

The Relation Between Body Esteem With Self Esteem And Perceived Social Support In Multiple Sclerosis Patients –Assessment

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Abstract: Background & Objective: Multiple sclerosis (MS) is a disabled illness of that can highly effect on body esteem and self-esteem in patients. This study was to examine the relation between body esteem with self-esteem and perceived social support in MS patients. Methodology: This research Study was descriptive correlation that performed on 395 patients of the MS Society in Tehran by conveniencesampling. Data gathering tool was questionnaires of Body esteem, Self-esteem and Northouse social support. For data analysis, SPSS/16 was used. Results: The results showed that at Patients with MS, body esteem was in favorable level (42.25), self-esteem and perceived social support were at moderate levels (76.1, 39.5). Between body esteem with self-esteem and perceived social support and between self-esteem and perceived social support was significant linear relationship. Conclusion: Because of the impact of chronic diseases and complications of them on body esteem, self-esteem and perceived social support is undeniable and regarding that compatibility at chronic diseases as MS occurs faster with this factors this is the responsibility of nursing that with recognizing factors of related increase patient matching and so be effective at their efficacy and self-care. [Heidari MNJIRM 2016; 7(1):7-11]

Key Words: Multiple sclerosis, Body esteem, Self-esteem, Social support.

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Introduction: Multiple sclerosis (MS) is a progressive degenerative disease, which affects myelin in CNS.¹ The disease and its disabling signs such as local weakness, numbness, lack of balance, blurred vision or sudden reduction of vision actually destruct individuals' function.² As MS often occurs at the beginning of life³ and is almost unpredictable, it has strong psychological effects on individuals after changes occur in their body esteem, self attitudes and beliefs and their self-perception of social support.^{4,5} Generally, it should be noted that MS patients face more challenges in relation with their body esteem compared to healthy individuals.⁶ Body esteem refers to mental image of a person about his/her body and causes proper relation between one's self perception and perception of others about him/her.⁷ If accompanied with mental status stability, perception of social support and self esteem, body esteem can play a role in positive adaptation of the patients with their physical disability.⁸

Body esteem is in a close and integrative association with self esteem and patients' acceptance by the society and their family.⁹ In MS disease, the progression of the disease influences individuals' life, and their self confidence and self-esteem.¹⁰ The people with higher self esteem rely on their abilities, and in case of miserable events, can make use of the needed supportive resources to their advantage.¹¹ Social

attitudes toward disability reveal that the individuals with similar physical defects have different emotions and attitudes toward their body as social factors such as social support, perception of social support and social attitudes are effective on emotions and body esteem.¹² Social support can play a key role in patients' adaptation with their diseases.¹³ The strong association between perceived social support and self esteem reveals social support as an important palliative domain of the disease.^{14,15} The structure of a family, communication with the friends and society members deeply affect the type and intensity of the problems the patients face, but MS patients usually receive low social support which can predispose them to psychological problems including depression and anxiety.¹⁶ This disease is more prevalent among youngsters, and since they are counted as the main and efficient core of society, involvement of the individuals with this disease is very worrying.² Therefore, the researcher decided to investigate the association of body esteem with self esteem and perceived social support in MS patients.

Material and Methods: This is a descriptive co-relational cross-sectional study. The data were collected body esteem, self-esteem and social support questionnaires in the present research. This questionnaire, as a part of Physical Disability Body esteem Questionnaire includes

13 general phrases, answered in a five point likert's scale.

Mean and SD for each question is separately calculated. Appropriate body esteem is determined by total score of body esteem and total mean body esteem score. Total scores rang 13-65 in which closer scores to 65 reveal higher body esteem. Northouse questionnaire of social support was initially adopted by Heidari, Salah Shouran, Rafeie and Hosseini. This questionnaire was designed by use of Northouse questionnaire of social support which contains 5 sections of which each section has 8 items to measure the level of patients' perceived social support given by the spouse, by family members, by friends, by physicians and by nurses. The items were ranked based on a five-point Likert's scale. Total score of perceived social support is calculated by summing up the obtained scores in all supportive resources, which ranges 40-200. Total score of perceived social support is categorized in three levels of low (40-92), moderate (93-146) and high (147-200), and scores of perceived social support of each supportive resource were categorized in levels of low (8-18), moderate (19-29) and high (30-40).¹⁷ Rosenberg Questionnaire of Self esteem is a standard questionnaire whose validity has been allocated by its designers' viewpoints and pilot studies. It contains 10 general phrases which are answered in a four-point Liket's scale, scored 0-3 with the highest score of 30.

Scores >25 show high self-esteem, 15-25 moderate and scores <15 show low self-esteem.¹⁸ In the present study, reliability of the questionnaires were confirmed through calculation of Cronbach alpha after being completed by 30 MS patients for body esteem questionnaire (alpha=0.80), for self-esteem (alpha=0.91) and for social support questionnaire (alpha=0.90). Sample size was calculated as 395 subjects who were selected through convenient sampling by consideration of confidence interval of 95% , power of 80% and r=0.2.

After selection of the qualified subjects and obtaining a written consent and assuring them about the confidentiality of their information recorded in the questionnaire, the data were analyzed by SPSS version 16. Descriptive statistics were used to design the tables. Independent t-test, ANOVA, Pearson and Spearman correlation coefficients, Chi-square and Scheffe's post hoc test were used to analyze the data.

Results:The in the present study, there were 278 female and 117 male subjects. The highest frequency was for age group 20-39 years with mean (SD) age of 33.68 (8.84). About 38.2% of the subjects were single and 47.8% married. About 37% of the patients mentioned their length of their disease >7 years and 10.9% < one year. Obtained results showed that with regard to body esteem score of 3.25 and total mean score of body esteem of 42.25, MS patients have appropriate body esteem. There was a reverse association between body esteem and age ($p < 0.001$, $r = -0.189$). There was a significant association between body esteem and marital status ($p = 0.011$, $F = 3.78$), level of education ($p < 0.001$, $F = 6.86$), employment condition ($p = 0.004$, $F = 3.578$), monthly income ($p = 0.001$, $F = 7,942$) and the length of disease diagnosis ($p = 0.004$, $F = 3.904$). Mean score of patients' self esteem was 20.53 (5.17). Chi-square test showed a significant association between self esteem and age ($p = 0.032$, $X^2 = 6.867$), marital status ($p = 0.023$, $X^2 = 11.373$), level of education ($p < 0.001$, $X^2 = 20.051$), employment condition ($p = 0.004$, $X^2 = 22.743$) and length of the disease diagnosis ($p = 0.007$, $X^2 = 21.193$). A High percentage of patients' perceived social support was at moderate level. Most of the subjects reported the social support given to them by their spouse and family members as high and by friends, nurses and physicians as moderate. Chi-square test showed a significant association between perceived social support and age ($p = 0.003$, $X^2 = 6.180$), level of education ($p = 0.029$, $X^2 = 7.091$), employment condition ($p = 0.031$, $X^2 = 4.628$) and monthly income ($p = 0.001$, $X^2 = 10.353$). Based on the findings presented in table 1, there was a direct significant association between body esteem and self esteem, and self esteem and social support perception.

Table 1: Association between body esteem and self-esteem, body esteem and perceived social support, and self esteem and perceived social support among MS patients

	Body esteem	Self esteem	Perceived social support
	Pearson	Spearman	Spearman
Body esteem	----- -----	$r_s = 0.628$ $P^* < 0.001$	$r_s = 0.236$ $P = *0.001$
Self esteem	$r_s = 0.628$ $P^* < 0.001$	-----	$r_s = 0.302$ $P^* < 0.001$
Perceived social support	$r_s = 0.236$ $P = *0.001$	$r_s = 0.302$ $P^* < 0.001$	----- -----

Based on Spearman correlation coefficient values, obtained in the present study, there was a more association between body esteem and self-esteem (Table 1). The results also showed a significant linear direct association between body esteem and perceived social support from the family, and body esteem and perceived social support from the friends, and between self esteem and perceived social support from family, and self esteem and perceived social support from the friends respectively (Table 2).

Table 2: Association between body esteem and self esteem, and perceived social support from each supportive resource in MS patients

	family	Friends	physicians	nurses	spouse
Perceived social support	Pearson	Pearson	Pearson	Pearson	Pearson
Body esteem	$r_s=0.628$	$r_s=0.081$	$r_s=0.021$	$r_s=0.023$	$r_s=0.121$
	$P^*<0.001$	$P=0.010$	$P=0.628$	$P^*=0.650$	$P^*=0.093$
Self esteem	$r_s=0.216$	$r_s=0.163$	$r_s=0.088$	$r_s=0.024$	$r_s=0.119$
	$P^*<0.001$	$P^*=0.001$	$P^*=0.081$	$P^*=0.634$	$P^*=0.099$

Discussion:The results of the present study showed that MS patients have appropriate body esteem. Meanwhile, Taleporos and McCabe obtained the findings not consistent with our results in their two studies.^{19,20} It should be noted that although body esteem is multidimensional, it is known as degrees of physical appearance, size, shape and general appearance.²¹ There was a positive significant association between body esteem and marital status, monthly income, employment condition and level of education, which is consistent with other studies.^{22,23,24} Findings showed an inverse association between body esteem and age which is in line with the results reported by Montepare.²⁵ Our results showed that most of MS patients (71.6%) had moderate self esteem.

In this direction, Noghani et al and Antle findings concord with the present study.^{26,27} In the present study, there was a significant association between self esteem and marital status ($p=0.023$), level of education ($p=0.001$), employment condition ($p=0.004$), age ($p=0.032$) and length of disease diagnosis ($p=0.007$). Stuart also believes that marital status and a warm emotional relationship, accompanied with spouses' respect, can lead to appropriate confidence and self-esteem.²⁸ Previous studies showed that as education can bring about more awareness, a change in thoughts, beliefs and the way of thinking about the disease, it can affect the level of self-esteem.²⁹ Meanwhile, Ashtiani et

al reported different results concerning the above-mentioned relations, which are not consistent with the present study.³⁰ A notable percentage of patients' perceived social support was reported at a moderate level in the present study, which is consistent with Leticia et al.³¹ Most of the subjects were reported to be satisfied with their spouses and to have perceived a high support from them in the present study, which is consistent with Haidari et al findings.¹⁷ In the present study, a significant association was observed between perceived social support and age, and employment condition and level of education, which is in line with other studies.^{32,33,34}

Conclusion: Our results showed a direct linear significant association between body esteem and self esteem and perceived social support as well as self esteem and perceived social, which is consistent with Rashid et al and Cordero.^{35,36} Our findings also showed a direct linear significant association between body esteem and perceived social support by the family, body esteem and perceived social support by the friends, and self esteem and perceive social support by the family and self esteem and perceived social support by the friends, which is consistent with findings of Merianos et al.³⁷ Nalavany and Carawan believed that social support and its perception play a major role in management of psychological problems as the family and close friends are the individuals' nearest supportive resources, so that receiving and perception of support from them can influence one's personal and public life.³⁸

As the impact of chronic diseases and their treatment and complications on body esteem, self esteem and perception of social support is inevitable and since adaptation of the patients with chronic diseases such as MS occurs more rapidly with existence of some factors like positive body esteem and increase of self esteem and social support, nurses are responsible to play a key role in improvement of patients' self efficacy and self care through their recognition of the related factor.

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