

## **CHAPTER III**

### **METHOD**

This chapter explains the procedure to carry out the present study “Efficacy of Cognitive Behaviour Therapy on Body Image, Emotional Competence and Self Esteem among College Students”. It contains operational definitions of the variables, objectives, hypotheses, research design, area, college students, inclusion and exclusion criteria of the college students, tools used, procedures and statistical analysis used to analyze the data.

#### **Objectives**

- To find out the Efficacy of Cognitive Behaviour Therapy in reducing the negative aspects of Body Image and enhancing the Emotional Competence and Self Esteem among College Students.

#### **Hypotheses**

The following research hypotheses have been framed to fulfill the above stated objectives.

- H1 There will be significant difference between before, after and follow-up phases in Bodily Distress through intervention among College Students.
- H2 There will be significant difference between before, after and follow-up phases in Somatic Negative Feelings through intervention among College Students.
- H3 There will be significant difference between before, after and follow-up phases in Body Image through intervention among College Students.
- H4 There will be significant difference between before, after and follow-up phases in Somatic Nervousness through intervention among College Students.
- H5 There will be significant difference between before, after and follow-up phases in Cognitive Distortions through intervention among College Students.
- H6 There will be significant difference between before, after and follow-up phases in Adequate Depth of Feelings through intervention among College Students.
- H7 There will be significant difference between before, after and follow-up phases in Adequate Expression and Control of Emotions through intervention among College Students.

- H8 There will be significant difference between before, after and follow-up phases in Ability to Function with Emotions through intervention among College Students.
- H9 There will be significant difference between before, after and follow-up phases in Ability to Cope with Problem Emotions through intervention among College Students.
- H10 There will be significant difference between before, after and follow-up phases in Enhancement of Positive Emotions through intervention among College Students.
- H11 There will be significant difference between before, after and follow-up phases in Global Self Esteem through intervention among College Students.
- H12 There will be significant difference between before, after and follow-up phases in Competence through intervention among College Students.
- H13 There will be significant difference between before, after and follow-up phases in Lovability through intervention among College Students.
- H14 There will be significant difference between before, after and follow-up phases in Likability through intervention among College Students.
- H15 There will be significant difference between before, after and follow-up phases in Self Control through intervention among College Students.
- H16 There will be significant difference between before, after and follow-up phases in Personal Power through intervention among College Students.
- H17 There will be significant difference between before, after and follow-up phases in Moral Self Approval through intervention among College Students.
- H18 There will be significant difference between before, after and follow-up phases in Body Appearance through intervention among College Students.
- H19 There will be significant difference between before, after and follow-up phases in Body Functioning through intervention among College Students.
- H20 There will be significant difference between before, after and follow-up phases in Identity Integration through intervention among College Students.
- H21 There will be significant difference between before, after and follow-up phases in Defensive Self Enhancement through intervention among College Students.

## **Operational Definitions**

### **Body Image**

Body image is a combination of one's thoughts and feelings about their own body. Body image can be influenced by both positive and negative events, as well as a combination of both. Internal and external are the elements both influence body image

### **Bodily Distress**

It is defined as “characterized by the presence of bodily symptoms that are distressing to the individual and excessive attention directed toward the symptoms”.

### **Somatic Negative Feelings**

Somatic Negative Feelings is “a negative affective state, ranging from unhappiness and discontent to an extreme feeling of sadness, pessimism, and despondency that interferes with daily life. Various physical, cognitive, and social changes also tend to co-occur, including altered eating or sleeping habits, lack of energy or motivation, difficulty concentrating or making decisions, and withdrawal from social activities”.

### **Somatic Nervousness**

It is defined as “an emotion characterized by apprehension and somatic symptoms of tension in which an individual anticipates impending danger, catastrophe, or misfortune. Anxiety is considered a future-oriented, long-acting response broadly focused on a diffuse threat”.

### **Cognitive Distortions**

A cognitive distortion is an “exaggerated or irrational thought pattern involved in the onset or perpetuation of psychopathological states, such as depression and anxiety”.

### **Emotional competence**

“It refers to a person's competence in expressing or releasing their emotions. It implies an ease around emotions which results in emotionally competent people being relaxed about other people being emotional”.

**Adequate Depth of Feeling (ADF)**

“It refers to a feeling of being confident or capable with all reality assumptions, specifically associated with effective judgment and personality integration, which ensures vigorous participation in living”.

**Adequate Expression and Control of Emotions (AECE)**

“It refers to a tendency marked by adequate emotional expressiveness based on fulsome expression and control of emotions. Any form of inadequacy in either expression or control of emotion may lead to uncontrolled and disorganized emotionality”.

**Ability to Function with Emotions (AFE)**

“It refers to a characteristic pattern of emotional reactivity which helps the person amidst highly emotional situation to be able to maintain adequate mode of functioning that is performing actions of daily routine properly”.

**Ability to Cope with Problem Emotions (ACPE)**

“It refers to the understanding the role of sensitivity and the detrimental effects of problematic emotions in the beginning itself and also developing the ability to resist their harmful effects, thereafter”.

**Enhancement of Positive Emotions (EPE)**

“It refers to the competency of the person to develop a predominance of positive emotions in his/her personality to ensure a meaningful and fairly integrated life”.

**Self Esteem**

Self Esteem is defined as “the judgment or opinion we hold about ourselves. It’s the extent to which we perceive ourselves to be worthwhile and capable human beings”.

**Global Self Esteem**

Global Self Esteem is “conceptualized as a summary of feelings of worthiness. It often serves as a self fulfilling influenced by an individual’s expectation about the future and future behaviour”.

**Competence**

It is the ability to do something well or effectively.

**Lovability**

Lovability is the “characteristics that attract love and affection”.

**Likability**

Likability is the “characteristic that brings about favourable regards”.

**Self Control**

Self Control is “the ability not to show the feelings or not do the things that the feelings wants to do”.

**Personal Power**

Personal power is “based on strength, confidence, assertive and competence that individuals gradually acquire in the course of their development”.

**Moral Self approval**

Moral Self Approval means “accepting with moral values and behaviour of one's own action or character with moral standards and acts in a way that is consistent”.

**Body Appearance**

Body appearance is the concept of “one's *physical appearance* based on self observation and reactions of others”.

**Body Functioning**

Body functioning refers to “good physical condition, feels healthy and deals a sense of vitality and vigour”.

**Identity Integration**

Identity Integration “is the one of the basic function of self evaluation and inner sense of cohesion and integration in different aspects of self concept”.

**Defensive Self Enhancement**

“It is overly inflated view of self worth. It also possesses highly unlikely positive qualities and denies ubiquitous human weakness”.

### **Sociodemographic Variables**

Social, behavioural, economical and biological attributes of the college students obtained in terms of age, gender, socioeconomic status, birth order, place of living, family type and so on.

### **Research Design**

The present research used before, after and follow-up without control group designs (Kothari & Garg, 2020). The selected college students were administered with Body Image Perception Scale by Margreat and Gayatridevi (2021), Emotional Competence Scale by Sharma and Bharadwaj (1998) and Multidimensional Self Esteem Inventory constructed by O'Brien and Epstein (1988) and those scored high on Body Image and low Emotional Competence and Self Esteem were screened. The selected college students were administered Cognitive Behaviour Therapy for 15 sessions. The efficacy of Cognitive Behaviour Therapy Programme was assessed on post and follow-up phases.

### **Area**

From an Arts and Science College (Instructed by the authority not to disclose the identity) in Chennai, the data was collected and the intervention was administered for the selected college students. The reasons for selecting this area are as follows:

- Willingness of the college authorities to grant permission and provide the necessary facilities to conduct the action research
- Openness of the students to participate in the study

### **Participants**

Forty eight students in the age range of 18-24 years were selected through purposive sampling method.

### **Inclusion Criteria**

- Students who are studying in college.
- The students between the ages of 18 - 24 years.
- Students with the abilities to speak understand and communicate.

### **Exclusion Criteria**

- Students who are having serious physical and psychological problems.
- Students who are below 18 years and above 24 years were excluded.
- Students who cannot read and write.

### **Tools**

The tools employed in the collection of data include;

#### **Personal Profile Sheet**

It was constructed by the Researcher which consisted of the personal details of the college students such as age, gender, place of living, birth order and so on (Annexure I).

#### **Body Image Perception Scale (Margreat & Gayatridevi, 2021)**

The scale assesses the perception of body image. It has five major dimensions in it, they are Bodily Distress, Somatic Negative Feelings, Body Image, Somatic Nervousness and Cognitive Distortions. This scale consists of 63 statements with 5 alternatives namely Strongly Agree, Agree, Neither Agree Nor Disagree, Disagree and Strongly Disagree. All the items are scored from 5 to 1 according to the responses given by the college students (Annexure II).

#### **Emotional Competence Scale**

It was developed by Sharma and Bharadwaj (1998) consists of 30 statements with five alternatives. Every incomplete statement can be completed with the help of any alternatives mentioned before the incomplete one. This scale consist of five dimensions such as Adequate Depth of Feeling (ADF), Adequate Expression and Control of Emotions (AEC), Ability to Function with Emotions (AFE), Ability to Cope with Problem Emotions (ACPE) and Enhancement of Positive Emotions (EPE). All the items are scored from 1 to 5 according to the response given by the college students (Annexure III).

#### **Multidimensional Self Esteem Inventory (O'Brien & Epstein, 1988).**

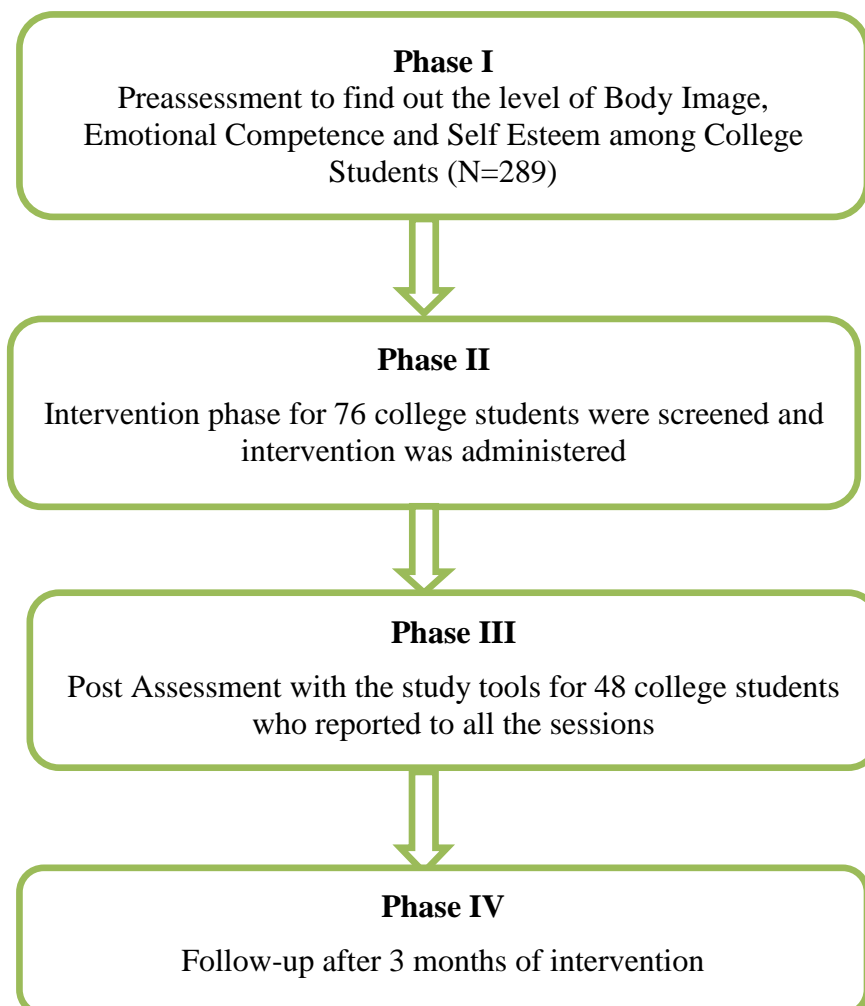
This scale consists of 116 statements with 11 dimensions such as Global Self Esteem, Competence, Lovability, Likeability, Self Control, Personal Power, Moral Self Approval, Body Appearance, Body Functioning, Identity Integration and Defensive Self Enhancement. The statements are divided into two sections. In section 1, respondents are

directed to use a 5-point Likert scale to report how accurately the 61 items describe them with 5 alternatives namely Completely False, Mainly False, Partly True and Partly False, Mainly True and Completely True. For section 2, respondents are instructed to use the following 5-point Likert scale to know how they experience the thoughts and feelings described in the 55 items with 5 alternatives namely Almost Never, Seldom or Rarely, Sometimes, Fairly Often and Very Often. All the items are scored from 1 to 5 according to the response given by the college students (Annexure IV).

#### **Adult Consent Form (Annexure V)**

It was developed by the researcher, providing a brief explanation of the purpose and procedure of the research, obtaining their consent to take part in the research and explaining their rights to withdraw from the research if they are willing to.

#### **Flow Chart of the Research Design**



## **Procedure**

From an Arts and Science College in Chennai, initially 352 college students were identified, and the purpose of the research study was explained to them. The college students who showed willingness to take part in the research, pre intervention data were collected and data was complete. Out of 352 data, 84 college students who had high score in body image and low emotional competence and self esteem were selected for the intervention and among them only 72 college students showed willingness to participate in the research. Adult consent form to obtain their permission for taking part in the research was given to them. Finally, only 48 participants were reported regularly for all the sessions (pre, post and follow-up phases of intervention) and thus those 48 data comprising of before, after and follow-up phases were finalised.

## **Cognitive Behaviour Therapy**

Based on a review of previous research and the efficacy of therapeutic programmes based on Cognitive Behaviour Therapy to bring about change, the idea of applying Cognitive Behaviour Therapy in the selected college students was hypothesised. Out of numerous types of Cognitive Behaviour Therapy techniques, Self Monitoring, Relaxation, Journaling, and Identifying Negative Thoughts and Replacing with Positive Thoughts were selected by the Researcher and used to modify the level of body image, emotional competence, and Self Esteem among College Students.

## **Administration of the Cognitive Behaviour Therapy**

The selected 72 participants were divided into 4 groups consisting of 18 in each group. Intervention was given in alternative days to both the groups simultaneously, in the gap of 2 Hours for 15 sessions and each session that lasted for one hour approximately. Out of 72 college students only 48 college students reported to all the sessions and successfully completed the intervention.

## **Session wise details of Cognitive Behaviour Therapy Intervention**

Session 1 : The college students were administered pre assessment tools for the study variables body image, emotional competence and self esteem.

Session 2 : The college students were screened for high body image, low emotional competence and low Self Esteem scores and the selected college students were invited for

session 2. In session 2, college students got introduced with each other and few ice breaking activities were conducted for rapport building.

Session 3 : Psychoeducation concerning problems of body image were explained theoretically through power point presentations and videos and post interactive session was conducted followed by it.

Session 4 : The concept of cognitive behaviour therapy was introduced to the college students. The theoretical concepts relating to the importance and need of cognitive behaviour therapy and its efficacy in managing day-to-day activities were explained to them and post session discussion was conducted.

Session 5 : Self monitoring exercise was taught to the college students.

Session 6 : Relaxation exercise was taught to the college students.

Session 7 : Journaling exercise was taught to the college students.

Session 8 : Identifying Negative Thoughts and replacing it with positive thoughts exercise was taught to the college students.

Session 9 : Cognitive Behaviour Therapy in everyday activities like and so on was taught to the college students

Session 10 - Session 13 : Sessions 5 to 9 repeated each day along with skills training and to become aware of distortions in the thinking pattern of how they perceive their body image.

Session 14 : All the concepts were integrated and presented in the form of power point presentations. Online audio and video resources were also utilized for this.

Session 15 : Post assessment was conducted after the intervention and follow-up data collection was done 3 months after the post assessment.

Along with the above techniques, individual counselling sessions were given for the college students who were in need. The detailed narration of the cognitive behaviour therapy techniques are described below.

## **Cognitive Behaviour Therapy Techniques**

### **Self monitoring**

The self monitoring technique is used to describe the systematically observing and recording of one's own behaviour over a period of time. The individuals need to observe the activating events, cognitive processes, emotional and behavioural reactions to positive and negative daily experiences on body image. Information provided on a daily rating provides a better representation of changes in their feelings and behaviours. By using a diary or log book students are asked to monitoring and restructuring is recorded by writing. Techniques that include keeping thought records using the Triple Column Technique. It means recording one's automatic thoughts, identifying the cognitive errors in those thoughts and then responding critically and rationally to those thoughts. It also helps the behavioural modification plan of the participants were asked to track and document their actions. For example participants might be asked to keep track of how many times they think about their appearance (Avina, 2008).

### **Relaxation Exercise**

It used to address the anxiety, stress and worry of the body by reducing the muscle tension, slow down the breathing and calming the mind. One of the relaxing techniques used in cognitive behaviour therapy is slow diaphragmatic breathing. It is one of the most beneficial daily habits, similar to exercise. Sit back in your chair and place your feet on the floor. Fold your hands over your stomach and inhale gently and steadily. Your belly should be fill with normal breathe, and try not to breathe heavily. When you inhale, your hands should rise, as if you were filling a balloon. As you inhale try not to elevate your shoulders. To the count of "5", we must slowly exhale. Hold for 2 to 3 seconds after exhaling before inhaling again and slowing down the rate of the breath. For the best results do these relaxations practice twice a day for about 10 minutes each time.

### **Journaling**

The goal of cognitive journaling is to teach students how to recognize distorted thought patterns and how to move away from them. As a framework ABC model is used. It helps to write down the activating event that triggers the thought and emotion and make a list of our beliefs about the event, including our thoughts, feelings, and judgments.

Finally write down the consequences we face due to that event. It mainly focuses on the consequences we want to reflect on and find out the better alternative beliefs.

### **Identifying Negative Thoughts**

Automatic thoughts have the potentials to trigger the intense negative emotions. The key to identify the automatic thought is to look for what comes to your mind when an emotion arises. Identifying and writing down the thoughts helps to understand where the emotion comes from. Identifying the thought is the first step in managing your mind. First, identify the negative thought you want to work on and write it down. Secondly, rate the belief in 10 point rating scale. Next make list of the negative thoughts and find the reason why these thought might be true and also make the list of negative thought why it might not be true. Now read the original negative thoughts, and the reasons given for the thought to be true and thought not to be true. Finally write down the new thoughts replacing the negative thoughts with positive alternative thoughts in its place.

### **Statistical Analysis**

The data collected was tabulated, coded and analyzed using SPSS 21. Descriptive statistics like mean and standard deviation was used to identify the intensity of the problems among College Students. To test the efficacy of Cognitive Behaviour Therapy Repeated Measures ANOVA was used further by Bonferroni post-hoc analysis. The mean differences between the phases were analyzed.