

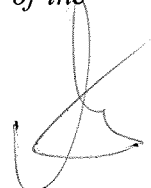
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### **SUMMARY OF PROFESSIONAL ACCOMPLISHMENTS**

**1. FIRST NAME AND SURNAME:** Anna Katarzyna Wiatrowska

**2. DIPLOMAS, SCIENTIFIC/ARTISTIC DEGREES: with an indication of the name, place and year they were obtained and the title of the doctoral dissertation:**

- 1989/1990 – 1993/1994, M.A. university full-time 5-years' studies in pre-school and early school pedagogy at the Institute of Pedagogy, Maria Curie-Skłodowska University, M.A. thesis: *Poziom składni w wypowiedziach pisemnych uczniów klas drugich szkoły miejskiej i wiejskiej (The level of syntax in written papers by second class pupils in urban and rural schools)*- written under the supervision of Ph.D. A. Czochra;
- 1991/1992 – 1995/1996, M.A. university full-time 5-years' studies in pedagogy, M.A. title in clinical psychology at the Institute of Psychology, Maria Curie-Skłodowska University, M.A. thesis: *Analiza psychologiczna projekcji lęku w rysunku dzieci w młodszym wieku szkolnym (Psychological analysis of the projection of anxiety in the drawing by children of school younger age)* - written under the supervision of Professor, Habilitated Doctor M. Klimkowski;
- 2004, degree of Ph.D. in humanities in the field of pedagogy at the Faculty of Education and Psychology of the Maria Curie-Skłodowska University in Lublin, Ph.D. dissertation defense: *Osobowościowe i społeczne korelaty poczucia jakości życia dziewcząt z zaburzeniami odżywiania (Personality and social correlates of the*



*sense of life quality in girls with eating disorders*) – supervisor Professor, Habilitated Doctor J. Kirenko, reviewers: Professor, Habilitated Doctor B. Grochmal-Bach, Professor, Habilitated Doctor M. Klimkowski.

### **3. INFORMATION ON EMPLOYMENT IN SCIENTIFIC INSTITUTIONS**

- 1 October, 1997 till 31 January, 2005 - Maria Curie-Skłodowska University in Lublin, post: research assistant at the Department of Teacher Pedagogical Education, Institute of Pedagogy, UMCS
- Since 1 February, 2005 till now – Maria Curie-Skłodowska University in Lublin, post: assistant professor at the Department of Pedeutology and Health Education, Institute of Pedagogy, UMCS

### **4. INDICATION OF ACHIEVEMENT FOLLOWING FROM ART. 16 ITEM 2 OF THE ACT FROM 14 MARCH 2003 ON ACADEMIC DEGREES AND TITLE AND ON DEGREES AND TITLE IN THE ARTS (JOURNAL OF LAWS 2016, ITEM 882, AS AMENDED, IN THE JOURNAL OF LAWS FROM 2016 ITEM 1311)**

#### **a) title of scientific/artistic achievement:**

*Subjective correlates of self-esteem in women with eating disorders. Context educational and other publications from the field of educational aspects of psycho-social functioning of persons with eating disorders, overweight and obesity.*

#### **b) Author, title of publication, years of publishing, name of publishing house, editorial reviewer**

Wiatrowska, A. (2019). *Podmiotowe korelaty samooceny kobiet z zaburzeniami odżywiania. Kontekst edukacyjny (Subjective correlates of self-esteem in women with eating disorders. Educational context)*. Lublin: Wydawnictwo UMCS, pp. 363, editorial reviewer: Professor Habilitated Doctor of Medicine Krzysztof Stanisław Klukowski and a series of books and articles devoted to the psycho-social functioning of persons with disturbed appetite and body weight

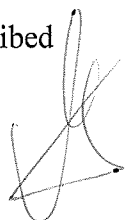
#### **c) discussion of the scientific aim of the aforementioned work and the achieved results with a discussion of their possible use**

The fundamental aim of the work: Wiatrowska, A. (2019). *Podmiotowe korelaty samooceny kobiet z zaburzeniami odżywiania. Kontekst edukacyjny*. Lublin: Wydawnictwo



UMCS, indicated as the main scientific achievement and the basis of the habilitation proceedings, was to establish the relations between self-esteem of women with eating disorders and without them on the one hand, and their subjective predispositions expressed in the system of values, sense of coherence, locus of control and coping with stress, on the other. The essence of the analyses was verifying those relations in the context of health education and its role in the therapy, prevention and health promotion. Eating disorders include disease entities distinguished by considerable deviations from the models of the correct and socially acceptable way of eating. They contribute to physiological disorders and psycho-social consequences. According to the binding classifications, this group includes, apart from anorexia nervosa and bulimia nervosa – other definite and indefinite disorders connected with the wrong behaviour related to the foods consumed. Due to the spread, chronic course and long-lasting treatment, eating disorders are an essential medical, psycho-social and educational problem. Anorexia nervosa and bulimia nervosa belong to the most dangerous progressing diseases, which much more often refer to women than men from the same age range. They are a source of numerous somatic consequences leading to permanent changes in the functioning of numerous organs and they threaten life. Various forms of help are recommended in treating eating disorders, depending on the general health condition, co-occurrence of other disorders and self-destructive behaviours as well as the motivation to undertake treatment. The assessment of recovery is conditioned by a number of criteria, which should consider not only the assessment of the somatic condition but also the psycho-social functioning and education of sick people, their families and guardians from outside the family.

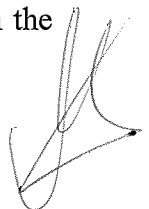
The central place in the picture of eating disorders is occupied by low self-esteem which can predispose to the disease and keep up the symptoms (Newns, Bell, Thomas 2003; Józefik, Iniewicz, Ułasińska 2010), have a negative effect on the treatment process (Fairburn 2013) and foster the relapse (Iniewicz 2005). Self-esteem is defined and explained in different ways. It can be viewed as the function of the difference between “ideal I” and “real I”, it can be identified with the attitude towards oneself and refer to the cognitive and emotional aspects of assessing oneself. According to Epstein’s personality theory (1980), the sense of one’s value is an element of the “I” system and hence – like all self-knowledge – is characterized by a hierarchical structure. Valuation takes place on different levels of specificity, beginning with individual specific behaviours, through the chosen aspects of a person’s functioning, to the most general and generalized sense of one’s own value. Self-evaluation can be ascribed



various attributes and motifs which are linked both with positive and negative consequences for the psycho-social functioning of the subject. Self-evaluation protects people from the negative consequences of failures or stress-inducing situations, it facilitates undertaking health behaviours, helps achieve the intended goals and protects the subject from social exclusion. From the cognitive point of view, self-evaluation affects the degree of integration of information on “I”, which enables effective control over the incoming information, thus performing regulatory functions. Biological and psychosocial factors affect the picture of oneself, including different attributes and areas of functioning at particular developmental stages.

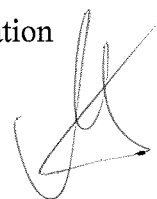
The analysis of the existing results of studies points to a variety of subjective predispositions which are of significant importance in explaining self-esteem – both its general level and self-evaluation concerning specific aspects of the functioning of women with eating disorders. It was assumed in the present work that the following subjective predispositions are important for the self-esteem of women with anorexia and bulimia and women without those disorders: the system of values, the sense of coherence, locus of control and styles of coping with stress. Predispositions included within the studies compose a considerable area of interest of health education since effective strengthening of health, prevention of diseases and their treatment require an adequate level of health literacy and definite life skills (Woynarowska 2017), which promote a healthy lifestyle and the related improvement of life quality in each period of human life (Syrek 2008, 2009). In the literature of the subject it is possible to find the characteristics of subjective predispositions in women with eating disorders, which is shown in the results of studies which are reviewed in the theoretical part of the work presented here but there is a shortage of data pointing to the relations between them.

According to Schwartz’s proposition (2006), values should be understood as emotion linked beliefs which are connected with the goals preferred by a person and which are a motivation to act and a criterion to assess one’s own and others’ behaviours. According to the author, values create individual hierarchies and are relatively permanent. This concept suggests 10 types of universal baseline values (conformity, tradition, benevolence, universalism, self-direction, stimulation, hedonism, achievement, authority, security) and four values of a higher order (self-transcendence vs. self-enhancement, openness to change vs. conservation). It was shown that the shaped system of values plays an important role in the



structure of a person's personality since it releases emotions towards the people and phenomena around in addition to affecting the direction and manner of behaviour in different life situations (Gurycka 1991). Moreover, it marks the assessments of the surrounding reality, general self-esteem and self-evaluation referring to the major areas of each person's functioning (Sękowski 2000). Results of studies do not point to the existence of a coherent model of relations between the preferences of values and personality. However, it was proved that those values which contain certain compatibility of content with the studied persons' features of personality are often chosen. In the hierarchy of values of anorectic persons, the physical appearance is one of the most important indicators of global self-esteem. What is more, in the system of values of families with bulimia, individual needs and wishes are rejected due to the predominant idea of having to give up one's own "I" for the benefit of values and ideals of the group (Schwartz 1986). Basing on the motivational aspect of Schwartz's theory of values (2006) and on the above data, it can be supposed that such values as tradition, conformity, security and power will be associated with a low sense of self-esteem, while universalism, benevolence, stimulation, self-direction and hedonism will be linked with a positive picture of oneself.

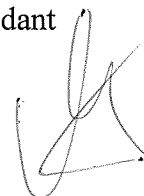
The next subjective disposition of the importance for self-esteem in women with anorexia and bulimia and for women without these disorders is the sense of coherence, which is the central concept in Antonovsky's salutogenic theory of health (2005). According to this theory, the sense of coherence is a generalized, emotional and cognitive way of looking at the world which makes it possible to receive and process the information and phenomena coming to an individual as understandable, sensible and subject to control. The sense of coherence treated as a personality variable has a clear influence on the functioning of the subject in all their areas of life and on self-evaluation of oneself (Binnebesel 2006). Empirical studies revealed a positive relation between the ability to order and structure the incoming information (comprehensibility), an individual's feeling that they possess the resources enabling their active influence on the experiences situations (manageability) and the belief that it is worth to engage the resources in definite situations or activities (meaningfulness) and the sense of one's own value. This is confirmed by the results of the present author's own studies (Wiatrowska 2013), which point to negative relations between the sense of comprehensibility and meaningfulness on the one hand, and global self-esteem of women with bulimia nervosa. A negative correlation was also proved between comprehensibility and the assessment of one's abilities and between manageability and self-esteem. The correlation



coefficient also revealed negative relations between the total sense of coherence and self-esteem in women with bulimia within such dimensions as global self-esteem, having virtues and respects to oneself.

The group of subjective factors considered in the present studies also included locus of control. The theoretical background in this case is Rotter's social learning theory (1990), according to which one of the basic elements of human behaviour is noticing a causal link between behaviour and its consequences. In the situation when an individual does not see any relation between their activity and its consequences, there is an external locus of control, while when they perceive the relation between their own behaviour and the subsequent events and they assume that they themselves decide on their fate, then we have to do with the internal locus of control. The sense of control is revealed in a number of areas of functioning, affecting not only the effectiveness of activity but also a person's health condition and well-being. It is in this sense that the sense of control can be considered to be one of the more important predictors of an individual's conformity. Considering the relation between conformity and self-esteem, described in the theoretical part, it should be expected that the sense of internal control is linked to an increase of global self-esteem and self-evaluation of important aspects of functioning and to identity integration and defensive strengthening of self-esteem. It follows from a review of studies that an individual sense of control is characterized by a higher self-esteem and a higher level of aspirations, in addition assessing the likelihood of achieving success in different areas of their functioning (Skinner 1996; Kościelak 2010). On the other hand, persons with an external locus of control are characterized by low self-esteem and a lower self-satisfaction as well as a lack of faith in their capabilities. They also assess the possibility of achieving success in different aspects of their functioning lower (Sęk 1991). The interrelationship between the external locus of control and low self-esteem was also confirmed in studies on people with anorexia nervosa (Jakubik, Łada 1999).

The last predictor of self-evaluation of women with eating disorders and without those them is coping in a stressful situation. The present research is based on the theory by Endler and Parker (1990), according to which there are three different stress coping styles, namely 1) Task-oriented coping – undertaking efforts aimed to solve the problem by applying cognitive and behavioral activities; 2) emotion-oriented coping – concentration on negative emotional experiences and a tendency to fantasize and for wishful thinking; 3) avoidant



coping – a tendency to cognitively and emotionally divert from a stressful situation, which is manifested in getting involved in displacement activities or social relations. Studies conducted in this area showed that coping with stress through attempting to solve the existing problem in the long term leads to more adaptive behaviours (Vollrath, Angst 1993), which makes it possible to assume that the task-oriented style enhances both global self-esteem and self-evaluation of significant areas of human functioning. Besides, these dispositions affect each other since persons with low self-esteem and deprived of psychical resources ensured by positive self-esteem focus their efforts on regaining wellbeing lost as a result of dealing with a stressful situation. This is confirmed by studies on the relations between stress coping ways and self-esteem in persons with eating disorders and without them since a positive relation was observed between the emotion-oriented styles and low self-esteem in the studied persons. This relation also appeared in Polish studies (Fecenec 2008), on the basis of which it can be concluded that there is a negative relation between the tendency to concentrate on oneself and one's emotions in stressful situations on the one hand, and global self-esteem and specific self-esteems as well identity integration and defensive strengthening of self-esteem. An interrelation was additionally observed between the task-oriented style and almost all (except the self-esteem of physical attractiveness) dimensions of MSEI.

The adopted model of analyses assumes that the dependent (explained) variable is self-esteem in women with anorexia and bulimia and women without those disorders, including its general level and self-evaluation concerning specific aspects of functioning (such as competences, being loved, popularity, leadership skills, self-control, moral self-acceptance, physical attractiveness, vitality) and identity integration and defensive enhancement of self-esteem (Fecenec 2008). The independent (explanatory) variables are, on the other hand, subjective dispositions expressed in the system of values, according to Schwartz's theory of values (2006), including 10 types of universal baseline values (conformity, tradition, benevolence, universalism, self-direction, hedonism, achievement, power, security) and four values of higher order (self-transcendence vs. self-enhancement, openness to change vs. conservation); the sense of coherence, based on the salutogenic health theory by Antonovsky (2005) and consisting of three components (comprehensibility, meaningfulness, manageability), locus of control, whose theoretical basis is Rotter's social learning theory (1990), including two opposite poles of locus of control (internal vs. external), and the lie scale; coping in stressful situations, which – in accordance with the theory by Endler and Parker (1990) considers three different stress coping styles (task-oriented style, emotion-

oriented style, avoidant style). The form of the eating disorder (anorexia nervosa, bulimia nervosa) was regarded as the mediator variable.

The established goal implied the following main research problem: Are there, and if, so what kind of relations between self-esteem of women with anorexia and bulimia and women without those disorders on the one hand, and their subjective dispositions reflected in the system of values, sense of coherence, locus of control and coping with stress?

The general working hypothesis took the form of the following assumption: There is a significant relation between the studied women's self-esteem and their subjective dispositions including the system of values, the sense of coherence, locus of control and coping with stress. The strength of those relations will depend on the intensity of values of the analyzed variables.

The solution of so-established research problem and verification of the working hypothesis were linked to the necessity of formulating the following detailed questions:

Q1. Do women with eating disorders differ from women without those disorders as far as global self-esteem and self-evaluation are concerned referring to significant areas of their functioning and the assessment of the coherence of the picture of oneself and the need for social approval?

Q1.1. What levels of self-esteem, specific self-esteems and identity integration and defensive enhancement of self-esteem characterize the studied women?

Q1.2. Do women with anorexia differ from women with bulimia in the sphere of the structure of self-esteem?

Q1.3. What self-esteem types are characteristic of women with eating disorders?

Q2. Are there any differences between the studied women in the sphere of such subjective dispositions as the system of values, the sense of coherence, locus of control and coping in stressful situations?

Q2.1. Are women with anorexia nervosa and bulimia nervosa different from women without those disorders considering the system of values?

Q2.2. What level of the general sense of coherence and its components characterized the studied women?



Q2.3. Are women with eating disorders different from women without those disorders considering locus of control?

Q2.4. What stress coping styles are preferred by the studied women?

Q3. What is the strength and direction of the relation between self-esteem of the studied women and their subjective dispositions reflected in the system of values, the sense of coherence, locus of control coping with stress?

Q3.1. Is there any relation between self-esteem and the system of values for women with eating disorders and women without those disorders?

Q3.2. What is the relation between the studied women's self-esteem and their sense of coherence?

Q3.3. Is there any relation between self-esteem of women with anorexia and bulimia and women without those disorders on the one hand and their locus of control?

Q3.4. What relation occurs between self-esteem and stress coping styles preferred by the studied women?

Referring to the established research questions referring to dependencies, the following hypotheses were formulated.

Hypothesis 1. It is supposed that there are statistically significant relations between the system of values and self-esteem in women with anorexia and bulimia and in women without those disorders. Different system of values of the studied women could lie at the basis of high global self-esteem and integration of identity and defensive enhancement of self-esteem. Values which are a reflection of anxiety (tradition, conformity, security, power) will be associated with low global self-esteem and self-evaluation of the studied women in the other areas of MSEI, while those values which do not reflect anxiety (universalism, benevolence, stimulation, self-direction, hedonism) will be related to high global self-esteem and specific self-esteems and the assessment of the coherence of the self-picture and a need for social approval.

Hypothesis 2. It is assumed that there are statistically significant relations between the sense of coherence in women with eating disorders and in women without those disorders on the one hand and their self-esteem. The higher the ability for cognitive assessment of reality (comprehensibility), the sense of having the resources enabling an adequate influence on

situations experiences by the subject (manageability) and the conviction that it is worth to engage the resources in definite situation or activity (meaningfulness) are, the higher both global self-esteem and self-evaluation concerning important areas of the functioning of the studied women and their integration of identity and defensive enhancement of self-esteem. On the other hand, the smaller the ability to order and structure the incoming information, the more lowered the sense of controlling the resources and the smaller the level of engaging them in definite situation one the one hand, the lower self-esteem and self-evaluation of the other dimensions of self-esteem in the studied women are.

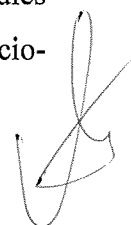
Hypothesis 3. It should be supposed that the stronger sense of inner locus of control, expressed in the conviction that events experienced by an individual, or the results of their behaviour result from their personal, relatively permanent characteristics, the higher general self-esteem in the studied women and self-evaluation concerning important aspects of their functioning and integration of identity and defensive enhancement of self-esteem. On the other hand, the higher sense of external locus of control, which consists in not seeing the relation between one's own behaviour and its consequences and in interpreting the results of one's activities as dependent on other people, destiny or accident, the lower global self-esteem and self-esteems of the other dimensions of functioning. Moreover, the higher the tendency to present oneself in an excessively positive light, the lower global self-esteem and the other dimensions of MSEI in the studied women, while the smaller the readiness in this respect, the higher both their global self-esteem and self-evaluation of important areas of their functioning.

Hypothesis 4. It is expected that there are statistically significant links between the stress coping styles preferred by the studied persons and their general self-esteem and specific self-esteems as well and integration of identity and defensive enhancement of self-esteem. Showing tendencies to undertake efforts aimed to solve the problem through cognitive transformations or attempts to change the situation (task-oriented style) will promote an increase in self-esteem of women with eating disorders and women without those disorders. On the other hand, an inclination to concentrate on oneself and one's own emotional experiences (emotion-oriented style) and to divert from the problem situation both cognitively and emotionally (avoidant style) will be linked in the studied persons with a decrease of both general self-esteem and the other dimensions of self-esteem.



The present studies made use of the method of a diagnostic survey, while the following research tools were used to measure the distinguished variables: 1) Multidimensional Self-Esteem Inventory (MSEI) by O'Brien and Epstein; 2) Portrait Values Questionnaire (PVQ-R2) by Schwartz; 3) Orientation to Life Questionnaire (SOC-29) by Antonovsky (1987); 4) Questionnaire for sense-of-control assessments (Delta) by Drwal; 6) Coping Inventory for Stressful Situations (CISS) by Endler and Parker. Besides, the studies used 1) the present author's Survey Questionnaire, which enables assessment of such socio-demographic features as age, education, marital status, residence environment, number of siblings, sequence of births and family type; 2) Hamilton Depression Rating Scale to identify the symptoms of depression intensification.

Analyses of self-esteem in the studied women allow for the statement that women with eating disorders were characterized both by lower global self-esteem and specific self-esteems as well as a decrease of integration of identity and defensive enhancement of self-esteem. The obtained results point to compatibility with earlier findings of other researchers, who showed that lower self-esteem plays a significant role both in the development and course of eating disorders, as well as in the process of treatment, rehabilitation and care. Comparisons within the groups referring to groups with anorexia nervosa and bulimia nervosa distinguished due to the form of disorder revealed statistically significant differences in many dimensions of MSEI. Significant differences occurred for the benefit of women with anorexia in case of being loved, accepted and supported by the close ones, self-control and persistence in pursuing one's goals as well as in the area of moral functioning, integration of identity and the need for social approval. On the other hand, in the areas referring to social functioning (popularity and leadership skills) higher results were achieved by women with bulimia. The analysis of the structure of self-esteem in women with anorexia showed a higher sense of coherence and continuity of oneself, which – as indicated in the literature of the subject (Fecenec 2008) – can be an indicator of high effectiveness of self-esteem in regulating the processing of information on oneself – was linked to an increased self-esteem. In addition, a higher assessment of physical attractiveness and the feeling that one is liked and accepted by others promoted higher global self-esteem of the studied persons. High self-evaluation of women with bulimia was connected with an increased assessment of competences and vitality, a decrease of defensive enhancement of self-esteem as well as with an increase in moral acceptance and assessment of popularity. Results obtained in the present studies showed that factors related to effectiveness and physical attractiveness as well as to socio-



moral dispositions are responsible for the variability of results in global self-esteem of women with anorexia. A two-factor structure of self-esteem is compatible with the thesis by O'Brien and Epstein (1988), who emphasize that the main sources of self-esteem are the feelings connected with the area of one's own competences, efficiency and domination, as well as social functioning, including the subject's acceptance or affiliation. Apart from the two aforementioned factors, a third one appeared in the structure of self-esteem of women with bulimia. This factor includes social and motivational dispositions. A cluster analysis conducted in both groups of women with eating disorders revealed considerable similarities between women with anorexia and bulimia. In both groups the predominant cluster was characterized by both low global sense of self-esteem and specific self-esteems as well as integration of identity and defensive enhancement of self-esteem. The least numerous was the cluster characterized by both high general self-esteem of the studied persons and the assessments referring to important areas of their functioning. A numerous cluster characterized by average self-esteem was also distinguished in the group of women with bulimia.

The obtained results concerning subjective dispositions expressed in the system of values, sense of coherence, locus of control and coping in stressful situations showed statistically significant differences between the examined groups of women. Referring to the system of values, it should be emphasized that both in the group of women with eating disorders and in the group of women without them, power was the least preferred value, which corresponds to the empirical reports of other authors (Pilch 2012; Kirenko, Wiatrowska 2015). Women with anorexia and bulimia assessed the values manifesting a pro-social inclination much higher as compared to women without those disorders and they showed a much smaller preference of values connected with the strengthening of "I". The analysis inside the groups revealed that women with bulimia preferred such values as stimulation, hedonism and openness to change, while anorectic women assessed values such as tradition, adjustment and conformity higher. The preferential tendency of the meta-value of conformity, which leads to withdrawal, escape from the world and maintenance of the status quo can make the treatment process harder and longer as well as lower its effect and promote remission of symptoms. It should, therefore, be supposed that a higher preferential tendency of the meta-value openness can serve the effectiveness of the treatment, rehabilitation and care as well as good prospects in the illness.



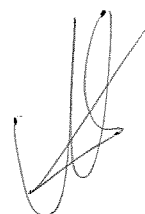
In reference to the obtained results concerning the general life orientation, it should be stated that women with eating disorders, as compared to those without those disorders, possess smaller resistance resources and adaptive possibilities (the sense of coherence) and a lower ability to understand and assess the reality cognitively (the sense of comprehensibility). They perceive the inflowing stimuli in the categories of a threat and not a challenge (the sense of manageability), which implies a less adaptive assessment of difficult situations and is not conducive to mobilization of the available means and resources in the struggle with unfavourable circumstances (the sense of meaningfulness). The results obtained in this sphere are compatible with the existing empirical reports. According to Antonovsky (2005), a low sense of coherence does not serve pro-health behaviours, thus leading to a worse health condition and lowering the effect of the treatment process and being conducive to relapse. Results of comparisons between the groups showed that women with anorexia are characterized by a greater ability – as compared with the women with bulimia – to order and structure the incoming information, which makes it possible to interpret life experiences as possible to overcome, and to perceive the inflowing stimuli in the category of challenges and not threats with which an individual cannot cope. The other dimensions of the sense of coherence (namely, the sense of manageability and meaningfulness) did not differentiate women with eating disorders, which corresponds to the existing results of studies, which showed that women with anorexia and bulimia were characterized by similar manageability and emotional and motivational properties.

Generalizing the obtained results in the field of locus of control, it should be noticed that women with eating disorders – as compared with women from the control group – are characterized by significantly higher locus of control, which determines both their way of processing and receiving the inflowing information and their behaviour in a variety of social situations. They saw relations between their activity and its consequences to a lesser degree, and perceived the results of their activities as dependent on other people, destiny or accident. The obtained results are compatible with the existing empirical reports, showing a relation of external locus of control with eating disorders and the syndrome of anorexia readiness syndrome. Results of comparisons within the groups did not show any significant differences in locus of control of women with anorexia or bulimia. Therefore, it should be concluded that they are characterized by similar beliefs as for the possibilities of controlling their own fate in everyday situations.

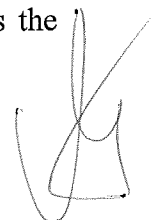


The analysis of stress coping ways showed that women with eating disorders – as compared with women without them – more frequently use the emotion-oriented style reflected in focusing on oneself and one's own, usually negative emotional states and an avoidant style expressed in seeking others' support in stressful situations. As emphasized by Parker and Endler and Parker (1990), giving up real activities aimed to solve a stressful situation might lead to a further increase of psychological tension and generate negative emotional states. The obtained results correspond to the earlier findings, which proves that persons with eating disorders use the emotional ways of coping with stress more often than task-oriented ways. Results of comparisons within the groups showed that anorectic women show a tendency to task-oriented ways of dealing with problems, which corresponds to earlier empirical reports. Women with bulimia, on the other hand, prefer avoidant styles in difficult situations which is manifested in getting involved in various displacement activities such as watching TV or binge eating. The obtained results confirm earlier reports, which showed that women with bulimia undertake less adaptive behaviours in stressful situations. Importantly, however, a number of authors emphasize that in situations outside an individual's control avoidant strategies might prove better from the point of view of personal adjustment.

After the analysis of self-esteem in women with eating disorders and women without those disorders and their subjective dispositions was conducted, relations between those variables were focused upon. In accordance with the adopted research assumptions, the strength and direction of the links between particular subjective dispositions (independent variables) and global self-esteem as well as specific self-esteems and integration of identity and defensive enhancement of self-esteem (dependent variables) were analyzed. The multiple regression analysis made it possible to explain how and in what degree subjective dispositions of the studied women, expressed in their system of values, sense of coherence, locus of control and coping with stressful situations, determine their global self-esteem as well as the other dimensions of MSEI. It was proved that of significant importance in explaining the character of global self-esteem and self-esteems concerning significant aspects of functioning are the adopted independent variables and this was expressed in different configurations of particular subjective dispositions and in their differentiated range. Generalizing the obtained results, it should be said that the relations between the subjective dispositions of women with eating disorders and women without them on the one hand and their self-esteem on the other are much more complex than it was assumed in the adopted hypotheses.




The first hypothesis referred to the relations between the system of values and global self-esteem as well as self-evaluation of significant areas of functioning of the studied women. It was assumed that the values expressing anxiety (tradition, conformity, security, power) would be linked to a low global self-esteem and self-evaluation of the other dimensions of MSEI, while the values which do not express anxiety (universalism, benevolence, stimulation, self-direction, hedonism) would be connected with high global self-esteem and specific self-esteems and integration of identity and defensive enhancement of self-esteem. The analyses conducted here proved that the importance of particular baseline values in explaining the changeability of self-esteem showed considerable differentiation depending on the dimension of MSEI and the form of eating disorder. Both in the group of bulimic women and in the control group, far more baseline values were in statistically significant relations with global self-esteem, which points to a greater share of the system of values in explaining their global self-esteem. In the group of anorectic women a higher assessment of independence in thinking and acting, as revealed in exploratory activities and interpersonal relations (self-direction), was connected with a decrease of global self-esteem, while in the group of bulimic women higher global self-esteem was related to a higher preferential tendency of the value of self-direction. A higher assessment of the value of self-direction in bulimic women was also correlated with an increase of self-esteem concerning one's own abilities of effectiveness in doing various tasks (competences) and self-evaluation of one's own person in the sphere of close relations with others (being loved). Increased general self-esteem in women with eating disorders was also connected with a higher demand for activation and a search for novelties and challenges set by life (stimulation). The preference of the value of stimulation was connected with higher self-esteem of women with anorexia and bulimia in the field of directing people and affecting their behaviour (leadership skills) as well as an increased assessment of vitality and sense of integration of identity. Higher global self-esteem among women with bulimia was also supported by more attention attached to customs and socio-cultural norms (tradition) as well as striving for social status and prestige and domination over others (power). In anorectic women, an increase of acceptance and respect for socio-cultural norms and the idea of one's own culture or religion (tradition) was linked with increased self-valuation of one's competences, assessment of one's own person in the field of social relations, the feeling that one is liked and accepted by others and assessment of self-control as well as a decrease of self-esteem concerning one's physical attractiveness. A higher assessment of one's own persistence and discipline as well as the



ability to control both one's own body and emotions in women with anorexia was also connected with a decrease of the preference of the value of conformity. In bulimic women higher esteem of this dimension of functioning was connected with a decrease of this value. Less care about personal and common good (universalism) is related in bulimic women with an increase of such dimensions of MSEI as popularity, leadership skills, self-control, physical attractiveness, vitality, integration of identity and defensive enhancement of self-esteem. Higher esteem of the majority of those areas was also connected with a smaller preference of values referring to personal achievements and successes as well as adjustment. In anorectic women, higher esteem of the value of achievement was connected with higher self-esteem of leadership skills, moral acceptance, assessment of one's own person in respect of fitness and health and defensive enhancement of self-esteem. The obtained results also showed that a decrease of a tendency for pleasure and life enjoyment is accompanied by moral self-esteem in women with eating disorders. In anorectic women and in the control group higher esteem of compatibility between the values professed by the subject and their behaviour was also connected with a smaller tendency for social status and prestige and domination over others (power).

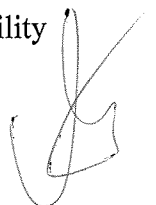
The second hypothesis assumed that there were statistically significant relations between the sense of coherence and self-esteem in anorectic and bulimic women and women without those disorders. It was assumed that the higher ability to assess reality cognitively (comprehensibility), the sense of having resources enabling adequate influence on the situations experienced by the subject (manageability) and the belief that it is worth to engage the resources in definite situations or activities (meaningfulness), the higher both the studied women's self-esteem and self-evaluation concerning the significant aspects of their functioning. On the other hand, the lower the ability to order and structure the incoming information and a lowered sense of having the resources and engaging them in definite situations, the lower global self-esteem as well as the other dimensions of MSEI in the studied women. The relations between the global life orientation (SOC) and self-esteem in women with eating disorders and without them proved to be more complex than assumed in the adopted hypothesis. The established models of regression of particular dimensions of MSEI revealed different links of particular components of the sense of coherence, which makes it possible to conclude their differentiated share in explaining the changeability of the studied women's self-esteem. All components of the sense of coherence in the group of anorectic women and in the control group remained in statistically significant relations with the global





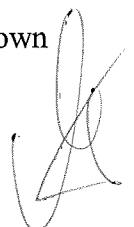
self-esteem, which points to a higher share of the sense of coherence in explaining their global self-esteem. It can then be stated that a higher ability to comprehend and assess the reality cognitively and to use the internal and external resources as well as an increase of motivation to act and undertake efforts or struggle to achieve the determined goal promote higher self-evaluation of those women. In bulimic women only the emotional-motivational component of the sense of coherence proved significant in explaining their global self-esteem. In the group of anorectic women three components of the sense of coherence also determined self-esteem of one's own abilities and efficiency in doing various tasks, assessment of one's own competences and efficiency of activities and moral acceptance, while in case of bulimic women it was self-evaluation of one's own health and physical fitness. A higher sense of availability of the means or resources which enable having an active influence on situations, a higher sense of life and a smaller ability to comprehend and assess the reality cognitively were linked in anorectic women with a higher esteem of one's competences and efficiency, while in bulimic women they were connected with increased self-esteem concerning one's vitality. In case of anorectic women a higher ability to comprehend and assess the reality cognitively and a higher awareness of the means or resources possessed which let cope with the requirements set by the environments, accompanied by a lower motivation to act and undertake challenges were connected with a higher esteem of the compatibility between the professed values and one's behaviour. Basing on the results, it should be noticed that the emotional-motivational component, which – according to Antonovsky (2005), is its most important element – is linked in women with eating disorders more than in women without them with specific self-esteems and integration of identity and defensive enhancement of self-esteem. Therefore, a higher sense of meaningfulness, which is reflected in the conviction that the requirements set by the environment are worth the effort and involvement, correlate in women with eating disorders with a higher assessment of their competences and efficiency, leadership skills and influence on people's behaviour, physical attractiveness and vitality as well as the sense of coherence and continuity of oneself.

A higher sense of meaningfulness was in anorectic women additionally connected with a higher assessment of popularity, discipline and abilities to control both their emotions and body, lower moral self-acceptance and a higher need for social acceptance. The emotional-motivational component in bulimic women was associated with increased self-esteem in the sphere of social relations. The obtained results point out that the cognitive component of the sense of coherence was also of significant importance for the changeability



of some dimensions of MSEI (especially in bulimic women). A higher ability to comprehend and assess the reality cognitively was linked in those women with their higher self-esteem, associated with the feeling of being accepted and liked by others, with greater persistence in realizing their tasks, a better ability to control their bodies and emotions as well as with an increased need for social acceptance.

The third hypothesis referred to the relations between locus of control and global self-esteem as well as self-evaluation concerning significant areas of functioning. It was assumed that a stronger sense of internal locus of control, reflected in the belief that the events experienced by an individual, or results of their behaviour follow from their personal, relatively permanent characteristics, is accompanied by higher global self-esteem and specific self-esteems as well as integration of identity and defensive enhancement of self-esteem. On the other hand, a stronger sense of external locus of control, reflected in seeing no relation between one's own behaviour and its consequences, and interpreting the results of one's activities as dependent on others, on destiny or accident, is accompanied by lower global self-esteem and self-esteems of other dimensions of MSEI. Besides, a higher tendency to present oneself in a too favourable light is accompanied by lower self-esteem in women with eating disorders and without them, while a lower aspiration in this respect is accompanied by higher global self-esteem and self-evaluation of significant aspects of the studied women's functioning. To make a synthesis of the obtained results, it should be emphasized that the adopted hypothesis referring to the relations between locus of control and readiness to present oneself in a positive light on the one hand, and self-esteem of anorectic and bulimic women as well as women without these disorders was partly confirmed. The analyses showed that in women with eating disorders the lie scale had greater significance for changeability in global self-esteem and specific self-esteems as well as integration of identity and defensive enhancement of self-esteem, whereas a smaller role was played by the internal locus of control. In women without eating disorder, both changeability in global self-esteem and the other dimensions of MSEI (except self-control and defensive enhancement of self-esteem) depended on their internal locus of control. Higher global self-esteem of anorectic women was promoted by a tendency of the studied women to present themselves in a too favourable light and seeing a relation between their activity and its consequences. Likewise, in the control group, inner-direction was related to global self-esteem. Higher readiness to present oneself in a positive light and internal locus of control were connected in women with eating disorders with a higher assessment related to popularity and social acceptance, one's own

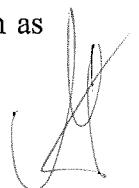


discipline and self-control and increased defensive enhancement of self-esteem. The obtained results show that it is only in bulimic women that an increased tendency to present oneself in a too positive light correlated with a decrease of one of the dimensions of functioning, namely self-esteem concerning compatibility between the values professed by the subject and one's own behaviour. What is more, higher self-evaluation of vitality was connected with external locus of control only in bulimic women. This means that seeing no relations between one's activity and its consequences promoted higher self-esteem from the point of view of physical fitness and health.

The fourth hypothesis assumed that there were statistically significant links between stress coping styles of the studied women and their global self-esteem and specific self-esteems as well as integration of identity and defensive enhancement of self-esteem. It was assumed that a tendency to undertake efforts aimed to solve the problem through cognitive transformations or attempts at changing the situation (task-oriented style) would promote an increase of self-esteem in anorectic and bulimic women as well as in women without those disorders. On the other hand, a tendency to focus on oneself and one's own emotional experiences (emotion-oriented style) and to divert, both cognitively and emotionally, from the problem situation (avoidant style) was supposed to be linked to a decrease of global self-esteem and self-evaluation of the other dimensions of self-esteem. To make a synthesis of the obtained results, it should be said that the relations between coping in stressful situations and self-esteem of women with eating disorders and without them proved more complex than previously assumed in the adopted hypothesis. The analysis showed that the importance of particular stress coping styles in explaining changeability of global self-esteem and self-evaluation concerning the significant areas of functioning of the studied women and their integration of identity and defensive enhancement of self-esteem showed considerable differentiation depending on the dimension of MSEI and the form of eating disorders. An increase of global self-esteem in women with eating disorders was associated with a decreased tendency to emotionally cope in stressful situations and with higher readiness to seek social contacts. In anorectic women, higher global self-esteem correlated with smaller readiness to concentrate on oneself and the accompanying experiences, while in bulimic women increased global self-esteem were connected with a higher tendency to undertake activities in stressful situations which were aimed to solve the problem. Higher readiness for task-oriented coping with problems and a smaller tendency to concentrate on one's own emotional states in women from the control group were related to higher global self-

evaluation. A bigger tendency to concentrate in stressful situations on oneself and the accompanying, usually negative emotions was related in women with eating disorders with lower self-esteem concerning competences, popularity, physical attractiveness and vitality as well as integration of identity. A greater readiness to task-oriented style of coping with stress in anorectic women was related to lower self esteem concerning the leadership style and self-control, persistence and discipline. On the other hand, the tendency exposed by bulimic women for the avoidant style of coping with problems was connected with a higher assessment of popularity, leadership skills and effect exerted on people's behaviour as well as with increased moral acceptance and assessment of one's own physical attractiveness. The obtained results indicated that the avoidant style, which can be manifested in two forms of behaviour (involvement in displacement activities, seeking social contacts), in women with eating disorders was associated both with specific esteems and defensive enhancement of self-esteem. A higher tendency to get involved in social contacts in stressful situations was connected in anorectic women with self-esteem of competences, popularity, being loved, leadership skills, self-control, vitality and defensive enhancement of self-esteem. On the other hand, a decrease of involvement in various displacement activities (e.g. binge eating) is connected in anorectic women with higher self-esteem in the sphere of social functioning (being loved, popularity), the ability to control one's body and emotions as well as with an increase of defensive enhancement of self-esteem. A decrease in getting involved in displacement activities in bulimic women was connected with increased self-evaluation concerning compatibility between the professed values and one's own behaviour and a higher need for social acceptance. Higher self-assessment of physical attractiveness and self-esteem from the angle of physical fitness and health correlated in the studied persons with increased involvement in displacement activities. An increase in specific self-esteems in women from the control group was usually connected with higher readiness to undertake efforts aimed to solve the problem or with a decreased in concentration on oneself and one's emotional experiences, which is in accordance with the adopted hypothesis.

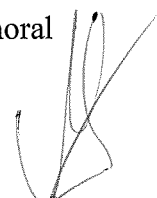
Summing up, the obtained models of multiple regression of particular dimensions of self-esteem in bulimic women present more developed relations of those variables with the system of values. Therefore, a conclusion can be drawn about a greater share of the system of values of bulimic women as compared to women with anorexia and women without those disorders in explaining global self-esteem, specific self-esteems and defensive enhancement of self-esteem. It should then be said that the obtained models explain global self-esteem as



well as the other dimensions of MSEI in a greater degree. In the group of anorectic women, like in the control group, much more dimensions of subjective dispositions – expressed in the sense of coherence, locus of control and coping with stress – created statistically significant relations both with global self-esteem and the other areas of the studied persons' functioning. This means a greater share of particular subjective dispositions in explaining global self-esteem and specific self-esteem as well as integration of identity and defensive enhancement of self-esteem. In the group of bulimic women, no significant links were observed between global self-esteem and some of the significant areas of functioning on the one hand, and locus of control, which could be worth verifying in successive empirical studies. Besides, the range of the analyzed variables should be extended which could have a significant effect on the character of relations between subjective dispositions and self-esteem in women with eating disorders.

**I m p l i c a t i o n s f o r h e a l t h e d u c a t i o n.** Recently, problems of psychical health have become one of the main priorities in health education, which is a significant element of the treatment process, prophylaxis and life endangering behaviours. A growing number of anorectic and bulimic cases, together with a high risk in different age groups, enforce a necessity to educate not only the ill but also their families and guardians from outside their families. Education for psychical health is directed at developing psycho-social skills (called life skills) which make it possible to acquire knowledge and shape attitudes and behaviours promoting positive decisions and activities in order to protect and improve one's own life (WHO 2003). As emphasized by Syrek (2008, 2009), life skills promote a healthy lifestyle and the associated improvement of life quality at each stage of human development. The psycho-social health promoting skills include the system of values, the sense of coherence, locus of control, coping with stress and the feeling of one's own value.

As indicated by the studies, low self-esteem is one of the most characteristic features in people with eating disorders which plays a significant function in the development of the disease, its course and treatment process. Hence, one of the basic goals of therapy and prophylaxis of eating disorders should be increasing global self-esteem of sick people and self-evaluation concerning the significant aspects of their functioning. In anorectic women, self-esteem areas should be considered which are connected with social functioning, including relations with others and their intensity, while in bulimic persons – dimensions referring to the assessment of self-control, discipline, control over one's body and emotions as well as moral



self-acceptance and integration of identity. Increasing self-esteem in women with disorders should also be connected with decreasing their defensive enhancement of self-esteem.

Referring to the system of values in anorectic and bulimic women, both values manifesting the pro-social inclinations and those that lead to the strengthening of "I", which refer to the sphere of personal successes achieved through a demonstration of competences compatible with social standards and related to efficiency in undertaking activities and realizing tasks should be shaped. It is also worthwhile to additionally develop those values which promote openness to changes since they can support the effect of treatment and care, affect the prognosis and prevent relapse. An important role in creating and keeping up health is also played by the sense of coherence, which is why increasing the resistance resources and adaptive capabilities of women with eating disorders, developing personal resources enabling an active effect on situations, and perceiving them in the categories of challenges and not threats should become an element of therapy and prophylaxis. As emphasized by Antonovsky (2005), an increased sense of coherence promotes pro-health behaviours, thus leading to an improved health condition and a better effect of the treatment process as well as preventing relapse. In bulimic women, the ability for an apt assessment of reality should be shaped. This should promote interpretation of life situations as comprehensible and possible to be cognitively ordered. In education for psychical health, the sense of locus of control should also be considered. The external sense of control, characterizing women with eating disorders, can be connected with intensification of symptoms and with accompanying disorders which have a negative effect both on the course of the disease and the treatment process. That is why developing the inner sense of control can promote activity, undertaking actions and responsibility for them as well as increased motivation to take up and continue the therapy. It was proved that women with eating disorders show a tendency for emotional and avoidant coping with stressful situations, which may have a disadaptive role and in definite situations promote an individual's adjustment. Education for health should then consider not only the ability to cope with stress (e.g. recognition of the stress sources, reaction to stress, activities enabling control over the stress level, relaxation but also capabilities of coping with one's emotions, especially those negative ones (Wojnarowska-Sołdan 2017).

Programs of prophylaxis and treatment of eating disorders should also consider the links between subjective dispositions and global self-esteem as well as particular dimensions of self-evaluation in women with eating disorders. For example, a decrease of preferences



concerning the value of self-direction in anorectic women should lead to an increased self-esteem, while in bulimic women increased global self-esteem should be linked to a higher assessment of the values of self-direction, stimulation, tradition or power. A higher ability to comprehend and assess the reality cognitively, using the inner and outer resources, and an increase in the motivation to act and undertake tasks should be related to increased global self-esteem in anorectic women. The latter component should also play a significant role in increasing not only global self-esteem in women with anorexia and bulimia, but also many other dimensions of self-esteem. An increase in global self-esteem in anorectic women should be linked to a decreased tendency for emotional coping with problems, while in bulimic women increased self-esteem should be related to a tendency for task-oriented coping with stress.

Summing up, it should be emphasized that strong connections of particular subjective dispositions in explaining changeability of global self-esteem, specific self-esteems as well as integration of identity and defensive enhancement of self-esteem shown in the present studies should become a significant element of programs and prophylaxis of eating disorders and health promotion.

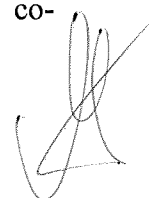
## **5. DISCUSSION OF THE OTHER SCIENTIFIC AND RESEARCH ACHIEVEMENTS**

Interests and scientific-research activity connected with: 1) educational aspects of psycho-social functioning of people with eating disorders, overweight and obesity, 2) life quality and health hazards in children, youth and adults.

### **5.1. Educational aspects of psycho-social functioning of people with eating disorders, overweight and obesity**

A monograph Wiatrowska, A. (2019). *Podmiotowe korelaty samooceny kobiet z zaburzeniami odżywiania. Kontekst edukacyjny*. Lublin: Wydawnictwo UMCS, indicated as the main scientific achievement, belongs to the major area of my scientific and research interests referring to the educational aspects of psycho-social functioning of people with eating disorders, overweight and obesity. This area also includes a co-authored publication *Otyłość. Przystosowanie i uwarunkowania*. Lublin 2015, Wydawnictwo UMCS, and articles published in journals, chapters in monographs and works with scientific editorship.

The effect of cooperation with Professor Doctor Habilitated Janusz Kirenko from the Maria Curie Skłodowska in Lublin was a twice-published monograph where we were co-



authors, *Otyłość. Przystosowanie i uwarunkowania*. Lublin 2015, Wydawnictwo UMCS, pp. 300, editorial reviewer: Professor Doctor Habilitated Mieczysław Radochoński, Doctor Habilitated Stanisława Byra, Professor of UMCS. The subject of the empirical analysis were the issues connected with adaptive reactions of obese people and their conditions in the dimensions of the sense of coherence, self-esteem and the system of values. As emphasized, the literature of the subject lacks clear data pointing to the relations between the distinguished variables. That is why the aim of the studies planned was to assess those relations. The main research problem was contained in the following question: Is there, and if so, what kind of relation between the type of adaptation of obese people with their psycho-social resources, in the dimensions of the sense of coherence, self-esteem and the system of values? The research problem formulated in this way concerned the establishment of adaptive reactions of obese people in the areas of Adaptive Responses Inventory Questionnaire by Livneh and Antonak in the Polish adaptation by Byra and Kiernko, and their specific types. A separate question was asked about the relations between the levels of adaptive reactions in the group of people with obesity and within particular types of adaptive reactions and their psycho-social resources: the sense of coherence, in the components of Antonovsky's Orientation to Life Questionnaire, the level of self-esteem measured by Fitts' Self-Concept Scale, and the system of values in the categories and meta-categories of Schwartz's Personal Values Questionnaire. A hypothesis was set to the main problem, Its basis was the analysis of the existing state of research which concerned the interrelations between particular variables. It was assumed that the relations between the types of adaptive reactions and psycho-social resources of people with obesity are differentiated in particular dimensions of the correlated variables. The type of adjustment correlates positively with psycho-social resources. A more stable type of adjustments characterizing people with obesity is accompanied by higher intensity of the sense of coherence, more adequate self-esteem and an ordered structure of values. The starting point of the studies was the assessment of the levels of adaptive reactions in obese people and their types. The main accent of the studies, however, was laid on seeking the relations between so-obtained levels of adaptive reactions and particular indicators of psycho-social functioning in the studied groups. The levels of the sense of coherence, self-esteem and preferences of values in obese people and people within the weight norm were submitted to comparative analyses earlier. The assumed interaction of psycho-social resources in the adjustment process of chronically ill people and in building their health suggests that in the dimension of obesity





those relations do take place, if only because of the need to set in motion a greater number of individual and social resources in struggling with the limitations of the disease.

It was proved that the analyzed variables occurred in close relationships, where both the established structures of the sense of coherence and self-esteem as well as the preferred values could be the factors which promote triggering the adequate adaptive configurations and their types, and vice versa. The summaries included at the end of each empirical chapter were not limited only to a presentation of the results of studies although not infrequently did the undertaken problems find an adequate scientific interests. The results of studies confirmed the appearing tendencies and regularities, at the same time showing the essence and character of relations between the analyzed variables of personal resources in the studied persons with obesity. It should be expected that the aim of studies was achieved, which is conformed above all in the complexity of the problems and the adequacy of the choice of psycho-social factors conditioning the preference of one of the adjustment types by obese persons. The obtained results were not always compatible with the expectations or the outlined concept, most frequently following from the analysis of the theory and observations as well as practical knowledge. This especially concerns the typology of psycho-social adaptation, the share of demographic and social variables in it and the relations between the variables of the sense of coherence, self-esteem and the system of values. The results in the other aspects of the undertaken problems may sometimes seem controversial, thus becoming the starting point for arguments and discussions, and leaving a broad field for explications. The adopted model of analyses revealed a number of difficulties concerning interpretation, especially so because the observed phenomena were not always reflected in the literature of the subject. The obtained results can become the basis to extend the knowledge on psycho-social functioning of obese people and to be useful in practical organization and realization of various forms of individual and group therapies aimed to develop individual and social resources in people with obesity which take part in the process of coping with illness and its negative consequences. One of the more profitable social investments in fighting obesity may be health education in the field of sensible nutrition and broadly understood hygiene. From the very young years, apart from teaching a healthy and active lifestyle, a positive attitude of young people should be built towards themselves and their bodies, basing on the rational life orientation and system of values. Results of studies presented here may prove especially useful to the institutions and people dealing with the health state and with programming health care in the sphere of a pro-health lifestyle, including prevention of overweight and obesity.



Apart from being the author and a co-author of monographs, I include in the main area of my scientific and research interests a series of scientific articles in journals and chapters in monographs concerning educational aspects of psycho-social functioning of people with eating disorders, overweight and obesity. Within this field, studies were conducted on personality and social correlates of the sense of life quality in anorectic and bulimic women, aiming at seizing a relation between the quality of life and self-esteem, ways of coping with problems and social support. The obtained results indicated a lower global sense of the quality of life, a lower sense of satisfaction and a sense of affiliation and integration with the community of women with eating disorders. The analysis of data collected by means of Fitts' Self-Concept Questionnaire proved that anorectic and bulimic women present a profile of self-esteem differing from that achieved by women without those disorders since they were characterized by a tendency towards being defensive, showing themselves in a more favourable light and concentrating themselves on themselves as well as affirmation of their positive features. They attached great importance to their figure and body weight as well as the state of health, fitness and the moral-ethical side of their personality. In social situations they revealed a tendency to defensiveness and withdrawal, indecisiveness or passivity in action. Results of the Ways of Coping Questionnaire by Folkman and Lazarus showed that in a difficult situation women with eating disorders presented a tendency to withdrawal, social isolation and to reduce the emotional tension by going into extremes. As proved by the analysis of results obtained on the basis of the Norbeck Social Support Questionnaire, women with anorexia and bulimia nervosa obtained smaller than expected emotional support, affirmation and material and aid support.

The subject of the empirical analysis were the issues related to the sense of coherence in girls and young women with eating disorders studied by means of Antonovsky's Orientation to Life Questionnaire. The pilot studies showed that girls with anorexia and bulimia nervosa were characterized by low global self-esteem and a low sense of manageability, comprehensibility and meaningfulness, which does not promote pro-health behaviours and thus can cause a worse health condition and make the treatment more difficult. The sense of coherence, and well as its component, did not differentiate the girls with a different form of eating disorders, which points to similar resistance resources and adaptive possibilities. The conducted research explorations also referred to the relation between the sense of coherence and self-esteem in women with eating disorders as measured by the Rosenberg Self-Esteem Scale as well as baseline values and meta-values assessed by means of the Portrait Values



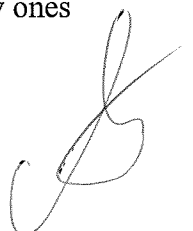
Questionnaire by Schwartz. The obtained results point to negative relations between the global sense of coherence and its particular dimensions and self-esteem in women with bulimia nervosa. The adopted hypothetical assumptions concerning the relations between the sense of coherence and its dimensions on the one hand, and preferences of baseline values and meta-values, on the other in women with anorexia and bulimia were confirmed in the course of analyses I conducted. To give an example, in the group of anorectic women negative correlations occurred between the global SOC, the sense of manageability and the value of hedonism. An increase in SOC in anorectic women was connected with a decrease of independence in thinking and acting (self-direction) associated with a need for success and competences as well as a need for control over oneself and the environment. The relation between the sense of manageability and the value of hedonism in the group of bulimic women took a reverse direction, namely the ability to assess the internal and external resources as sufficient to cope with the requirements of each situation and achieve the aims was connected with an increase in the satisfaction of one's own, above all organic needs. In bulimic women, an increase of resistance resources and adaptive possibilities as well as cognitive control over the environment (comprehensibility) was connected with an increased demand for stimulation, searching for novelties and challenges of life and a smaller attachment to the importance of customs and socio-cultural norms. In the group of women with bulimia, significant relations also occurred between the sense of manageability and achievements, stimulation and tradition. The last dimensions of the sense of coherence, also called the sense of life from the emotional and motivational point of view, was linked in anorectic women to a decrease of independence in thinking and acting (self-direction) as well as controlling the social unacceptable actions and tendencies (e.g. connected with eating or controlling the body weight). The sense of meaningfulness in bulimic women was connected with a higher inclination to seek novelties and challenges, a need to achieve successes and decreased acceptance of customs and socio-cultural norms (e.g. referring to the appearance or body weight).

Pilot studies were also conducted the aim of which was to determine the system of values in women with eating disorders versus the group of comparison. The analysis of the hierarchy of values showed that women with anorexia and bulimia were different from women without those disorders in a higher assessment of the value of self-direction and a lower preferential value of hedonism. The differences within the group concerned the values of self-direction, stimulation, hedonism, achievement, benevolence, conformity, tradition and security. Women



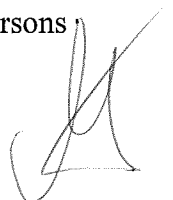
with anorexia assessed such values as conformity, which occupied the first place in the hierarchy, and then self-direction, benevolence and achievement significantly higher. Women with bulimia, on the other hand, preferred the values of benevolence and security while having a lower assessment of achievement, tradition and stimulation, the latter occupying the last place in the hierarchy. Besides, women with anorexia differed from bulimic women by a significantly higher assessment of the meta-value of strengthening "I". On the other hand, bulimic women attached significantly greater importance to the meta-value of surpassing their "I", as compared to women with anorexia.

Analyses were also conducted on the specific character of coping in stressful situations using the Coping Inventory for Stressful Situations by Endler and Parker and on the relations of stress coping styles with the sense of coherence and self-esteem studied by means of the Multidimensional Self-Esteem Inventory (MSEI) by O'Brien and Epstein, and with the sense of control using the Questionnaire for sense-of-control assessments (Delta) by Drwal. As shown by initial studies, women with eating disorders much more often than healthy ones used the emotional style in coping with stress, while using the task-oriented style much more rarely. In stressful situations, women with eating disorders got engaged in displacement activities, whereas healthy women sought support in others. Stress coping styles distinguished the forms of eating disorders. Anorectic women used the task-oriented style in coping with stress significantly more often. Persons with bulimia more frequently used the avoidant style, which consists in getting involved in displacement activities and in seeking social support. Determination of problem coping styles in people with eating disorders seems especially important from the point of view of the undertaken prophylactic activities as well as planning and applying different methods and forms of therapy. The studies partly confirmed the adopted hypotheses on the relations between stress coping ways and the sense of coherence in the studied women. In bulimic women, the task-oriented style correlated positively with the sense of comprehensibility, while the emotional style was negatively connected with the global sense of coherence and its dimensions. The avoidant style of coping with stress in the form of getting involved in displacement activities in bulimic women was negatively related to the sense of comprehensibility and meaningfulness as well as global SOC. The analyses also showed a number of significant relations between stress coping styles and self-esteem in women with anorexia and bulimia nervosa – both its global level and self-evaluation concerning specific aspects of their functioning and the assessment of coherence of the self-picture and a need for social acceptance. Women with anorexia differed from the healthy ones



in a significantly higher external locus of control. In stressful situations, they used the emotional style significantly more often, while using the task-oriented and avoidant styles in the form of seeking support in others. The external locus of control in the group of women with anorexia correlated positively with the emotional and avoidant styles in the form of getting involved in displacement activities, and negatively with the lie scale. Preliminary studies constituted the basis for further analyses aimed to seek the relation between the sense of locus of control and other dimensions of psycho-social functioning of women with eating disorders.

The main area of research interests also includes publications referring to the family space in the development of eating and nourishing disorders in children, violence in the families of persons with abnormal appetite and body weight, as well as artistic expression in the diagnosis and therapy of eating disorders. Theories and models of different authors, referring to family determinants in the etiology of eating disorders in children and youth, were presented, focusing on the following patterns of relations and multi-generational ways of functioning: family bonds of centripetal character, all contacts with the outside world under the family's control, the sense of the family bond, loyalty and child protection more important than the child's autonomy, individualization (referring to the ability to show the inner world by means of clearly expressed feelings, needs, expectations, inner beliefs and outside behaviours) and self-realization, affirmation of the norms related to education and social position within the family, parents treating closeness and marital bond as less important than the level of pedagogical competences, mothers' sacrifice for the family, arousing the feeling of guilt in family members, which is a binding element making it more difficult for children to become independent, interpersonal relations in a nuclear family resulting from passing patterns of relations and the system of trans-generational beliefs. The appearance and development of eating and nourishment disorders might also have a relation to violence experienced in the family. It can take a variety of forms: physical, psychical or sexual violence. Experiencing sexual abuse in childhood or early youth is related to the occurrence of anorexia and bulimia nervosa or binge eating, leading to obesity or auto-aggressive behaviours. Eating disorders are also connected with physical violence experienced in the early period of development. It leads to impulsive behaviours, abuse of psychoactive substances and to self-injuries. It was also shown that emotional harm is related to appetite disorders, overweight, obesity and co-occurrence of different disease states as well as abuse of psychoactive substances, suicidal attempts or self-injury. The necessary condition for persons



with eating disorders to return to health is understanding the mechanism of the disorders and effectively working through the consequences of violence experienced in childhood or early youth. Apart from the basic therapy, various forms of artistic expressions can be used in the process of treating eating disorders. These forms include drawing techniques, relaxation and kinesthetic techniques, projection techniques, dance therapy, gestalt therapy and psychodrama. Properly included in the basic therapy, they might prove extremely effective both in the diagnosis and therapy of people with appetite disorders and wrong body weight.

Below publications from the field of educational aspects of psycho-social functioning of people with eating disorders, overweight and obesity are presented:

1. Wiatrowska, A. (2009). Jakość życia w zaburzeniach odżywiania. Lublin: Wydawnictwo UMCS, pp. 169.

Wiatrowska, A. (2006). Analiza strukturalnych aspektów poczucia jakości życia dziewcząt z kliniczną postacią zaburzeń odżywiania. In: Z. Palak, A. Lewicka, A. Bujnowska (eds.), Jakość życia a niepełnosprawność. Konteksty psychopedagogiczne. (pp.257-265). Lublin: Wydawnictwo UMCS.

Wiatrowska, A. (2006). Poziom wsparcia społecznego dziewcząt z anoreksją i bulimią psychiczną. *Annales UMCS, Sectio J Paedagogia-Psychologia*, vol XIX, pp. 199-209.

Wiatrowska, A. (2007). Rola nauczyciela w profilaktyce zaburzeń odżywiania. In: Z. Bartkowicz, M. Kowaluk, M. Samujło (eds.), Nauczyciel kompetentny. Teraźniejszość i przyszłość (pp.406-412). Lublin: Wydawnictwo UMCS.

Wiatrowska, A. (2008). Obraz siebie w zaburzeniach odżywiania. In: A. Bochniarz, J. Bogucki, A. Grabowiec (eds.), Zdrowa szkoła - zdrowy uczeń. Teoria i praktyka edukacji zdrowotnej. Wybrane zagadnienia (pp. 243-248). Lublin: Wydawnictwo NeuroCentrum.

Wiatrowska, A. (2013). Poczucie koherencji dziewcząt z anoreksją i bulimią psychiczną. In: A. Wiatrowska, A. Bieganowska, A. Witek (eds.), Problemy żywieniowe dzieci i młodzieży. Wydanie specjalne (pp. 276-294). *Lubelski Rocznik Pedagogiczny XXXII*. Lublin: Wydawnictwo UMCS.

Wiatrowska, A. (2013). Zasoby osobiste kobiet z bulimią psychiczną. *Zeszyty Naukowe WSS-P im. Wincentego Pola w Lublinie. Pedagogika Specjalna*, Vol. 16, pp. 197-213.

Wiatrowska, A. (2015). Przestrzeń rodzinna w etiologii zaburzeń odżywiania u dzieci. In: T. Parczewska (ed.), Przestrzenie dziecka i dzieciństwa. Wielość perspektyw i znaczeń (pp. 179-194). Lublin: Wydawnictwo UMCS.

- Wiatrowska, A. (2016). The analysis of metavalues of women with anorexia and bulimia nervosa. (In:) M. Chepil, A. Żukowska, O. Karpenko (ed.), In the sphere of education and artistic work (pp. 174-183). Drohobych.
- Wiatrowska, A. (2016). A hierarchy of values of people with eating disorders. Людинознавчі студії. *Педагогіка, Вип. 3/35*, с. 64-73.
- Wiatrowska, A. (2017). Poczucie koherencji a wartości podstawowe u kobiet z anoreksją i bulimią psychiczną In: A. Tychmanowicz (ed.), Duchowość i zdrowie psychiczne. *Annales. Sectio J. Paedagogia-Psychologia*, Vol. XXX, 1 (pp.147-160). Lublin:Wydawnictwo UMCS.
- Wiatrowska, A. (2016). Radzenie sobie ze stresem u osób z zaburzeniami odżywiania. In: A. Tychmanowicz (ed.), Duchowość i zdrowie psychiczne. *Annales. Sectio J. Paedagogia-Psychologia*, Vol. XXX, (pp.160-171). Lublin: Wydawnictwo UMCS.
- Wiatrowska, A. (2017). Związek poczucia koherencji z system wartości u osób z zaburzeniami odżywiania. *Lubelski Rocznik Pedagogiczny XXXV*, 3 (pp. 339-351). Lublin: Wydawnictwo UMCS.
- Wiatrowska, A. (2017). Life orientation and preferences of meta values in women with anorexia and bulimia nervosa. Людинознавчі студії. *Педагогіка, Вип. 4*, с. 33–43.
- Wiatrowska, A. (2017). Radzenie sobie ze stresem a poczucie koherencji u kobiet z żarłocznością psychiczną – badania wstępne, In: A. Tychmanowicz (ed.), Wybrane aspekty funkcjonowania osób dorosłych w rolach zawodowych i społecznych. *Annales. Sectio J. Paedagogia-Psychologia*, Vol. XXX, 3. Lublin: Wydawnictwo UMCS.
- Wiatrowska, A. (2017). Poczucie umiejscowienia kontroli a radzenie sobie ze stresem u kobiet z jądłowstrętem psychicznym – badania wstępne, In: A. Tychmanowicz (ed.), Wybrane aspekty funkcjonowania osób dorosłych w rolach zawodowych i społecznych. *Annales. Sectio J. Paedagogia-Psychologia*, Vol. XXX, 3, (pp.149-148). Lublin: Wydawnictwo UMCS.
- Wiatrowska, A. (2017). Przemoc a występowanie zaburzeń jedzenia i odżywiania się, In: A. Lewicka-Zelent (ed.), Przemoc rodzinna. Aspekty psychologiczne, pedagogiczne i prawne (pp. 199-207). Warszawa: Wydawnictwo Difin.
- Wiatrowska, A. (2017). Ekspresja artystyczna w diagnozie i terapii zaburzeń odżywiania. In: W. Bobrowicz, A. M. Żukowska (eds.), Edukacja artystyczna a kształcenie postawy kreatywnej (pp. 143-151). Lublin: Wydawnictwo UMCS.



Wiatrowska, A. (2018). Style radzenia sobie ze stresem a samoocena kobiet z zaburzeniami odżywiania. In: A. Wiatrowska (ed.), *Problemy edukacji zdrowotnej. Historia i współczesność* (pp. 255-270), *Annales. Sectio J. Paedagogia-Psychologia*, Vol. XXXI, 2. Lublin: Wydawnictwo UMCS.

## 5.2. Life quality and threats to the health of children, youth and adults

The area of interests and scientific-research achievements referring to the quality of life and threats to the health of children, youth and adults includes two collective works, chapters in monographs and scientific articles in journals:

1. Wiatrowska, A., Bieganowska, A., Witek, A. (eds.) (2013). *Problemy żywieniowe dzieci i młodzieży*. Wydanie specjalne. Lubelski Rocznik Pedagogiczny, vol 32, pp. 390.

2. Wiatrowska, A. (ed.) (2018). *Problemy edukacji zdrowotnej. Historia i współczesność*. *Annales UMCS. Sectio J*, vol 31(2), pp. 345.

3. Wiatrowska, A., Gindrich, P. (2007). *Specyfika depresji a trudności w uczeniu się młodzieży gimnazjalnej*. *Annales UMCS, Sectio J Paedagogia-Psychologia*, vol XX, pp. 189-194.

4. Wiatrowska, A. (2008). *Poczucie jakości życia badanej młodzieży (beneficjentów projektu „Szkoła równych szans. Programy rozwojowe dla szkół z zakątków Lubelszczyzny”)*. In: M. Ogryzko-Wiewiórowska (ed.), *Szkoła równych szans. Wyrównywanie szans edukacyjnych w szkołach z zakątków Lubelszczyzny* (pp. 131-145). Lublin: Wydawnictwo Perfekta Info.

5. Wiatrowska, A. (2014). Jakość życia a radzenie sobie w sytuacjach trudnych osób z uzależnieniem alkoholowym. In: B. Balogova, D. Soltsova (eds.), *Vplyv sirsieho socialneho prostredia v procese integracie deti z detskeho domova* (pp. 89-108). Trebisov.

6. Wiatrowska, A. (2015). Wybrane zachowania zdrowotne dzieci w wieku szkolnym. In: M. Czepil, R. Bednarz-Grzybek, M. Hajkowska (eds.), *Janusz Korczak przyjaciel dzieci. W nurcie rozważań pedagogicznych* (pp.153–172). Lublin : Wydawnictwo UMCS.

A co-authored publication *Problemy żywieniowe dzieci i młodzieży. Wydanie specjalne* refers to wrong eating habits and attitudes, mainly resulting from parents' or guardians' health






motifs and beliefs and the omnipresent consumptive lifestyle. This frequently turns into a improperly balanced diet, where children consume excessive calories, undertake destructive attempts at decreasing the body weight, which can lead to eating disorders, overweight and obesity. A significant role in preventing these threats is played by the family, while school should be the supportive environment undertaking preventive, educational and pedagogical activities. The publication refers to the following areas of subjects: school and teacher in shaping eating behaviours, education, care and eating disorders, diagnosis and therapy of eating disorders, health and psycho-social conditionings of eating disorders and incorrect body weight. The publication *Problemy edukacji zdrowotnej. Historia i współczesność* is composed of two parts. The first is devoted to health and educational problems from the historical point of view, the other deals with contemporary issues referring to health and education. The authors of the texts are scientists representing the most important areas from the field of health education, health promotion, disease prevention and treatment, and publicistic activity in spreading the hygiene and health problems. In the light of theoretical considerations and empirical studies, it seems important to undertake an interdisciplinary discussion on a variety of planned educational activities, disease prophylaxis and behaviours risking health, on improvement of one's own and others' health, determining the role of the family, school, educators and psychologists in the scope under discussion. The next publications are focused on selected health behaviours of children of young school age, on co-occurrence of depression with learning problems in secondary school youth, on the sense of the quality of life in adolescents and their relations with coping in difficult situations among children and youth in foster families with alcohol addiction. It was proved that a tendency to use diets was twice as often shown by girls than boys, the former being more critical in assessing their own body. A negative phenomenon in eating behaviours of children of younger school age was a common phenomenon of skipping breakfast, consciously giving up different forms of activity, excessive consumption of sweets and sweet fizzy drinks, reaching out for alcohol, tobacco or drugs. In the light of the above mentioned results, it is important to spread information on the specific character of problems associated with addiction in children and youth, to undertake effective and decisive actions based on education, to strengthen individual protective factors and directing a concrete educational and informative campaign to parents and guardians. No differences were shown in intensification of depression in the youth with learning problems. This referred to the studied girls and boys. A significant difference was found only in intensification of depression symptoms between boys and girls.



without any learning problems in the sphere of melancholy, which might results from individual differences in the sphere of values attributed to definite achievements. The analysis within the groups and between the groups of the structural aspects of the sense of the quality of life among primary and secondary school students as measured on the basis of the Schalock & Keith Quality of Life Questionnaire revealed differentiated results within particular categories. The obtained results are an important aspect of the experiences of adolescents and their assessment of well-being in the sphere of their own physical, psycho-social, material and existential dimensions, aimed to answer the question about what lies at the basis of valuable and satisfying existence. Besides the cognitive aim, the present studies were clearly of practical character, following from the assumption that raising the quality of life may limit the negative factors affecting the quality of somatic and psycho-social life of individuals. Studies on the quality of life of alcohol abusing adolescents showed that alcoholic disease lowers the sense of the quality of life of the sick person, having the greatest influence on the sense of satisfaction with life and not affecting the sense of ability and productivity, the possibility of activity and independence as well as the sense of membership and social integration. Alcoholic disease affects the choice of problem coping strategies as the addicted persons prefer the emotion-oriented strategies of coping with difficulties, at the same time trying to undertake activities directed at planned solutions of their problems. It was found out that the sense of life satisfaction in addicted adolescents influences the positive attitude towards the appearing difficult situations, a decreased tendency to withdraw, blame oneself and reduce the tension through extreme forms of behaviour as well as increased activity and determination in undertaking constructive activities.

## **6. Realization of research projects**

Vice-coordinator for educational matters in a research project financed from the means of ESF within the Operational Programme Efficient Human Resources 2004-2006: Priority 2. Development of knowledge-based society, Activity 2.1. Increased access to education – promotion of lifelong education, title of project: *Szkoła Równych Szans. Programy rozwojowe dla szkół z zakątków Lubelszczyzny*. The project was realized between 1 January, 2007 and 6 March, 2008. The scope of activities, duties and responsibilities referred to the pedagogical aspects of the project, cooperation with the Chairman of the Program Council, supporting the subject-matter activities and initiatives within the project plus conducting trainings, workshops, consultations and counsel. Participation in the work of the Education Team for



Security of the Committee on Pedagogical Sciences of the Polish Academy of Sciences, since January 2017 a member of the sub-team *Współczesne zagrożenia zdrowotne w ocenie młodzieży*. Conducting studies and undertaking cooperation with representatives of different academic centers in Poland within the project: *Młodzież wobec współczesnych zagrożeń w życiu społecznym*, which will result in a report from its realization to be presented in April 2019.

## 7. Scientific conferences

Organization of 3rd National Scientific Training Conference: *Zdrowa Szkoła - Zdrowy Uczeń. Nawyki i postawy żywieniowe dzieci i młodzieży*, Lublin 27-28 September, 2012 (scientific-organizational team J. Kirenko, A. Wiatrowska, A. Bieganowska, A. Witek). Participation in international and national scientific conferences and interdisciplinary symposia of interdisciplinary character, where representatives of different scientific centers took part. Examples include the International Scientific Conference entitled „*Psychopedagogiczne problemy edukacji i funkcjonowania człowieka – teoria i praktyka*”, organized by the Department of Education and Psychology UMCS in Lublin on 26-27 November, 2015, International Interdisciplinary Scientific Symposium entitled „*Edukacja estetyczna w ramach kształcenia postawy kreatywnej*”, Lublin-Lviv 15-17 May, 2015, International Scientific Conference entitled „*Edukacja – Technika – Informatyka*”, organized by the University of Rzeszów on 24-26 September, 2018, National Scientific Conference with the participation of foreign guests, title: „*Interdyscyplinarne konteksty współczesnej pedagogiki i psychologii*”, organized by the Department of Education and Psychology UMCS in Lublin on 25-26 October, 2018. Conducting the panel and active participation in the 4<sup>th</sup> National Scientific Conference for students and doctoral students within the cycle *Biografie codzienności*, with the leading subject “*Kobieta nauczycielką życia – biografie (nie)zwykłe*”, organized by the Department of Pedagogical Biographical Studies John Paul II Catholic University of Lublin and the Foundation „*Biografie Codzienności*” and the National Scientific Conference: „*W trosce o zdrowie psychiczne dzieci i młodzieży. Uwarunkowania, przyczyny i skutki depresji*”, which took place in Jarosław on 13 April, 2018.

## 8. Doctoral supervision as a scientific supervisor or auxiliary supervisor

Auxiliary supervisor in doctoral proceeding of Sylwia Huczuk-Kapłuk, M.A., title of dissertation „*Efektywność programu wspierającego funkcjonowanie nieletnich w rodzinie*”, and Agnieszka Pytko, M.A., title of dissertation „*Efektywność programu readaptacji*”



*społecznej osób skazanych w okresie przygotowania do opuszczenia zakładu karnego*". Doctoral dissertations were written under the scientific supervision by UMCS Professor, Doctor Habilitated Agnieszka Lewicka.

### **9. Editorial reviews**

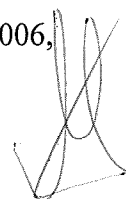
Editorial review of the book by Janowski, K., Chwaszcz, J., Czajka, I., Gałkowska-Jakubik, M., Wiechetek, M., Wiechetek M. (2006). *Stop przemocy w szkole! Podręcznik programu profilaktycznego*. Lublin: Wydawnictwo Gaudium, recommended and partly financed by the Ministry of National Education. Preparation of a review of a monograph: Kirenko, J., Zubrzycka T. (2011). *Współczesny nauczyciel. Studium wypalenia zawodowego*. Lublin: Wydawnictwo UMCS in the journal *Lubelski Rocznik Pedagogiczny* No. XXXI, Lublin 2012 (pp. 182-186), Wydawnictwo UMCS.

### **10. Scientific internships in foreign and national scientific and academic centers**

Scientific internship at the Drohobych State Pedagogical University of Ivan Franko in Ukraine in the period from 29 August to 30 September 2016. The aim of the internship was to get to know the organization of education and professional upgrading training of teachers and the functioning of different (aiding, caring, resocialization or therapeutic) institutions, exchange of experiences in this sphere, establishing scientific cooperation. Appearance at the scientific seminar organized by the University, giving a series of lectures associated with the problems of eating disorders and nourishment. A scientific tutor of the internship of scientific workers of the Drohobych State Pedagogical University of Ivan Franko at the Department of Education and Psychology UMCS in Lublin in the period from 2 to 15 April, 2017. The program of the internship included, among other things, participation in workshops, trainings and lectures, visits in educational, aiding or therapeutic institutions, meetings with the workers and students in order to exchange experiences and establish scientific cooperation.

### **11. Didactic and pedagogical activity**

Preparation and realization of post-graduate studies: „*Wychowanie do życia w rodzinie*” co-financed from the means of ESF within the Operational Programme Efficient Human Resources 2004-2006 (a team composed of the workers of the Institute of Education, Psychology and Sociology UMCS in Lublin). Conducting classes within the project: „*Zmiana przez Zdrowie. Szkolenia dla pracujących z grupami szczególnego ryzyka*” co-financed from the means of ESF within the Operational Programme Efficient Human Resources 2004-2006,



realized from 1 March, 2007 to 31 January, 2008. Preparation of a general development module and program content: „*Doradztwo zawodowe. Autoprezentacja z emisją głosu. Trening twórczego myślenia i rozwiązywania problemów*” within the project: „Wiedzieć znaczy móc. Szkolenia mające na celu podniesienie potencjału zawodowego osób pozostających bez zatrudnienia na lubelskim rynku pracy”, co-financed from the State Budget and ESF. Conducting a training in evaluation and subject-matter accounting of developmental programs of primary and secondary schools within the project: „*Szkoła Równych Szans. Programy rozwojowe dla szkół z zakątków Lubelszczyzny*”, co-financed from the means of ESF, organized on 12 September, 2007.

Supervising about 40 M.A. theses at part-time studies: Pedagogy, Social work, Pre-School and Early-school Pedagogy. Preparing reviews of a few tens of M.A. theses at different directions of the Department of Education and Psychology UMCS in Lublin. Conducting classes and lectures in pedagogical and psychological preparation for work in primary and secondary schools at teacher training studies of the University and organizing pedagogical internships. Teaching a variety of subjects at the Department of Education and Psychology (e.g. introduction to pedagogy, pedagogy, general pedagogy, health education, health hazards, educational psychology, developmental psychology) and facultative classes in prophylaxis and diagnosis and therapy of eating disorders. Using activating methods of teaching and learning techniques increasing learning efficiency.

The function of a tutor of full-time and part-time studies at: 1) Pedagogy 1<sup>st</sup> degree, academic year 2005/2006; 2) Pedagogy 2<sup>nd</sup> degree, academic years 2007/2008, 2008/2009, 2013/2014, 2016/2017. The function of coordinator of the department for cooperation with outside stakeholders in the academic year 2016/2017.

## **12. Organizational and popularizing activity**

A member of the Faculty Recruitment Commission for 1<sup>st</sup> year of full-time/part-time studies, Pedagogy, in the academic year 2007/2008. Secretary of the Faculty Recruitment Commission for 1<sup>st</sup> year of full-time/part-time studies, Pedagogy, in the academic year 2008/2009. Participation in a cycle of broadcasts in the academic “Radio Centrum” Lublin devoted to the problems of eating disorders and techniques of effective learning and remembering. Subject-matter partner of the Polish National Center for Eating Disorders, realized within the foundation of Professor K. Twardowski Center of Supporting Social Initiatives.

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