

Relationship of Acne and Self Esteem among Adolescent Females

MSc. Hiyam Mohsin Azooz

Family and community health nursing department/ college of Nursing/ University of kufa

hiyamalfatlawi@gmail.com

PhD. Fatima Wanas Khdair

Family and community health nursing department/ college of Nursing/ University of kufa

Abstract

Background: Skin diseases like acne vulgaris have psychological consequences for those who suffer from them, such as feelings of guilt, embarrassment, and social seclusion. Because teens are psychologically disturbed, the beginning of acne vulgaris during puberty causes this condition to be a major source of concern for many people. The current study aims to determine the level of self-esteem in adolescent girls, to compare the level of self-esteem in adolescent females with and without acne, and to find the relationship between female self-esteem and socio-demographic data.

Methods: From November 1, 2021, to July 3, 2022, an observational case-control study was undertaken in secondary schools in Al-Najaf city. To accomplish the study's goals, the researcher used a non-probability purposive sample of 200 female students with acne and 200 female students without acne, which she formed using a self-administrative questionnaire. Experts and cronbach's alpha were used to examine the questionnaire's validity and reliability, while respondents used the questionnaire as a self-report approach.

Result : According to the findings of the study, adolescent female students with acne have a significantly relationship with lower level of self-esteem than adolescent female students without acne .

Conclusions: The study found that the case group has lower self-esteem than the control group because they are girls in this age group who are focusing on self-centered and powerful personalities. It is natural for them to have low self-esteem because they have been withdrawn, have fewer connections with others, and have a lowered body self-image.

Keywords: acne , self-esteem, adolescent females

1. Introduction

In our society, it is significant and has an impact on how people perceive us. The skin is the most visible organ of the body, determining our appearance to a considerable extent and serving a wide range of social and sexual communication functions. (Tasoula et al., 2012)

Many problems might arise as a result of skin issues. Embarrassment, humiliation, and other poor body image sensations can result from anything from a minor imperfection on the face to a widespread skin illness (eczema, psoriasis, or vitiligo). These negative experiences, combined with the influence of others and society's expectations, can lead to a loss of self-esteem and confidence, increased self-consciousness, and isolation. (Shah, 2018).

Humans have suffered as a result of skin illnesses, both in terms of self-acceptance and quality of life. Acne vulgaris (AV) is a fairly prevalent illness that affects about 80% of teenagers aged 12 to 18 years old, according to epidemiological research. AV lesions are more common in exposed places like the face and thorax, causing guilt, embarrassment, and social isolation. Face lesions have a substantial impact on women's quality of life since they affect their self-perception as well as their interactions with others. (Vilar et al., 2015).

Acne is more than just a cosmetic condition; for some teenagers, it can lead to long-term mental issues. Acne-prone teenagers had poorer self-esteem than their acne-free peers. (Schroeder et al., 2012)

Acne with imperfections has been linked to depressive symptoms, shame, a sense of helplessness, a negative self-image, and decreased pride, self-worth, and body satisfaction in late adolescence years.(Akinboro et al., 2018).

When comparing one's apparent self-image to an ideal self-image, self-esteem is a feeling of pleasure or discontent. The level of happiness is a significant predictor of life outcomes. (Schroeder et al., 2012)

The purpose of this study to measure the level of self-esteem among adolescent females, and to compare the level of self – esteem among adolescent females with acne and without acne as well as to find out the relationship between females self-esteem level and their socio demographic data

Methods

1.1 Study design, setting and sampling methods

An observational case-control study to see how acne affects the self-esteem of female adolescent students. Between the 1st of November and the 3rd of April in the year 2022. The research was conducted on female adolescents with acne and those who did not have acne at a secondary school in Najaf. 200 female students with acne and 200 female students without acne were employed in a non-probability purposive sample. From all female secondary students in 5 multistage cluster randomly selected schools in Al-Najaf center during December and January 2021-2022. The student sample was determined using the proportionate allocation approach, which was based on the total numbers of students in the selected educational units. The overall number of females in the Al-Najaf center was 44,125, according to papers received from the statistics office of the presidency general directorate for education in Najaf.

2. 1. 1 Including Criteria for the Sample

- 1- Acne is diagnosed by a physician in all female students.
- 2- All of the female participants are from Al-Najaf and are Arab nationalities.
- 3- The female students ranged in age from 11 to 20 years old.
- 4- Female adolescents with acne that has been present for more than six months.
- 5- Female students that are willing to participate in this research.

2. 1. 2 Exclusion Criteria from the Sample

- 1- 1- A respondent who did not complete the questionnaire in its entirety.
- 2- 2- Female student over the age of 20.

- 3- 3- An obese respondent.
- 4- 4- Students with clinical psychiatric illnesses who are female.
- 5- 5- Female students have medical conditions.
- 6- 6- Acne-mild female students.

1.2 Data collection

The data was obtained using an Arabic version of a designed questionnaire and a self-administered questionnaire with the respondents who were included in the study. Prior to data collection, the investigator met with the students in the classrooms to define the study subjects' roles and acquire their verbal consent to participate in the study, with the right to refuse or withdraw at any time and the confidentiality of the information. Then, before it was delivered to the investigator, each respondent received a complete copy of the questionnaire. For statistical analysis, 400 questionnaires were collected from female secondary school students, and the process was repeated at each of the study's schools. The data collection took place between January 11th and January 24th, 2022. The face was the only part of the assessment for acne. The level of self-esteem was measured using the following self-esteem index: The self-esteem index is a 25-item survey that evaluates one's self-esteem. The 25 items are rated on a 5-point Likert scale, with 1 indicating "never" and 5 indicating "always." The total score, which varies from 1 to 125, is the sum of the item scores, with higher values indicating better self-esteem. Self-esteem was categorized into three groups in this study: low, moderate, and high. Low self-esteem was classified as a score of 33 points or less, moderate self-esteem as 34-66 points, and high self-esteem as 67 percent or above. The scales' internal consistency reliability is used to measure their reliability (Alpha Cronbach technique) and stability (test retest), which are both 0.79 and 0.82.

Analyzing Statistical Data

The data from the study sample was entered and analyzed using the statistical package for social sciences (SPSS) version 25. In order to conduct this study, two types of statistics were used: descriptive data analysis and the computation of the mean, frequencies, and percentages. All continuous variables were checked for statistical normal distribution using bar charts and the normal distribution curve. Statistical tests were used to analyze

inferential data according to the distribution and type of variables: reliability coefficients, means, standard deviations, Chi-square, coefficients of contingency test, Pearson's bivariate correlation test, Correlation coefficient testing, and "ANOVA."

2. Result

In this study, 400 female secondary school students were recruited, with the following subgroups accounting for the highest percentage of the students:

Students aged 17 to 19 years old (55 percent), students in the second class (29 percent), those with a monthly income of roughly (42 percent), those whose father has an elementary educational level (24.5 percent), those whose mother has an elementary educational level (26 percent), those whose father works in a free job (42.5 percent), those whose mothers are unemployed (91 percent), those who own their homes (80 percent), and those who own a car (51 percent) (64.5 percent). Students with a family history of acne (83%) and first-degree relatives with acne (60.5%), as well as those who did not see a dermatologist (73.5 percent).

The subgroups with the highest percentage of participants in the control group are as follows:

Students aged 17 to 19 years old (65.5 percent), students in the fourth grade (36.5 percent), those with a sufficient monthly income (56.5 percent), those whose father has a secondary educational level (26.5 percent), those whose mother has an elementary educational level (23.5 percent), those whose father works for free (44 percent), those whose mothers are unemployed (86.5 percent), those who own their homes (79 percent), those who own a car (54.5 percent) (63.5 percent). Students with a family history of acne (66%), students with a first-degree relative with acne (54.5%), and students who have never seen a dermatologist (75.5 percent)

The ISE total score discrepancies between the case and control groups. It shows that the case group's ISE total score is significantly lower than the control group's, with Mean SDs of (61.82,16.37) and (65.74,16.81) for case and control groups, respectively. (Table 1).

The relationship between ISE assessment for case group and their demographic data. It shows that there is no significant relationship between ISE assessment for students

and their demographic data ($P>0.05$) except for father job in which there was a significant relationship (Chi Square = 13.62 ; P value = 0.03).(Table2)

The relationship between ISE assessment for case group and their medical history. It shows that there is no significant relationship between ISE assessment for students and their medical history ($P>0.05$). (Table3)

3. Discussion

The current findings show father jobs, those whose father's are employed have higher self-esteem, whereas those whose father's are unemployed have the lowest self-esteem compared to others. This outcome may be interpreted by the financial consequences, and most of the case sample had incomplete education, , because the employment with the level of education reflects a direct relationship, so the higher the level of education, the higher class, and relied on daily needs by working as a hourly wage, all of these effects on females self-esteem level, because money and effort are the origin of the existence of life, as previously reported by (Azh et al., 2021).

According to the ISE, self-esteem was affected more in the case than in the control, which was a statistically significant difference. This is because in this age group, they are girls as a gender, focusing on self-centered and personality traits, so it is natural for them to have lower self-esteem because they are socially isolated, have less communication with others, and have a low body image, so they have lower self-esteem, this result confirmed by [(Hosthota et al., 2016); (Tayel et al., 2020) ;(Özyay Eroğlu et al., 2019); (Öztekin & Öztekin, 2020); (Gallitano & Berson, 2018)] who state the participant with acne have low self-esteem

Our results show that there is no significant relationship between self-esteem level for students and their medical history, despite the fact that there is no statistical relationship, although family history was the most that found in the case group, but this findings are different with (Franak et al., 2015)who found that self-esteem higher with those who did not have history of the problems.

4. Conclusions

The acne adolescent students that there are a significant low in Index of Self-Esteem total score as compared to the controls because they are females in this age category and are

concentrating on self-centered and appearance, it is natural for them to feelings of low self because they have been isolated, get less communication with strangers, and have a decrease body self-image, even though they have low self, and look is the most essential aspects of their lives. Providing psychological supervision in schools is part of the school health work, thus we urge that a consultant psychiatrist be hired to provide moral and psychological support for students with acne and how to cope with it in order to avoid difficulties and improve coping mechanisms. Furthermore, because acne is linked to personal cleanliness and food, there is a need for accessible, correct health education programs for teenagers and school children to be held on a regular basis under the supervision of a school health professional to pave the way for proper acne management.

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Table 1 : Descriptive statistics and differences in ISE assessment between case and control groups

	ISE Total Score	
	Mean	SD
Case Group	61.82	16.37
Control Group	65.74	16.81
Independent T test 2.36 (0.02) Significant		

Table 2: Relationship between ISE assessment for case group and their demographic data

Demographic Data	Chi Square	Df	P value
Age / Years	6.03	2	0.22
Class	13.95	8	0.08
Family Income	6.94	4	0.13
Father Educational Level	12.14	14	0.59
Mother Educational Level	13.69	14	0.47
Father Job	13.62	6	0.03
Mother Job	4.67	4	0.32
House	1.97	2	0.37
Car	3.01	2	0.22
Bank Account	1.71	2	0.42
BMI	7.6	6	0.26

Table 3: Relationship between ISE assessment for case group and their medical history

Psychological Status	Chi Square	df	P value
Family History of Acne	2.17	2	0.33
Degree of relatives with acne	3.7	6	0.71
Appointments with a Dermatologist	0.58	2	0.74

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