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Influence of weight loss therapy programs in body image self-perception in adults with intellectual disabilities



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Abstract Some studies suggest that people with intellectual disabilities (ID) might show distortions regarding body image self-perception. The objectives of this study were to investigate whether people with ID could correctly identify their body image and to determine if participating in a weight loss therapy program (WLTP) influenced in any way that perception. For that purpose, an experiment was proposed and all along a weight loss therapy program, a comparison between a body image subjective measure, as the Stunkard scale, and an objective one, as body mass index, was performed. The results obtained showed that individuals with ID ($n = 24$) perceived in a wrong way their body image before any intervention program (58%). After applying the WLTP for ten weeks, an accentuation in this perception distortion (83%), mostly related with underestimation, was observed with respect to actual body mass index values. The strongest conclusion that can be drawn from this study is that people with ID do not correctly identify their body image. Furthermore, participating in WLTP influences their physical self-concept perception in the way that controlling two variables, as exercise and caloric restriction, causes greater disruption in that perception than controlling only one of them.

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PALABRAS CLAVE

Discapacidad intelectual;
Imagen corporal;
Índice de masa corporal;

Influencia de un programa terapéutico de pérdida de peso sobre la autopercepción de la imagen corporal en adultos con discapacidad intelectual

Resumen Algunos estudios sugieren que personas con discapacidad intelectual (DI) podrían presentar distorsiones en la autopercepción de su imagen corporal. Los objetivos de este estudio fueron investigar si la personas con DI podían identificar correctamente su imagen corporal y determinar si participar en un programa terapéutico de pérdida de peso (PTPP) influyó de alguna manera esa percepción. Para ello, a lo largo de un PTPP, se realizó una comparación entre

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una medida objetiva (IMC) y una medida subjetiva (escala de Stunkard) de imagen corporal. Los resultados mostraron que los individuos con DI ($n=24$) percibieron de manera errónea su imagen corporal incluso antes de la realización de cualquier programa de intervención (58%). Después de aplicar el PTPP durante diez semanas se observó una acentuación de esta distorsión (83%) con respecto a los valores reales de IMC. La conclusión más importante que se puede sacar de este estudio es que las personas con DI no identifican correctamente su imagen corporal. Asimismo, la participación en PTPP tiene influencia en la imagen corporal, en el sentido de que el control de dos variables, como el ejercicio físico y la restricción calórica, causa una mayor distorsión que el control de solamente una de ellas.

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Body image is defined as a multidimensional model which attempts to explain the interpretation that people consciously make of their own body (Plesa-Skwerer, Sullivan, Joffre, & Tager-Flusberg, 2004). It is hierarchically organized into two different dimensions: physical and affective-emotional (Miguez, de la Montana, Gonzalez, & Gonzalez, 2011). Most studies carried out in general population to date, focused on the physical dimension of body image, also named as physical self-concept or body size (Jones, 2012). They generally compared body mass index (BMI) with different contrasted subjective scales, but no consensus conclusions can be drawn from them in terms of accuracy when it comes to the self-assessment of their body image (Knight, Illingworth, & Ricciardelli, 2009; Lynch et al., 2009; Madanat, Hawks, & Angeles, 2011; Miguez et al., 2011; Mikolajczyk et al., 2010; Wardle, Haase, & Steptoe, 2006).

The same analysis of the physical dimension of body image was made in population with intellectual disabilities (ID), although with fewer published studies. People with Williams syndrome and Prader-Willi syndrome, both with very defined obesity phenotypes, were more likely to develop wrong physical self-concepts, showing significant discrepancies between the image that they better identified with and their actual BMI values (Napolitano, Zarcone, Nielsen, Wang, & Caliendo, 2010; Plesa-Skwerer et al., 2004; Weiss, Diamond, Denmark, & Lovald, 2003). Moreover, several studies also reported that ID increased the degree of body dissatisfaction (difference between how they think they looked and how they would like to be) with respect to general population (Reel, Bucciare, & SooHoo, 2013; Yuen & Hanson, 2002).

Consequently, if people with ID were more likely to develop erroneous physical self-concepts of body image, it would be essential to establish the basis of a common construct, grounded on the objective analysis of their reality, in order to acquire their psychological welfare (Bégarie, Maïano, & Ninot, 2011; Garrido, García, Flores, & de Mier, 2012). With this study, we attempt to provide additional knowledge on the physical dimension of body image, for contributing to the development of this construct.

This fact forces us to take into account the high levels of incidence and prevalence of overweight and obesity, associated with high rates of physical inactivity, which are consistently higher in people with ID when compared to those in general population (Bartlo & Klein, 2011; Bégarie

et al., 2011; de Winter, Bastiaanse, Hilgenkamp, Evenhuis, & Echteld, 2012; Gazizova, Puri, Singh, & Dhaliwal, 2011; Melville et al., 2008; Reichard & Stolzle, 2011; Wallace & Schlutter, 2008). Thereby, people with ID need to participate in systematic programs of therapeutic exercise oriented to weight loss (Hilgenkamp, Reis, van Wijck, & Evenhuis, 2012; Melville et al., 2011; Temple, Frey, & Stanish, 2006) and, taking advantage of that, it would be interesting to investigate its possible effects on their physical self-concepts and ultimately on their health related behaviors (Pomp, Fleig, Schwarzer, & Lippke, 2013). This could turn out to be a fundamental aspect, especially in Western cultures, to engage and guide population with ID to the practice of physical activities, proper eating behaviors and to avoid harmful behaviors (Silva, Capurro, Saumann, & Slachevsky, 2013).

Therefore, the first objective of this study was to investigate whether people with ID could correctly identify their physical dimension of body image, and the second one was to determine if participating in a weight loss therapy program (WLTP) influenced in any way their perception of this physical self-concept. To achieve this, a comparison between the body image scale proposed by Stunkard, Sorensen, and Schulsinger (1983), and actual body mass index values was performed before and after an intervention with a WLTP.

Method

Participants

Adults with intellectual disabilities of any age, who possessed the minimal capabilities needed to be independent and would be able to make a change in their health related behaviors, were selected as the target population for the present study.

Between March and May 2012 a hundred and seven people from a regional occupational center were screened. Twenty-four people (17 men and 7 women), aged between 24 and 60 years old, were selected for the study following the inclusion criteria: (1) presenting mild to moderate intellectual disability grade (degree of disability was diagnosed by the medical doctor of the center, but he did not follow any systematic assessment); (2) having minimum physical and mental capabilities to carry out the proposed activities; (3) having no contraindication to perform physical activity; (4) being

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