

Females with anorexia nervosa in Singapore

Pressure to be thin can be exerted by various sources both external and internal. Sociocultural pressures include the showcase of gracile models and advertisements for diet products and slimming programmes in magazines and on television, criticisms about weight or shape, encouragement to diet, and role-modelling of eating habits within families, as well as overt approbation of skinny models or celebrities and comparison of appearance among peers, and teasing. Drive for thinness, which is conceptualised as the assimilation of societal standards of beauty and attractiveness into one's belief system, is one of the core features of anorexia nervosa. Anorexia nervosa includes a restriction of energy intake relative to requirements leading to a significantly low body weight; an intense fear of gaining weight or becoming fat even though at a significantly low weight; and disturbance in the way in which one's body weight or shape is experienced, undue influence of body weight or shape on self-evaluation, or persistent lack of recognition of the seriousness of the current low body weight.

Early findings in Asia documented patterns in eating disturbance that differed from Western-based symptom patterns, though subsequent studies indicated that anorexia nervosa in Asia is gradually becoming more similar to Western societies. It has been argued that Eastern values, such as collectivism, are protective against eating disorders.

Singapore is a multicultural society strongly influenced by globalisation, where Western culture is widely embraced, especially by the younger generations. We wanted first, to compare a sample of females with anorexia nervosa in Singapore with international samples in terms of the risk factors related to anorexia nervosa, severity of eating pathology and levels of psychosocial impairment. Second, we wanted to explore the relationships between anorexia nervosa risk factors and adherence to Asian cultural values.

Data from a large range of psychometric measures relating to eating disorders were collected from 41 female patients who presented for treatment of anorexia nervosa at the Singapore General Hospital. Participants, with an average age of 19 years, were generally ethnic Chinese, single and secondary school or tertiary students.

The profile and presentation of anorexia nervosa in Singapore was comparable to that observed in Western clinical samples in terms of the risk factors for anorexia nervosa. Patients endorsed similar levels of drive for thinness, body dissatisfaction, perfectionism, and dieting, compared to patients in the United States and Canada. Participants also indicated comparable levels of severity of eating pathology overall, as well as in particular, dietary restraint and shape concern. As found in Western samples, eating disorder psychopathology was significantly correlated with psychosocial impairment.

No protective benefit of orientation to Asian culture was found. Greater orientation to Asian cultural values in general and within the domains of collectivism, conformity to norms, emotional self-

control, family recognition through achievement, and humility, were not significantly negatively linked with risk factors for anorexia nervosa. This observation shows that orientation to Asian cultural values does not offer a safeguard against eating disorder psychopathology.

The observed pattern of general similarity of presentation, together with the finding that no protective benefit of orientation to Asian culture was observed, suggests that it may be appropriate to directly apply Western models of intervention to the treatment of anorexia nervosa in Singapore. Since greater eating disorder psychopathology corresponded to higher levels of secondary psychosocial impairment, interventions to improve psychosocial functioning such as interpersonal relationships, cognitive performance, mood and self-concept may also be warranted.

Russell Hawkins and Evangeline Tan

Department of Psychology, James Cook University, Australia

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[Psychological and behavioural characteristics of females with anorexia nervosa in Singapore.](#)

Tan ES, Hawkins RM

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