African American (10.3%), Native American (5.6%), Hispanic (1.6%), and “other” (0.8%). One respondent failed to indicate race/ethnicity. As for the highest education attained, 7 respondents failed to indicate this information. Of those who did, 15.1% had not graduated

high school, 24.4% had earned at least a 4-year college degree, and 5.9% had earned a graduate degree.

2.2. Procedure

During the routine workday at the study site, one of the investigators (JWC) solicited candidates for the study as time allowed. Upon review of the purpose of the study, including potential risks and benefits, participants were asked to complete a 6-page research booklet, which took about 15 minutes. The cover page of the research booklet contained the various elements of informed consent, and completion of the research booklet was assumed to be implied consent.

The research booklet initially unfolded with queries about demographic information (ie, age, race, highest level of completed education). We then explored participants' body image impressions using 5 self-report measures and BPD using 2 self-report measures. The measures were as follows.

2.2.1. Appearance self-surveillance

The Surveillance Subscale of the Objectified Body Consciousness Scale [9] measures the extent to which one engages in self-surveillance of one's own appearance. Possible responses to these items range from 1 (strongly disagree) to 6 (strongly agree). Intermediate numbers are labeled as “disagree,” “somewhat disagree,” “somewhat agree,” and “agree.” Sample items include, “During the day, I think about how I look many times” and “I rarely compare how I look with how other people look.” In the current study, Cronbach alpha was .80.

2.2.2. Body image and appearance schemas

The Appearance Schemas Inventory [10] is a measure of the extent to which an individual holds core beliefs about the importance, meaning, and effects of appearance in their own and other people's lives. Underlying the 14 items are 3 subscales: (1) the Body Image Vulnerability Scale (6 items), which “reflects individuals' assumptions that their appearance is inherently defective and socially unacceptable” (pp. 44-45) [10]; (2) the Self-Investment Scale (5 items), which “concerns beliefs that deem appearance as influential and central to self-concept and that reflect the necessity of the pursuit and management of attractiveness” (p. 45) [10]; and (3) the Appearance Stereotyping Scale (3 items), which “entails assumptions about the social goodness/badness of an attractive/unattractive appearance” (p. 45) [10]. Possible responses to these items range from 1 (strongly disagree) to 6 (strongly agree). Intermediate numbers are labeled as “disagree,” “somewhat disagree,” “somewhat agree,” and “agree.” Sample items include, “If I could look just as I wish, my life would be much happier” (Body Image Vulnerability Scale), “What I look like is an important part of who I am” (Self-Investment Scale), and “Homely people have a hard time finding happiness” (Appearance Stereotyping Scale). In the current study, Cronbach alpha for each scale was .81, .76, and .71, respectively.

متن کامل مقاله

دریافت فوری ←

ISIArticles

مرجع مقالات تخصصی ایران

- ✓ امکان دانلود نسخه تمام متن مقالات انگلیسی
- ✓ امکان دانلود نسخه ترجمه شده مقالات
- ✓ پذیرش سفارش ترجمه تخصصی
- ✓ امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
- ✓ امکان دانلود رایگان ۲ صفحه اول هر مقاله
- ✓ امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
- ✓ دانلود فوری مقاله پس از پرداخت آنلاین
- ✓ پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات