

Written evidence submitted by The Centre for Appearance Research (BYC055)

The Centre for Appearance Research

The Centre for Appearance Research (CAR) is based at the University of the West of England (UWE) in Bristol and is the world's largest group of researchers focusing on the role of body image and appearance in people's lives. CAR strives to make a real difference to the lives of the millions of people with appearance-related concerns both in the United Kingdom and across the world. CAR is internationally regarded as a centre of excellence for psychological and interdisciplinary research in appearance, disfigurement, body image and related studies.

Dr Phillipa Diedrichs is a research health psychologist with an international reputation for creating and using evidence-based strategies to improve body image in community, education, corporate, and policy settings on a local, national, and global scale. As an Associate Professor she leads a team of researchers investigating psychological and social influences on body image, and the development and evaluation of online and face-to-face body image interventions, advocacy efforts, and campaigns. The evidence-based body image programmes that she has co-created and evaluated are delivered in 136 countries through multi-stakeholder partnerships. Her research has garnered international media attention and awards, and is published in esteemed, academic peer-reviewed journals. Dr Diedrichs regularly consults with businesses, agencies, and organisations on research, communications, campaigns, and advocacy. She has advised and worked on projects alongside the British Government Equalities Office, Unilever's Dove Self-Esteem Project, Transport for London, YMCA, the World Association for Girl Guides and Girl Scouts, Edelman, and Ogilvy.

Dr Amy Slater is a Senior Research Psychologist in the Centre for Appearance Research. Her research interest lies in the area of body image, specifically body image in adolescents and children. Within this she is interested in the role of sociocultural factors (such as the media) in the development of body image concerns. Her recent work (with Marika Tiggemann) has focused on the role of the Internet and in particular social networking sites (such as Facebook) in the body image of adolescent and pre-adolescent girls. A further research area is exploring the issue of the premature sexualisation of girls. She also has an interest in the role of parenting in sexualisation and body image concerns of young children. Dr Slater completed her PhD in Clinical Psychology at Flinders University (Adelaide, South Australia) in 2006. Her thesis focused on gender differences in sport participation in adolescents and the role of body image within this. Specifically, she investigated why girls drop out of sports at a much higher rate than boys during early adolescence, and whether body image concerns play a role. Dr Slater is also a registered psychologist experienced with working with children and adolescents in both community and hospital settings. She has worked with children and families with speech and language difficulties, developmental delay, attachment and relationship concerns, autism, post-traumatic stress disorder, sleep disorders and chronic illnesses such as diabetes and cancer.

Groups affected by body image issues

1. Are particular groups of young people particularly prone to poor body image, or less likely to be offered or seek help with poor body image? What causes these trends?

Scientific research has identified that specific groups of people may be at greater risk for poor body image:

- Boys and young men experience body image concerns, however, girls and young women tend to experience higher levels of concern (e.g., Buccianeri et al., 2013).
- People who strongly identify with traditional gender roles of femininity and masculinity are more likely to have poor body image (e.g., Griffiths, Murray & Touyz, 2015).

- Sexual minority youth (e.g., gay, lesbian, bisexual young people) are more likely to experience poorer body image and associated disordered weight-control behaviours than heterosexual young people (e.g., Austin et al., 2013; Calzo et al., 2013; Calzo et al., 2015).
- Transgender and gender non-conforming people are more likely to experience poorer body image than cisgender individuals (e.g., Jones, Haycraft, Murjan & Arcelus, 2016).
- People who have a tendency to internalise (or cognitively ‘buy into’) cultural beauty ideals and compare their appearance to others are more likely to experience body image concerns (e.g., Rodgers, McLean & Paxton, 2015).

There is conflicting evidence regarding body image differences between ethnic groups. Some studies have found that minority ethnic groups (e.g., Asian and Black girls) tend to report poorer body image than White individuals, however, this research has predominantly been conducted in the United States (e.g., Bucchianeri et al., 2013). Alternatively, other studies have reported minimal differences between ethnic groups (e.g., Ricciardelli, McCabe, Williams & Thompson, 2007; Wildes, Emery & Simons, 2001). Nonetheless, there is evidence of poor body image being present across ethnic groups.

Studies suggest that some young people who have a condition that affects their appearance (e.g., cleft lip/palate, burns, skin conditions like psoriasis, hair conditions like alopecia) may experience higher levels of body image concerns than those without a visible difference. However, other studies suggest that young people can cope well and are not adversely affected by their visibly different appearance. As a result, experts recommend that it is important to remember that we cannot judge a person’s body image by how they look (Rumsey & Harcourt, 2007, 2012).

2. In relation to young men and boys, minority ethnic groups, and those who self-identify as transgender: what are the specific challenges facing young people in these groups?

Males:

Traditional masculinity promotes the idea that boys and men must be strong, silent, and unemotional when it comes to issues such as mental health, well-being, and body image (Lee & Owens, 2002). Furthermore, body image has traditionally been viewed by society as an issue for girls and women only. This is despite scientific research showing that between 30-70% of boys and young men experience body image concerns from as young as three years of age (e.g., Al Sabbah et al., 2009; McCabe, Mellor & Mealey, 2016). As a result of social pressures for males to conform to these ideas about masculinity, some boys and young men might be reluctant to admit to having body image concerns or to seek help (Hargreaves & Tiggemann, 2006).

Additionally, boys and men may manifest body image concerns in ways that are different to girls and women. For example, while girls will tend to aspire to being very thin, boys often aspire to leanness as well as muscularity (Calzo et al., 2013).

Gender non-conforming youth:

Gender non-conforming youth are more likely to face abuse, bullying, and stigma compared to cisgender populations (Roberts et al., 2013). This may contribute to body image concerns, particularly as their appearance may be perceived as different to the ‘norm’.

Minority ethnic groups:

Some ethnic groups may face unique body image concerns and pressures in relation to skin colour, hair, and facial features. For example, some beauty ideals perpetuate the idea that lighter skin is more attractive than darker skin. This reinforces racist attitudes and can harm the body image of young people with darker skin tones (Craddock, 2016).

3. Do existing campaigns and initiatives to promote positive body image sufficiently take into account the different challenges faced by young people with particular characteristics?

There is limited research examining how the impact of campaigns work for different groups of people. Rather, research tends to evaluate groups of people, and rarely looks at whether the effectiveness of these campaigns and initiatives varies for different ethnic, gender, or other groups.

However:

Some research suggests that body image programmes delivered in schools and community settings may be more effective for girls compared to boys. This could be because most programmes have been developed with girls in mind, and more is understood about the nature, influences and consequences of body image among girls (Yager, Diedrichs, Ricciardelli & Halliwell, 2013; McCabe, Connaughton, Tatangelo & Mellor, 2017).

Researchers, psychologists and other body image experts are beginning to develop and evaluate body image programmes among mixed-gender groups (e.g., Dunstan, Paxton & McLean, 2016), boys (e.g., Bird, Halliwell, Diedrichs & Harcourt, 2013; McCabe, Connaughton, Tatangelo & Mellor, 2017) and men (e.g., Jankowski et al., under review), sexual minority groups (e.g., Brown & Keel, 2015), and ethnic minority groups (e.g., Rodrigues, Marchand, Ng & Stice, 2008).

Studies show that effective body image programmes target influences on body image identified in the scientific literature (e.g., media literacy, challenging appearance ideals, teasing about appearance, fat talk and conversations about appearance, body acceptance) are participant-led, and are able to incorporate individuals' unique ideas about what beauty ideals they aspire to, or the body image challenges they face (Alleva et al., 2015; Yager, Diedrichs, Ricciardelli & Halliwell, 2013).

The internet, social media and messaging

4. Has the growing use of social media and communications platforms amongst young people encouraged practices and attitudes that entrench poor body image? What is the link between "sexting" and body dissatisfaction?

Social media platforms (such as Facebook, Instagram and Snapchat) present a unique combination of media and peer interaction factors that make them a potentially potent environment for arousing body image concerns in young people. There are a number of elements of the social media environment that have the potential to heighten appearance concerns. For example, social media platforms are highly visual settings which encourage users to create an online profile. This may introduce pressures to present oneself in a particular way, often an idealised version of one's self (Dunne, Lawlor, & Rowley, 2010). This could encourage risky behaviours, e.g., sharing sexualised content (Sarabia & Estevez, 2016).

Other important elements of the social media environment are the influence of peers as important sources of social comparison, and the 'interactive' or 'social' aspect of social media. Social media provides individuals with instant and numerous images of peers of which to compare oneself against. This increases the likelihood of comparison oneself to attractive others, which can result in negative self-evaluations (Perloff, 2014). The 'interactive' nature of social media may mean that young people are observing, engaging in, and receiving appearance-related talk and feedback (e.g., in the form of 'likes' and 'comments'). Peer feedback, both positive and negative, may act to reinforce the importance placed on one's appearance (Slater & Tiggemann, 2015).

A number of research studies provide evidence that overall time spent on Facebook is related to body image concerns and disordered eating in young women (e.g. Fardouly & Vartania, 2015; Mabe, Forney, & Keel, 2014) and in adolescent and pre-adolescent girls (Tiggemann & Miller, 2010; Tiggemann & Slater, 2013; Tiggemann & Slater, 2014). Further, it has been suggested that particular types of social media activities (such as sharing, viewing, and commenting on images) may be particularly important and be related to poorer body image (Meier & Gray, 2014; McLean et al., 2015).

A popular trend on Instagram in particular is 'fitspiration'. Fitspiration consists of images and messages that purport to motivate people to exercise and pursue a healthier lifestyle. However, research has shown

that fitspiration promotes a homogenous and unrealistic body shape (tall, lean, toned, and ‘perfectly proportioned’), and often contains guilt-inducing messages, stigmatises weight and body fat, and emphasises dieting and restrictive eating (Boepple et al., 2016; Boepple & Thompson, 2016; Tiggemann & Zaccardo, 2016). A recent experimental study showed that exposure to fitspiration images on Instagram is detrimental to body satisfaction (Tiggemann & Zaccardo, 2015). Women who were briefly exposed to fitspiration images were found to have increased body dissatisfaction and negative mood compared to women who were exposed to appearance-neutral (travel) images.

In young children, an experimental study has shown that girls who briefly played an online ‘dress-up’ game showed increased body dissatisfaction compared to girls who briefly played a game that did not focus on appearance (a restaurant game, Slater et al., 2017).

Very limited scientific research has explored the impact of sexting on body image. We are aware of only one very small-scale study with Swedish youth who have had more severe experiences of sexting and sexual abuse (see <http://www.mucf.se/publikationer/se-mig>). They report that this contributes to them feeling ashamed of their bodies. Researchers at the University of Gothenburg (Drs Carolina Lunde and Professor Ann Frisen) are currently conducting more research in this area. Nonetheless, there is a growing body of evidence that having poor body image may result in engagement in more risky sexual behaviours (e.g., unsafe sex) (Brown et al., 2014; Gholizadeh et al., 2017; Woertman & van den Brink, 2012).

5. Can the internet and social media be used as a tool to promote positive self-image? What examples are there of this happening?

To date, there has been less research that has considered the potentially positive aspects of the social media environment on body image. One potentially positive feature of social media is that its user-generated nature allows for the possibility of a wider variety of images and content than has been customarily transmitted via traditional media channels. For example, YouTube video bloggers (vloggers) are increasingly popular, suggested in part to be due to their perceived authenticity (Morris & Anderson, 2015; Tolson, 2010). Individuals who do not fit the dominant thin-ideal standard of beauty (e.g., ‘plus-sized’ women, who have very rarely featured in traditional media imagery), have also increased in visibility in the social media environment, for example in ‘body positive’ Instagram accounts. Showing ‘average-size’ models in traditional advertising images has been shown to promote positive body image as well as appeal to consumers (Diedrichs & Lee, 2011), so it is reasonable to conclude that the same may be true of images on social media.

A recent experimental study (Slater, Varsani, & Diedrichs, *in press*) showed that young women who viewed ‘self-compassion’ quotes on Instagram (e.g. “Be kind to yourself”, “You are beautiful no matter what shape you are”) showed improved body image and mood compared to women who viewed neutral Instagram images (interior design images). These initial findings suggest that there may be aspects of social media that might be useful in promoting a positive body and self-image.

A study currently in progress at the Centre for Appearance Research is examining the impact of following ‘positive body image content’ on Facebook on young women’s body image. It is hypothesised that following positive body image content (e.g., images and information that promote diversity in body shapes and sizes, and focus on body functionality rather than appearance) will improve body image.

There is also some evidence that brief videos on You Tube that aim to increase media literacy about airbrushing can result in short-term improvements to young girls’ body image. For example, a study found that viewing the Dove Evolution video showing the extensive make-up, styling, photographic, and digital retouching techniques used to create images commonly seen in advertising resulted in a brief improvement to adolescent girls’ body image (Halliwell, Easun & Harcourt, 2011).

Some policy-makers have suggested that adding warning or disclaimer labels to media images (e.g., “This image has been airbrushed”) might be helpful in reducing the body dissatisfaction that often accompanies

exposure to media images. However, a number of research studies have demonstrated that the addition of such warning labels are not effective in reducing body dissatisfaction (Bury et al., 2017; Bury et al., 2015; Tiggemann et al., 2013; Ata et al., 2013).

7. Does the Government have a responsibility to discourage the use of social media, the internet and communications platforms in ways which promote poor body image? What should it be doing in this regard?

Discouraging use of social media, the internet, and communications platforms is unrealistic given the widespread use of these media and evidence suggesting that, in some cases, social media and networking can be used to positively impact body image (see previous section). However, teaching young people how to use social media in a way that is safe and conducive to positive body image and general wellbeing is critical. Classroom-based media literacy programs are likely to be useful in this regard. Research is currently in progress to examine the effectiveness of one such programme for adolescent girls and boys in Australia (Paxton et al., in progress). Similar research is needed in the UK, although there is some evidence that existing classroom-based body image interventions which address social media alongside other topics are useful in improving body image (e.g., Atkinson, Diedrichs, Garbett & Leckie, 2017; Diedrichs et al, 2013). Governments could usefully focus on promoting these evidence-based interventions and including them in the curriculum for primary and secondary schools. Unfortunately, in the past Government has supported media literacy programmes that have not been evaluated sufficiently to determine if they are effective or not (e.g., MediaSmart) (Paraskeva, Diedrichs, Yager & Halliwell, 2013).

Better regulation of social media through bodies such as the Advertising Standards Authority may be useful and Government could support this. Unfortunately, most regulatory bodies currently only review problematic adverts that may cause negative body image on a case-by-case basis when the public makes complaints. This does not sufficiently address the potential harm caused by seeing a number of advertisements on a daily basis.

Education

8. What examples are there of schools integrating the promotion of positive body image into school subjects across the curriculum, particularly physical education? How successful have these been? How can success best be measured?

Effective evidence-based body image programs have been developed for primary and secondary schools. Evidence-based interventions are developed using the most up-to-date scientific research and are informed by the needs and opinions of teachers, students, schools, and other experts. They have also been rigorously tested in high quality research to demonstrate that they are effective in improving body image and are enjoyed by students and teachers.

Before being widely distributed to schools, body image programmes and initiatives should be evaluated in good quality research studies. This involves using standardised validated measures and tools to assess body image, comparing groups of students who do and do not receive the programme on body image outcomes, and measuring student outcomes on multiple occasions over an extended period of time (e.g., up to 1-year later).

Measuring the success of body image programmes and initiatives in schools with quality monitoring and evaluation is critical to ensuring that:

- No harm is caused to young people through the delivery of these programs, particularly as body image can be a sensitive topic for some.
- The programs are effective and have the positive impact intended.

- Valuable school time, resource, and energy are not wasted on ineffective interventions.

A recent systematic review of research summarised the results of 16 high quality studies assessing the effectiveness of 15 classroom-based body image interventions for secondary schools (Yager, Diedrichs, Ricciardelli & Halliwell, 2013). Of the programs reviewed, seven programs improved students' body image immediately after the final program session, and two programs reported improvements in body image that were maintained between 3-30 months later. This review found that programs that are interactive, contain multiple lessons (usually 5-8 lessons), and include activities addressing media literacy, self-esteem, and the influences of peers were most effective. Effective programs identified in this review included [Happy Being Me](#) (Bird, Halliwell, Diedrichs & Harcourt, 2013; Richardson & Paxton, 2010) and [Media Smart Australia](#) (Wilksch & Wade, 2009). Note, Media Smart Australia should not to be confused with the [Media Smart UK](#) body image programs, which have not been evaluated in high quality research.

More recently, the Centre for Appearance Research has worked with the Dove Self-Esteem Project, students, teachers, and body image experts to update the Happy Being Me intervention to be suitable for girls and boys, to include content on social and traditional media, and to make the program suitable for teachers to deliver. There are two versions of this [Dove Confident Me](#) program, a single 45-minute workshop and a series of five 45-minute workshops. Two large scale randomised controlled trials (the gold standard for studies evaluating body image programs) have been conducted to evaluate the impact of these workshops with over 3000 students in secondary schools in the UK (Atkinson, Diedrichs, Garbett & Leckie, 2017; Diedrichs et al., 2015). The results of these studies have shown that the single sessions results in immediate improvements to body image, and taking part in the 5-session program improves girls and boys body image up to at least 6-months later. These programmes can be delivered effectively by teachers and are available for anyone to download for free from [selfesteem.dove.com](#). The 5-session version of Confident Me is recommended for a longer lasting impact. Schools throughout the UK are using Confident Me, including a range of schools in South Gloucestershire that have implemented it through their Healthy Schools Network.

Most body image programmes are delivered in schools through PSHE, however, there is potential for them to be integrated into teaching around media studies, physical education, English, history, psychology, and other social sciences.

Unfortunately, many of the body image programmes currently used in schools have not been evaluated in rigorous research and are not evidence-based. It is important for organisations looking to support the delivery of body image tools and programmes in schools to advocate and only recommend evidence-based initiatives. Happy Being Me, Media Smart Australia, and Dove Confident Me are examples of evidence-based body image programs that are proven to work and should be recommended to schools.

For schools looking to promote a 'whole school' approach to body image, the Be Real Campaign has recently produced a useful [toolkit](#) that is freely available online for schools to download. This toolkit includes resources for assemblies, school policy, posters, and classroom program recommendations.

For schools looking to run small-group programs with girls specifically, [The Body Project](#) is an evidence-based body acceptance programme that has been shown to be particularly effective in improving girls' body image from the ages of 14 and over (Halliwell & Diedrichs, 2014; Stice, Becker & Yokum, 2013; Stice, Shaw, Becker & Rohde, 2008).

9. What examples are there of youth organisations and peer education programmes outside of schools promoting positive body image? Are there examples of programmes focusing on different groups of young people? Are they focusing on different aspects of body image? How effective are these? How should they be evaluated?

The World Association of Girl Guides and Girl Scouts have an evidence-based non-formal education body image program called [Free Being Me](#). The programme was developed in collaboration with the Dove Self-Esteem Project, and body image experts from the Centre for Appearance Research, Oregon Research Institute and Trinity University. Free Being Me is based upon [The Body Project](#), one of the most effective

and rigorously tested body image programmes in the world. The programme is delivered in girl guide groups and includes five interactive 60-minute sessions. The programme is available in the UK and in 125 other countries. The Centre for Appearance Research has been studying the impact of Free Being Me globally and has found that girls across cultures, ethnic groups and countries find this programme interesting and helpful (Craddock, Powe, Stice & Diedrichs, 2016).

The Dove Self-Esteem Project have also developed a similar program called [True To Me](#) for youth groups outside of Girl Guides. True to Me is also based upon The Body Project and was developed with the Centre for Appearance Research and Oregon Research Institute.

As with school programmes, body image programmes and initiatives in youth organisations should be evaluated in good quality research studies. This usually involves using standardised validated measures and tools to assess body image, comparing groups of students who do and do not receive the program on body image outcomes, and measuring student outcomes on multiple occasions over an extended period of time (e.g., up to 1-year later).

Health implications

10. To what extent is dissatisfaction with body image contributing to the increase in mental health problems amongst children and young people?

Research evidence charts the extensive and damaging impacts of body image concerns on physical and psychological health. The negative consequences cut across all key areas of living, including health, social relationships, education and vocational functioning.

Mental wellbeing is influenced by multiple variables, but the evidence clearly indicates that body image concerns have a direct influence on psychosocial health. During adolescence and early adulthood, negative body image has been cited as a key predictor of lowered self-esteem, depression, habitual negative thinking and social anxiety (Rumsey & Harcourt, 2005).

Concerns about appearance and negative body image during adolescence and early adulthood are also a major contributor to the onset and maintenance of smoking behaviour, drug and alcohol use, disordered eating and exercise avoidance (Grogan et al 2009; Kanayama, Barry, Hudson, & Pope, 2006; Nelson, Lust, & Story, 2009; Stice, 2002). Negative body image is a well-known risk factor for the development of some eating disorders (Jacobi & Fittig, 2010). Early adulthood is a critical time for the development and onset of eating disorders. Eating disorders have the highest mortality rate of any mental illness.

Body image concerns also significantly impact on academic performance, with 31% of British teenagers avoiding classroom discussion on days they lack confidence about their appearance (Lovegrove & Rumsey, 2005). A recent review by the Centre for Appearance Research and Dr Susie Orbach (Halliwell, Diedrichs & Orbach, 2014) summarises the evidence documenting the damaging impact that body image concerns can have on young people's educational aspirations and achievement.

Evidently, body image is a significant public health and social concern affecting children and adolescents, and research into effective early intervention and prevention strategies is urgently needed, alongside the distribution of evidence-based body image programs in schools and community settings.

12. Are schools sufficiently linked with health professionals? What more could be done in this regard?

There is evidence that teachers can be successfully trained to deliver evidence-based body image programs to students effectively. For example, studies (Atkinson, Diedrichs, Garbett & Leckie, 2017; Diedrichs et al., 2015) show that the Dove Confident Me program (a 5 lesson classroom-based body image program) can be delivered effectively by teachers and improves students' body image up to at least 6-months later.

This suggests that schools do not always have to rely on health professionals or external providers to address body image among their students. However, it is recommended that students with moderate-severe body image concerns are provided with support from trained healthcare professionals.

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