IMPACT OF BODY ESTEEM ON ANTENATAL DEPRESSION AMONG PREGNANT WOMEN OF SOUTH PUNJAB: MODERATING ROLE OF SOCIAL SUPPORT

MUHAMMAD SALEEM, HIJAB FATIMA HASHMI, AREEHA KHAN DURRANI, ZUBAIR MANZOOR
Department of Applied Psychology, The Islamia University of Bahawalpur, Pakistan.

CORRESPONDENCE: DR. MUHAMMAD SALEEM, E-mail: chsaleem_1@hotmail.com.
Submitted: March 25, 2019
Accepted: September 11, 2019

ABSTRACT

OBJECTIVE
To measure the impact of body-esteem on antenatal depression among pregnant women; moderating role of social support.

STUDY DESIGN
Cross-sectional research design.

PLACE AND DURATION OF THE STUDY
Pregnant women from three cities (Bahawalpur=100, Multan=100 & Dera Ghazi Khan=100) of South Punjab, Pakistan participated in this study from January 2018 to July 2018.

SUBJECTS AND METHODS
The total sample of 300 pregnant women were selected through purposive sampling technique. Three questionnaires; Body-Esteem Scale for Adolescents and Adults, Multidimensional Self-Perceived Social Support and Edinburgh Postnatal Depression Scale were used.

RESULTS
The results of regression analysis exhibited that body-esteem and social support of pregnant women significantly impacted their antenatal depression. Further, social support found to be a significant moderator between body-esteem and antenatal depression.

CONCLUSION
Body-esteem has a significant impact on antenatal depression among pregnant women. While, social support plays a moderating role between body-esteem and antenatal depression.

KEYWORDS
Antenatal Depression, Body-Esteem, Social Support, Pregnant Women, South Punjab.
Multidimensional Scale of Perceived Social Support (MPSS)\(^\text{7}\): To measure the perceived social support among pregnant women, MPSS was used. This is a 12 items scale having 7-point rating responses (1 = very strongly disagree to 7 = very strongly agree). Cronbach’s alpha reliability of perceived social support was 0.84 which showed good internal consistency.

Edinburgh Postnatal Depression Scale\(^\text{8}\): It is a screening tool which measures the prenatal depression. This is a 10 item self-report questionnaire, it has four responses for each item.

Procedure

Considering the quantitative research design, mandatory ethical considerations were addressed. After obtaining the permission from authors, instruments were administered on the participants. Formal permission was also taken from the ethical review board before starting the study. Participants were approached for the collection of data and rapport was also developed with them. After explaining the purpose of study, they were requested to fill demographic information sheet and research questionnaires. Participants were also acknowledged for their participation and cooperation in the study. The collected data were analysed through SPSS (23.0).

RESULTS

300 pregnant women aged between 18 to 40 years were selected through purposive sampling technique. To check the relationship among all variables bivariate correlation analysis was used whereas for moderation, hierarchical regression analysis was used following Baron and Kenny\(^\text{19}\) guidelines.

Table 1

<table>
<thead>
<tr>
<th>Variables</th>
<th>Antenatal Depression</th>
</tr>
</thead>
<tbody>
<tr>
<td>Body-Esteem</td>
<td>0.51**</td>
</tr>
<tr>
<td>Social Support</td>
<td>-0.24**</td>
</tr>
<tr>
<td>Antenatal Depression</td>
<td>-</td>
</tr>
</tbody>
</table>

The table showed that Body-esteem was significantly positively correlated with social support and significantly negatively correlated with antenatal depression. While, social support was significantly negatively correlated with antenatal depression.

Table 2

<table>
<thead>
<tr>
<th>Variables</th>
<th>Antenatal Depression</th>
</tr>
</thead>
<tbody>
<tr>
<td>Body-Esteem</td>
<td>0.08***</td>
</tr>
<tr>
<td>Social Support</td>
<td>-0.10***</td>
</tr>
<tr>
<td>Body-Esteem X Social Support</td>
<td>-0.06*</td>
</tr>
<tr>
<td>Total R(^2)</td>
<td>0.11***</td>
</tr>
</tbody>
</table>

The results revealed that after controlling demographic variables (i.e., education, family system and home residence) in step 1, social support was added in step 2, body-esteem was added in step 3, and interaction terms between body-esteem and social support were added in step 4, the overall model explained the 11.3% of variance in antenatal depression, \(F(6, 293) = 6.21, p < .001\). In step 2, social support was found to be a significant predictor of antenatal depression. In step 3, body-esteem was found to be significant negative predictor of antenatal depression. Furthermore, in step 4 the interaction of body-esteem and social support was found significant and social support appeared as a significant moderator between body esteem and antenatal depression.

DISCUSSION

Antenatal depression has been receiving great attention in recent years and it is considered as the considerable disease burden around the globe. For women pregnancy and childbirth are times of great physical and emotional stress. Such unexpected variations in physical body which are different from pre-pregnancy may encourage body image dissatisfaction.\(^\text{20}\) Study has reported that pregnant women are well aware about their body-image, but they continue to meet the standards of pregnancy and feel much worried about meeting the standards of shaping up their body after the child birth.\(^\text{21}\) This research was hypothesized that there would be a significant impact of body-esteem and social support on antenatal depression among pregnant women. The results showed in table 1, revealed that body-esteem was significantly positively correlated with social support and significantly negatively correlated with antenatal depression. The results of present research are similar with past studies, where another research also found significant negative correlation between body-esteem and depression in the start of pregnancy, although the researchers have claimed that body-esteem was significant predictor in antenatal depression\(^\text{22}\). Many previous studies also showed that there is negative association between body esteem and antenatal depression\(^\text{23,24}\). Pregnant women also perceive social support inadequately. Families and relationships are considered as the common sources of social support for the pregnant women, there would be a chance of antenatal depression if they would lack the social support by their family and special people in their lives\(^\text{25}\).
CONCLUSION

Conclusively, body-esteem and social support condense antenatal depression among pregnant women. While, social support plays a moderating role between body-esteem and antenatal depression.

REFERENCES


