

ones. Under normal conditions, as a rule, the family gives the initial adaptive potential: social status, upbringing, health, education and many others, that it is not always possible to measure, describe, and sometimes even catch, such as psychological characteristics [4].

"The studies found out that getting into state institutions children completely lose family ties. Brothers and sisters are separated, sent in different educational institutions according to the age requirements; when one of them requires special training, treatment" [5].

The war children were also frightened of the post-war actions which affected the formation of their psyches, that caused the development of various phobias. The fear of separation occurs quite often among the children. In some cases, this fear may be intensified when they are put in the boarding institution that provides care for them where they feel uncomfortable. Such children may be afraid of going to summer camps or even going to school. Their phobia can cause physical symptoms such as headaches or stomach aches, and ultimately can lead to the isolation of the child in its own world, and later to depression. When children begin to understand what death is another fear may appear. Realizing that death ultimately touches everyone, that this is something permanent and irreversible, quite a normal concern about possible death of those who are around the child, who is the child emotionally connected to or even about their own death-can only increase. In some cases, the concern about death can bring to a state of mental incapacity.

Orphans are one of the most unfortunate categories of the population. Lack of parental care cannot fully be compensated. But it is possible, however, not to make the mistakes that reduce the adaptive capacity of orphans, and "run" their socialization and adaptation in the wrong direction. To this basic conclusion we have come having examined the problems of adaptation of orphans and children left without parental care.

Orphaned children are special kids. The psychology of their personal peculiarity and characteristics of interaction with people around them has its roots in their past experience. Orphans have survived separation, loss in babyhood or later in life.

The orphans' psychology is characterized by a lack of stability that is inherent in family relations, a need to adapt constantly and deserve good treatment of people around you. This significantly reduces the orphans' active attitude to life, their own values and principles haven't been formed, but at the same time conformance (dependence on other people's opinion, heightened suggestibility and being influenced by a group, often negative) is developed in their psychology. The orphans have low self-esteem, self rejection; distrust of themselves, there is no sense of their own uniqueness. The psychology of orphans' personality development is a specific one, characterized by increased aggressiveness, vulnerability and insecurity of a child.

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DISSATISFACTION OF THEIR BODIES AMONG YOUNG WOMEN

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The issue of body image is discussed in the article. Body image is linked to internal sensations, emotional experiences, fantasies, feedbacks, and plays a key role in a person's self-concept. Self-perceptions of physical inferiority can strongly affect all areas of one's life and may lead to avoidance of social or sexual activities or result in eating disorders.

The way how one's physical characteristics correspond to cultural standards plays a crucial role in the formation of body image. In the South Pacific island of Tonga, for example, corpulence is considered a sign of wealth and elevated social status, but would be termed obesity in Western societies, particularly in the United

States where a slim and firm athletic form is idealized [6]. Deferences of cultural standards and concepts can be very damaging, as few people attain an "ideal body," no matter how it is defined, and those who differ drastically from the ideal can suffer a sharply reduced sense of self-worth [6].

Psychologists are interested in body image primarily to determine whether the image held reasonably agrees with reality. A seriously distorted or inappropriate body image characterizes a number of mental disorders. For anorexia nervosa, a seriously distorted body image is a classic symptom and major diagnostic criterion. The anorexic, most likely an adolescent female, perceives herself as "fat" even when she is emaciated. A distorted sense of body image may comprise a disorder in itself, known as body dimorphic disorder. People affected by this condition generally become preoccupied with a specific body part or physical feature and exhibit signs of anxiety or depression [4]. Commonly, the victim mentally magnifies a slight flaw into a major defect, sometimes erroneously believing it the sign of a serious disease, such as cancer, and may resort to plastic surgery to relieve distress due to the person's perceived appearance. We can distinguish such signs of anorexia nervosa as:

- worry more and more about one's weight;
- eat less and less;
- exercise more and more, to burn off calories;
- can't stop losing weight, even when one is well below a safe weight for one's age and height;
- smoke more or chew gum to keep one's weight down;
- obsessively check one's weight, shape or reflection in mirrors;
- withdraw from social situations which may involve eating;
- lose interest in sex [1].

Some people notice that they have developed other obsessive difficulties, such as having stuck to rigid routines and times, or perhaps fears of "contamination", a need to study or work all the time, or difficulty in spending money appropriately.

A healthy body image is one that does not diverge too widely from prevailing cultural standards but leaves room for a person's individuality and uniqueness.

Children spend much of their early lives in schools, environment that is highly social and competitive with notoriously rigid hierarchies often based on physical appearances. Studies have found that teachers are also drawn to the most attractive children, which can further compound a child's poor body image. In a school-age child, a poor body image may result in social withdrawal and poor self-esteem [3].

Teenagers become increasingly focused on the appearance of their bodies. An adolescent may mature too quickly, too slowly, in a way that is unattractive, or in a way that makes the adolescent stand out in the crowd [3]. Any deviation from the ideal can result in a negative body image, and adolescents may diet or use steroids to counter a negative self-concept. As people age, most revise their views of the ideal body so that they can continue to feel reasonably attractive at each stage of their lives.

There is one more disease, and it is as dangerous as anorexia as well. It is called bulimia. Bulimia is a disease where the person who has it will try to throw up food in throwing up to lose weight. Bulimia nervosa is an eating disorder characterized by binge eating and purging, or consuming a large amount of food in a short amount of time followed by an attempt to rid oneself of the food consumed (purging), typically by vomiting, taking a laxative, diuretic, or stimulant, and/or excessive exercise, because of an extensive concern for body weight [2].

Bulimia Nervosa often starts in the mid-teens. However, people don't usually seek help for it until their early to mid-twenties because they are able to hide it, even though it affects their work and social life. People most often seek help when their life changes - the start of a new relationship or having to live with other people for the first time.

About 4 out of every 100 women suffers from bulimia at some time in their lives, rather fewer men [5].

Bulimia can be quite harmful to the body over the long run. Here are mentioned some of bulimia's effects: heart problems, such as irregular heartbeat, low pulse, low blood pressure, weakened heart muscle, or heart failure; fluids and electrolytes problems, such as dehydration and low levels of potassium, magnesium, and sodium; intestinal problems, such as constipation, irregular bowel movements, bloating, diarrhea, and abdominal cramping; mouth problems, including cavities, tooth enamel erosion, gum disease, and sensitivity to hot and cold foods; mental health problems, including depression, fear of gaining weight, anxiety, dizziness, shame, and low self-esteem; throat and esophagus soreness, irritation, or tears; stomach problems, including ulcers, pain, and delayed emptying; anemia; dry skin; cheek swelling or soreness; blood in vomit; irregular or absent period; muscle fatigue [2].

The link between body image dissatisfaction and eating disorders is not clearly apparent in men. However, there is tentative evidence to suggest that the incidence of eating disorders in men may be increasing

and that current prevalence rates for men may be underestimated. The considerable amount of research and popular writing focusing on women and eating disorders may discourage men from admitting to what they classify as a female disorder. There have also been gender differences noted in the labeling of behavior; for example, men do not label the ingestion of a large quantity of food as bingeing. Men appear to be more interested in shape than weight, although the two are clearly related. This difference between the desires for a shape change in men, as opposed to weight loss through dieting in women, may be a function of the different male and female ideals.

The male ideal is a V-shaped figure with an emphasis placed on large biceps, chest, and shoulders; whereas the female ideal is to be extremely thin, with the emphasis placed on slim hips, bottom, and thighs. Men's desire for weight gain would fit with the desire to achieve the male ideal V-shaped figure and to gain additional muscle. Women are more likely than men to describe themselves as fat, to weigh themselves often, and to diet frequently. They are also generally more dissatisfied with their physical appearance than men. The most marked difference in body-image perceptions between the sexes is dissatisfaction with weight and, to a lesser extent, with shape, particularly the hips [4].

The nature of body weight dissatisfaction is, however, slightly different in men and women. Women are more likely to see themselves overweight when by objective standards they are not, whereas men are more likely to perceive themselves as underweight with respect to objective standards. These perceptions suggest that both genders misperceive their weight in comparison with others of their gender, or they make judgments about their weight using an unhealthy standard. "Underweight" appears to have a different meaning for men and women. Men find being underweight bad; women – good. Researchers, comparing men's and women's dissatisfaction with their weight, need to take into account the direction of the dissatisfaction. Dissatisfaction with body image in women is normally shown by their desire to lose weight, whereas as many men want to gain weight as lose it.

In our study of body image we interviewed 59 students of Polotsk State University, 41 females and 18 males. Most girls are dissatisfied with their bodies, namely 56 % of the girls would like to change it. Almost all the girls want to change something in their appearance (legs, shoulders, nose, eyes, lips, teeth, etc.). Only 44% of the girls were happy with their bodies. Half of the young men, namely 44%, would like to change their body (to strengthen the abdominal muscles and they would like to have another complexion). The others (44%) do not want any changes in their bodies and they do not even think about it. 11% of the men want to lose weight and 43% of the girls want to lose their weight.

A body makes a very big contribution to a self-perception. The data received in our study proves that there is a steady tendency among young women towards the development of disorders of perception of body image. It is sure that young women are at the risk group, and under certain conditions causing these diseases, the girls will definitely join the ranks of victims of these devastating diseases. Consequently, there is a close link between a degree of satisfaction of oneself and one's body. Fashion industry has brought into our lives certain ideals of beauty: the desires to have a slender figure, to look like famous top models and pop stars. No wonder that young girls blame for all their failures their appearance. A sharp change in image by means of reducing weight may seem to be the answer to all the questions. Implacable statistics say that the number of people who suffer from anorexia and bulimia is increasing enormously. And this fact gives us the reason to assert that thinness becomes an obsessive national idea in most countries.

Today there is huge pressure the media places on us to look "picture perfect". Some young women use a lot of make up as a means of self-protection to feel better about them. Young women try to find their self-esteem and worth in their body images.

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