Exploring the Impact of Eating Behavior and Self-Efficacy on Body Image Satisfaction of Junior High School Students

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Abstract

Excessive concerns about body image resulting to body dissatisfaction would not only affect psychological wellbeing but also predisposes to disordered eating behaviors. The objective of this study is to explore the impact of eating behavior and self-efficacy on body image satisfaction of junior high school students. This quantitative research study was conducted among 430 junior high school students of Iligan City National High School and Dalipuga National High School. Eating Behavior Questionnaire, New General Self-Efficacy Scale, and Adolescent Body Image Satisfaction Scale were used as data gathering instruments of the study. Both descriptive and inferential statistics were used, and correlational analysis was applied to identify the significance of eating behavior and self-efficacy to body image satisfaction. Results highlighted that hunger and food responsiveness, food responsiveness and food fussiness, food responsiveness and enjoyment of food, and food fussiness and enjoyment of food has moderate correlation. The study concluded that there was a positive influence between self-efficacy and eating behavior in terms of food responsiveness, food fussiness, and enjoyment of food while no correlation was shown between Self-efficacy and Body Image Satisfaction.

Keywords: body image satisfaction, eating behavior, junior high school students, self-efficacy, psychological well-being



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INTRODUCTION

Eating disorders can lead to life-threatening nutritional deficiencies, particularly those which involve fear of obesity, dissatisfaction with body image, intensive efforts for slimness, and drastic restrictions in energy intake. It severely affects health status, leading to either immediate symptoms of anemia, malnutrition, obesity, growth disorders, or to chronic conditions such as diabetes, atherosclerosis, hypertension, and osteoporosis. Apart from these, unhealthy dietary practices can also affect the psychic performance, alertness, learning abilities, and emotionality of an individual. Not only the development of eating disorders but the problem of low self-esteem has also been reported among adolescents and was found to be associated with how they perceive their own body image. Self-esteem has an influence on interpersonal relationships and academic performance and is considered

as one of the main predictors of favorable outcomes in adolescence. Low self-esteem refers to feelings of worthlessness and failure a high self-esteem is related to the feelings of satisfaction and appreciation of oneself. Individuals with negative body image perception may have low self-esteem, low satisfaction in life, and feeling of inferiority and expose themselves to a higher risk for depression, anxiety, or eating disorders. Comparison of overweight children, adolescents and adults with their normal-weight peers shows that the former has lower body-esteem, especially in females. (Kapoor et. al., 2022).

Recently, a new type of media appeared known as social media, which was widely used. Social media is defined as every website and mobile application that contains user-generated content. Based on many studies, exposure to social media leads to physical dissatisfaction and wrong dietary behaviors by propagating the

thinness ideals that people aspire for. It seems that the largest age group of social media users are young adults (or the millennial generation). Thev were exposed information to communication technologies (ICTs) from birth and have not known life without them. Millennials utilize social media for several purposes, such as maintaining social relationships, finding information, and communicating with friends and family. Internet use was linked to higher levels of internalized appearance ideal thinness. comparison. motivation to be thin, and body dissatisfaction in female high school students. (Alburkani et. al, 2024).

However, the existing literature in Philippines primarily focuses on investigating the adult body image, with little attention paid to adolescent body image. In addition, most studies have analyzed body dissatisfaction in terms of the difference between how individuals perceive their bodies and how they want them to be. To date, only a few outdated studies have explored the relationship between the aesthetic standards of body shape and the two sexes. Further research is required to investigate the current state of adolescent body image and aesthetic standards regarding body shape, as well as the potential factors that influence them.

This study is the first of its kind to evaluate the status of body image satisfaction among adolescents in the Iligan City, Philippines. The study aims to explore the impact of eating behavior and self-efficacy on body image satisfaction of the junior high school students. Specifically, the following are the research objectives of the study:

- To assess the influence of body image satisfaction to eating behavior in terms of hunger, food responsiveness, emotional overeating, enjoyment of food, satiety responsiveness, emotional undereating, food fussiness, slowness in eating; and,
- 2. To assess the influence of self-efficacy to body image satisfaction in terms of body competence, body inadequacy, internal conflict.

METHODS

Study Population. The participants in this study were Grade 7-10 junior high school students from Iligan City National High School and Dalipuga National High School. The researcher asked permission from the Department of Education-Division of Iligan City and School principals. The researcher produced a standard questionnaire, proceeded to the selected high school, and informed the respondents about the background of the survey. The researcher then asked the respondents to answer the provided questionnaire. The researcher answered the queries of the respondents before, during and after the data gathering. After the respondents' finished answering the guestionnaires, the data be kept for gathered will insightful interpretation. This study utilized purposive sampling procedure. A total of four hundred thirty (430) junior high school students participated in the study.

Data Collection Procedures. The researcher asked permission from the Department of Education-Division of Iligan City and the School principals and personally asked the Department Head and Sports Coaches about the athletes in the school. The researcher used a standard questionnaire, proceeded to the selected high school, and informed the respondents about the background of the survey. The researcher then asks the respondents to answer the provided questionnaire. The researcher answers the queries of the respondents before, during, and after the data gathering. After the respondents answered the questionnaires, the data gathered were kept for insightful interpretation.

Instrumentation. The researcher used three standardized psychological tests to assess the level of body image satisfaction towards their body. The Eating Behavior Questionnaire (AEBQ) (Hunot et al., 2016) contains 35 items capturing the following eight subscales: Hunger, Food responsiveness, Emotional overeating, Enjoyment of food, Satiety responsiveness, Emotional undereating, Food fussiness and Slowness in eating. All AEBQ items are rated using a 5-point Likert scale. The second instrument is a New General Self-Efficacy Scale (NGSES) by Chen et al. (2001). This is an 8-item questionnaire, with 5-item Likert type scale. Participants are told that (a) general selfefficacy relates to "one's estimate of one's overall ability to perform successfully in a wide variety of achievement situations, or to how confident one is that she or he can perform effectively across different tasks and situations" and (b) self-esteem relate to 'the overall effective evaluation of one's worth, value, or importance or to how one feels about oneself as a person. The third instrument was the Adolescent Body Image Satisfaction Scale (ABISS) by Leone et. al. (2014). This 32-item ABISS questionnaire is scored using a Likert scale to determine body image satisfaction. The maximum value of each guestion is "4", with minimum values of "1", and scores are summoned for a total score. Statements were positively and negatively worded. For example, "I am satisfied with my body" is scored 4-point on the Likert scale.

Statistical Treatment. Using a statistical Package for the Social Science (SPSS) version 2.0, weighted mean and standard deviation were used to measure the level of perceived body image satisfaction of the respondents while Pearson Correlation Coefficient was used to identify the relationship between the Eating behavior, Self-efficacy and Body Image Satisfaction.

RESULTS

Table 1Descriptive Statistics of the different variables

	Hunger	FR	SR	EUE	Food Fuss.	Emo. Eating	Enjoy. Food	Slowness	Efficacy	Body Com.	Body Inad.	Inter. Con.
Valid	430	430	430	430	430	430	430	430	430	430	430	430
Missing	0	0	0	0	0	0	0	0	0	0	0	0
Mean	16.230	13.856	11.658	11.754	17.842	13.942	12.167	12.979	29.972	12.877	14.672	8.374
Std. Deviation	3.502	3.115	3.201	4.013	3.188	4.613	2.505	2.882	4.775	3.330	3.402	1.999
Minimum	5.000	4.000	4.000	4.000	5.000	5.000	5.000	3.000	13.000	6.000	6.000	4.000
Maximum	24.000	22.000	20.000	20.000	25.000	25.000	15.0002	20.000	40.000	24.000	24.000	16.000

Based on Table 1, Internal conflict has the smallest mean of 8.374 and a SD of 1.999. Meanwhile, the Self-efficacy has the highest mean of 29.972 and SD of 4.775.

On the other hand, as shown in Table 2, Hunger and Food responsiveness have moderate correlation. Food responsiveness (FR) and satiety responsiveness (SR) have been associated with energy intake, body mass index (BMI), and adiposity in children. Indeed, children who exhibit more FR and less SR have higher prospective BMIs and weight gain over time. Yet, little is known about the mechanisms that drive FR and SR. These eating behaviors become established early in life and remain relatively consistent across childhood, which suggests individual differences in that children's underlying metabolism may contribute to FR and SR. (Gowey & Chandler-Laney, 2019).

Ta	b	le	2

Pearson's Correlations	of the different variables

Variable	Hunger	FR	SR	EUE	FF	EE	EF	SLOW.	EFFI.	BC	BO. INA	IN.CON
Hunger												
FR	0.407***											
SR	0.208***	0.073										
EUE	0.161***	0.126***	0.315***									
FF	0.237***	0.412***	0.167***	0.195***								
EMOOVER.EAT	0.218***	0.278***	0.052	-0.083	0.213***							
EN FOOD	0.240***	0.405***	-0.033***	0.013	0.483***	0.146***						
SLOW NESS	0.232***	0.224***	0.342***	0.198***	0.345***	0.182***	0.235***					
EFFIC.	0.209***	0.193***	0.084	-0.015	0.195***	0.183***	0.271***	0.263***	_			
BOD COM	-0.018	-0.066	-0.056	0.102*	-0.073	-0.084***	-0.069***	-0.092***	-0.243***			
BOD INA.	-0.177***	-0.180***	-0.081	-0.210***	-0.095*	-0.044***	-0.057***	-0.104***	0.052	-0.188***		
IN CON.	-0.137***	-0.165***	0.085	-0.032	-0.208***	-0.117***	-0.179***	-0.049***	-0.182***	0.335	0.229***	_

Food responsiveness and food fussiness has a moderate correlation. Food responsiveness could be seen as a process involving the perception of food cues together with the initiation of hedonic responses (likina. preference, appeal) and the engagement of liking or wanting and possibly inhibitory controls. In addition, eating behaviors have been conceived as skills, such as being able to inhibit responses to palatable food, to make decisions about portion sizes or to regulate eating rates. In addition, consistent with the trait-state distinction in relation to personality characteristics such as anxiety or impulsivity, child eating behaviors such as eating in the absence of hunger (EAH) or other behavioral measures have been considered to be more state-like (Russell, 2023).

Food responsiveness and enjoyment of food has moderate correlation. A good example of this is the well-documented unhealthy equal tasty association. Some studies have shown that food presented as being healthy is often considered as being less tasty than "unhealthy" food. This perception seems to be influenced by the culture. Previous research observed that, for Americans, unhealthy food is implicitly associated to tastiness. However, the opposite intuition has been observed in France where French people spontaneously associate unhealthy food with bad taste, while linking healthy food to tastiness. Considering that taste is a predominant determinant of food choices, the unhealthy equal tasty intuition can clearly thwart the adoption of healthy food choices (Bédard, 2020).

Food fussiness and enjoyment of food has moderate correlation. The interaction between environmental (mostly family in early childhood) and personal factors (age, biology, genetics) may influence eating behavior. Parental food habits and feeding strategies are known as the strongest factors influencing children's eating behavior and food choices. Parental food preferences (e.g., through parental modeling), parental behavior with regard to child feeding (e.g., food restriction) and healthy food availably strongly impact the establishment of dietary habits in childhood and later on. Although child environment at mealtimes might strongly impact the food related behavior (distractions, rewards to finish, free to eat at will), such family environmental factors remain less studied (Piloquet et al., 2024).

DISCUSSION

During adolescence, the transition period from childhood to adulthood, health behaviors are shaped and consolidated. Therefore, a healthy lifestyle is crucial for adolescents' proper growth and development. Moreover, targeting adolescents with health behavior-shaping intervention activities affects the burden of disease in adulthood, providing better health through the ripple effect.

The study shows moderate correlation between hunger, food responsiveness, food fussiness, enjoyment of food. It concludes that eating behavior has effect on the body image satisfaction of the junior high school students. Eating Disorder can lead to life-threatening nutritional deficiencies, particularly those which involve fear of obesity, dissatisfaction with body image, intensive efforts for slimness, and drastic restrictions in energy intake. It severely affects health status, leading to either immediate symptoms of anemia, malnutrition, obesity, growth disorders, or to chronic conditions such as diabetes, atherosclerosis, hypertension, and osteoporosis. Apart from these, unhealthy dietary practices can also affect the psychic performance, alertness, learning abilities, and emotionality of an individual.

Conclusion. Overall, the data suggest that there is moderate correlation between Hunger and Food responsiveness. The researchers found that a particularly high food responsiveness, defined as the urge to eat when you see, smell or taste palatable food, at the ages of four and five was linked to a higher likelihood of reporting a range of eating disorder symptoms at ages 12 to 24 (News Medical, 2024).

Food responsiveness and Food fussiness has moderate correlation. Adolescence is a pivotal time for the emergence and course of stresseating because the heightened reward sensitivity of adolescence is coupled with increased levels of stress (Smith et. al., 2020).

Food responsiveness and enjoyment of food has moderate correlation. Strategies focusing on sensory experiences, cooking or sharing activities, mindful eating, and positive memories related to healthy food may be most promising (Bédard, 2020).

Food fussiness and enjoyment of food has moderate correlation. Food fussiness describes the tendency to eat a small range of foods, due to selectivity about textures or tastes, or reluctance to try new foods. This suggests that interventions to help children eat a wider range of foods, such as repeatedly exposing children to the same foods regularly and offering a variety of fruits and vegetables, may be most effective in the very early years" (University College London, 2024).

Recommendations. The Department of Education, in partnership with the MSU-IIT Department of Physical Education and Guidance Counseling, should prioritize organizing a comprehensive seminar or workshop devoted to improve the Body Image Satisfaction of junior high school students.

Whole-school approaches that create supportive spaces for students and health promotion approaches that focus on the social and well-being benefits of physical activity (rather than benefits for weight loss and muscle building) is also recommended.

For parents, it is important to be aware of how you talk about food and nutrition, especially during this time. Do not comment on a child's weight, shape, or size, and don't compare them to anyone else. Empowering kids by role modeling and encouraging self-talk that is kind and respectful is more advocated.

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