

A Body Confident Future

British Youth Council
Youth Select Committee 2017

A Body Confident Future



Introduction from Mr Speaker

I am delighted to introduce the sixth Youth Select Committee report on tackling negative body image, produced by the British Youth Council with the support of the House of Commons.

The reports of the Youth Select Committee are rightly recognised for their in-depth analysis and unique insight into the issues they investigate. I hope that my Parliamentary colleagues will take on board the conclusions of this report, and I am certain that it will, more widely, provide an invaluable contribution to the discussions surrounding this highly important subject.

Mr Speaker, Rt Hon John Bercow

The Youth Select Committee

Current membership

Thomas Copeland	Northern Ireland Seat, Chair of the Youth Select Committee
Becca Moore	Other Representative Seat, Vice Chair of the Youth Select Committee
Alizeh Abdul Rahman	Member of Youth Parliament for Plymouth
Michael Bryan	Other Representative Seat, Youth Trustee for Plan International UK
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Samuel Pidgeon	Other Representative Seat, Member of The Out There Group
Alex Robertson	Scottish Seat, Committee Convener, Scottish Youth Parliament
Yasmin-Jade Sides	Member of Youth Parliament for Wrexham

Committee staff

The current staff of the Committee are Nehal Bradley-Depani (Clerk), Jake Barker (Assistant Inquiry Manager), Jamie Mordue (Assistant Inquiry Manager), Anna Sterckx (National Projects Co-ordinator, British Youth Council), Robert Baldry (Project Management), and Camilla Aitken (Media Officer).

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Summary

Body image was chosen as the topic for our inquiry by just under a million young people following the 2016 Make Your Mark Ballot, in which it was voted as one of the top ten issues affecting their lives.

We found that body dissatisfaction is the norm amongst young people in the UK, the product of a culture which privileges a particular type of beauty and puts pressure on young people to conform to social expectations. Poor body image is sometimes viewed as a “phase”. This is an attitude that ignores the potentially serious and long-lasting consequences for education, health and wider outcomes that a lack of body confidence can, and so often does, bring. Body dissatisfaction affects anyone, but the socially embedded nature of the issue means that certain demographic groups may be more at risk than others.

Whilst the Government Equalities Office has taken steps in recent years to support initiatives aimed at tackling poor body confidence, the dual education and equalities responsibilities of the relevant minister means government action on body image is too often characterised by an abdication of responsibility. Other departments, in particular the Department for Digital, Culture, Media and Sport, have yet to recognise the significance of body dissatisfaction or demonstrate the necessary commitment in tackling it.

Young people are constantly surrounded by advertising. We welcome the recent steps taken by the Advertising Standards Agency to tighten regulation in order to challenge the lack of diversity, reinforcement of harmful social norms, and unrealistic body standards that are presented to young people. It is encouraging that increasing numbers of advertisers are seeking to promote body positivity, but too many use the language of body confidence whilst continuing to perpetuate conventional beauty standards.

Social media can have both negative and positive impacts on body image. Whilst social media companies have taken some steps to mitigate the negative effects of their platforms, they are still not taking their responsibilities seriously enough. Government must now introduce enforceable minimum standards on these companies. In doing so, it must take into account the voices of young people, who have been ignored by Government and industry on the issue of social media regulation for too long.

Education plays a crucial role in challenging body dissatisfaction, both in encouraging positive behaviours and helping pupils recognise and cope with negative influences. The Government should ensure that every child benefits from evidence based, targeted activities around body image and media literacy, and that teachers of all subjects are provided with the support that they need to promote positive body image within the scope of their own subject areas. It is essential that new funding - rather than monies reallocated from other parts of the Department for Education’s budget - is made available so schools have the time and resources they need to support pupil wellbeing.

Poor body image is an indicator of a range of mental health conditions. It requires much greater attention in all aspects of health provision, from online resources to primary and specialist care. We welcome the additional funding allocated to young people’s mental health, but are concerned that some Clinical Commissioning Groups are diverting the funds to other areas.

We expect the Government to set out proposals addressing the health issues raised in this Report in its forthcoming Green Paper on children and young people's mental health. Body dissatisfaction must be recognised as a serious issue which potentially affects every young person. It is vital that the voices of young people are heard in the development of future policy related to mental health and body dissatisfaction.

This report is only the first step; far more needs to be done by society at large to tackle this issue. Professor Peter Fonagy of University College London told us that body dissatisfaction is "one of the key issues at the moment facing children and young people in this country". It is essential that Government recognises this before the ramifications of poor body image taint the potential of an entire generation.

1 Introduction

1. Body dissatisfaction amongst people of all ages is nothing new. However, there is growing concern that young people today are living with changing and increased pressures which have a significant impact on their self-esteem and self-image. This is concerning not only because poor body image in itself is undesirable, but also because it is associated with a range of negative outcomes in health, education, and other spheres. In recent years, a number of governmental and non-governmental initiatives have been set up to address this issue. The aim of this inquiry is to understand the major drivers of body dissatisfaction in the context of a rapidly changing environment and to recommend concrete steps the Government should take to support young people to develop a positive body image.

This inquiry

2. The annual Make Your Mark ballot allows young people from around the UK to vote on the issues that Members of the Youth Parliament debate and campaign on in the following year. Almost one million young people voted in the 2016 ballot, with body image emerging as one of the top ten issues.¹ As a topic which had not been previously considered by a Youth Select Committee, it was referred to us to form the basis of this year's inquiry.

3. The 2017 Youth Select Committee is composed of eleven members aged between 13 and 18. The members include two Members of the Youth Parliament, two youth councillors, one Young Mayor, one elected representative from each of the devolved nations, and three reserved seats. We have attempted to bring the diversity and breadth of our experiences to this inquiry, both in our scrutiny of the evidence and in agreeing this Report.

4. We collected evidence through a number of channels. On 19 May 2017, we published a call for written evidence and received over 70 submissions including from individual young people; forums of and organisations working with young people; schools and teachers' associations; academics in a range of fields; and health organisations. We also heard from seven panels of witnesses on the 7 and 14 July, including academics, civil society organisations, social media influencers, a Facebook representative, health and educational professionals, young people and officials from the Government Equalities Office (based within the Department for Education) and Department of Health. On the 13 July, six members of the Committee visited the UK headquarters of Twitter to learn more about issues related to body image from the perspective of a major social media company. We also worked with UNICEF to run a poll in August and September amongst its "U-Report" members (young people signed up to UNICEF's social messaging board) which enabled us to gather a wider range of views.² We are grateful to everyone who took the time to contribute to and support this inquiry. In particular, we wish to thank the young people who provided us with the benefit of their often difficult experiences around body image. This Report owes a great deal to their frank and insightful evidence.

5. A number of other organisations also helped raise awareness around the issue of body image while we were conducting this inquiry. The Houses of Parliament Education Service encouraged discussion on the theme of body image with young visitors. We are

1 BYC, [Make Your Mark 2016](#) [accessed 24 August 2017]

2 UNICEF, [U-Report - Voice matters](#) [accessed 24 August 2017]

aware that a number of schools and colleges, including John Masefield High School in Herefordshire, held classes focused on our terms of reference. We are grateful to everyone who sought to actively engage young people in discussing body dissatisfaction; as we discuss later on in this Report, the issue can only be tackled with the commitment of these organisations and many more.

This Report

6. Poor body image is a complex phenomenon which touches on many different social and cultural issues. Rather than attempting to address every aspect of the topic, this Report focuses on the issues which are particularly relevant to young people or which have received less recent attention. The second chapter sets the scene by considering the extent of body dissatisfaction amongst young people, including the main influences on body image, its consequences, and how body image impacts on different demographic groups. We also examine the approach taken by body image campaigns and the Government to date. The third chapter considers advertising and digital, with a particular focus on the negative and positive impacts of social media and the responsibilities of social media companies in this fast changing area. The fourth chapter deals with the role of education in promoting positive body image. Finally, we examine what more can be done to ensure that young people suffering from health problems associated with body dissatisfaction get the help that they need.

2 Body dissatisfaction amongst young people and current responses

7. Our first objective in conducting this inquiry was to establish the nature and extent of body dissatisfaction amongst young people in the UK and understand how the Government has approached this issue to date. The following chapter sets out the key themes we have identified with regard to influences on body image, the consequences of poor body image, and the impact of body dissatisfaction amongst different demographic groups. We also provide an overview of existing body image campaigns, and explore how responsibility for body image is divided across Whitehall.

Extent, causes, and consequences of body dissatisfaction

8. Body image relates to a person's self-perception of their body and may be positive or negative. In 2012, the All Party Parliamentary Group (APPG) on Body Image concluded that negative body image in the UK is high and on the increase.³ The evidence we received suggests this remains the case. Dr Phillippa Diedrichs, Associate Professor at the Centre for Appearance Research, University of the West of England told us that “it is now the norm for young people in particular to be unhappy with the way their bodies look and how their bodies function”, with between 20–70 percent affected depending on the measure used.⁴ The issue may be getting worse; Elena Veris Reynolds, an advocate for Girlguiding, observed that the proportion of seven to 21 year olds happy with how they looked in the Girls' Attitudes survey had fallen from 73 percent in 2011 to 61 percent in 2016.⁵ Professor Peter Fonagy, Head of the Research Department of Clinical, Educational and Health Psychology at University College London and Chief Executive of the Anna Freud Centre, told us that body dissatisfaction is “one of the key issues at the moment facing children and young people in this country”.⁶

9. Poor body image can affect people of all ages. We were extremely concerned to hear of a recent systematic review showing children under the age of six experiencing body image concerns.⁷ Susie Williams, a member of the NHS Youth Forum, provided anecdotal evidence to support this, saying “I know six-year-olds who don't go to school because the kids say they have hairy legs and they think they're fat.”⁸ Witnesses also pointed out that body dissatisfaction was not a phenomenon confined to a particular life stage; instead, those who suffer from poor body image at an early age tend to carry these concerns with them into adulthood.⁹ Research on body image, however, has historically tended focus on ages 11–14.¹⁰

10. The evidence we received highlighted a number of key social and cultural influences on body dissatisfaction. First, it has long been recognised that idealised and non-representative body images used in advertising and promoted by companies across traditional media (and increasingly disseminated by private individuals through social

3 APPG on Body Image, [Reflections on body image](#), May 2012, p7

4 [Q3](#) [Dr Diedrichs]

5 [Q27](#) [Elena Veris Reynolds]

6 [Q2](#) [Professor Fonagy]

7 [Q3](#) [Dr Diedrichs]

8 [Q157](#) [Susie Williams]

9 [Q3](#) [Dr Diedrichs]; [Q22](#) [Professor Fonagy]

10 [Q7](#) [Dr Diedrichs]

media) can contribute to the development of unrealistic expectations.¹¹ Moreover, the media helps create and reinforce certain social norms. Professor Jessica Ringrose of the Institute of Education at University College London told us that corporate influences and advertising have a “massive” role to play in “influencing people’s understanding of gender identity and what is pretty, cool or good”.¹² For instance, over a third of the young people in a study conducted by Dr Emma Rich, Associate Professor and Reader in the Department for Health at the University of Bath, reported wanting to lose weight because of media influences.¹³

11. Second, parenting or the absence of parenting can have an impact on the body image of young people. Professor Fonagy told us that the trend over several decades has been for parents to become less involved in the lives of their children, with implications for self-esteem in general and body image in particular.¹⁴

12. Third, in part because of parental absence, young people are profoundly influenced by their peers. Research carried out by Dr Rich has shown that peer culture plays a significant role in terms of the moral commentary that young people may engage in about each other’s bodies.¹⁵ Cameron Wood, project leader for the Young Person’s Network which supports young disabled people in Herefordshire, told us “Secondary school students monitor body image more than any other age and I think that this is because they feel that they are in competition with their peers at school to look a certain way”.¹⁶ However, peers can also have a positive influence on body image; when Bradford Youth Service asked young people who they would go to for support with negative body image, the majority mentioned their friends.¹⁷

13. Lastly, Natasha Devon MBE, founder of the Self-Esteem Team which encourages positive body image in young people, pointed to a general culture of “individualism and perfectionism” in which young people aspire to look a particular way, along with achieving certain standards in their academic, social and extra-curricular activities.¹⁸ This is associated with an implicit assumption that if young people do not meet these standards, they (and their parents) should be held personally responsible.¹⁹ For instance, Susie Williams commented that young people “think they have to be perfect, to tick every single box, and I don’t think that we have the support that tells people that they can be who they are.”²⁰

14. As well as being undesirable in itself, body dissatisfaction is associated with a range of poor outcomes in other areas. Witnesses stressed that poor body image is not on its own a mental health problem.²¹ However, a number of studies have found that poor body image predicts depression, anxiety and some eating disorders.²² We heard evidence from

11 Dr Barbara Mitra ([BYC012](#)); Dr L Boothroyd, Dr E Evans, Mrs T Thornborrow ([BYC040](#)); Young Minds ([BYC059](#))

12 [Q9](#) [Professor Jessica Ringrose]

13 Dr Emma Rich ([BYC073](#))

14 [Q9](#) [Professor Fonagy]

15 Dr Emma Rich ([BYC073](#))

16 Cameron Wood ([BYC009](#))

17 Bradford Youth Service ([BYC020](#))

18 [Q113](#) [Natasha Devon]

19 Dr Emma Rich ([BYC073](#))

20 [Q141](#) [Susie Williams]

21 See for instance [Q14](#) [Professor Fonagy]; [Q168](#) [Emily Antcliffe]

22 The Centre for Appearance Research ([BYC055](#)); [Q14](#) [Dr Diedrichs]

young people linking poor body image with mental health issues.²³ This is particularly concerning in a context where mental ill-health amongst children and young people is on the rise, including in relation to those disorders associated with poor body image.²⁴

15. Body dissatisfaction can also have a detrimental impact on physical health. Poor body image has been linked to young people starting and continuing with risky behaviours such as smoking, drug and alcohol use, and unsafe sexual practices.²⁵ One study found ten per cent of secondary school age boys have previously have skipped meals and another ten percent would consider taking steroids to achieve a particular appearance.²⁶ Dr Diedrichs told us that numerous studies had also shown that body image can predict behaviour such as fruit and vegetable consumption, over-exercising, or not exercising.²⁷ While some of these links are well established, we note the evidence from the Royal College of Paediatrics and Child Health that there remain gaps in the data, for instance in relation to the link between body image and risky behaviours.²⁸

16. The focus of academic literature on the consequences of poor body image has traditionally been on health. However, we were also made aware of emerging research on the impact of body dissatisfaction on education, relationships and wider life outcomes.²⁹ Dr Diedrichs told us that:

Young people will not turn up to school or put their hands up in the classroom on days when they are unhappy with how they look. We know from studies around the world that when young women think they are overweight or have a large body, irrespective of their actual body weight, they achieve poorer grades. We know that it affects their aspirations for what they would like to go on to do in further education.³⁰

Nor is this just an educational issue; it also affects the ability of young people to bring about change in the world. Dr Diedrichs suggested that “when girls in particular have low body satisfaction and experience objectification and other things, they are less likely to speak up and challenge social issues”.³¹

17. Body dissatisfaction affects a large proportion of young people and can have serious and long lasting consequences for health, education, and wider life outcomes. Idealised images, parents, peers and the general pressure that young people are under to be “perfect” all influence body image. We know that these factors are complex, interconnected and socially embedded, although in many areas gaps remain in our understanding. We recommend that the Government Equalities Office commission research in the next six months to address current gaps in the evidence base, including

23 Sadie McGrane (BYC007); Tasnia Chowdhury (BYC021); Kirstie Stage (BYC023); Gresham’s School (BYC025)

24 Q27 [Shirley Cramer]; see also written evidence from the Institute for Public Policy Research (IPPR) (CMH0192) to Education Committee and Health Committee, Children and young people’s mental health inquiry, HC 125, 21 February 2017

25 The Centre for Appearance Research (BYC055); Q14 [Dr Diedrichs]

26 Credos, [Picture of Health](#), August 2016, p20

27 Q14 [Dr Diedrichs]

28 Royal College of Paediatrics and Child Health (BYC037)

29 The Centre for Appearance Research (BYC055)

30 Q14 [Dr Diedrichs]

31 Q14 [Dr Diedrichs]

on poor body image in pre-adolescents, the link between poor body image and risky behaviours, and the long term impact of poor body image on young people’s education, relationships and agency.

Body dissatisfaction amongst different demographic groups

18. Some groups are more prone to poor body image than others. Professor Ringrose emphasised the need to be “context-specific [and] culturally-specific”; similarly, Rosamund McNeil, Head of Education and Equality Policy at the National Union of Teachers (NUT) told us that “it is important to talk about body image in terms of it having different consequences for different groups of kids based on their gender and race, and also their class”.³²

19. We received evidence demonstrating that body image is a deeply gendered issue.³³ For instance, Ms McNeil told us that:

When we look at body image, we have to look at the society we are in; we know we are faced with sexism and a society that doesn’t treat men and women equally. We have very fixed ideas about what men and women should look like, what they should do and what they should aspire to do in life. I think that all young men and women—girls and boys of all different ages—are subject to sexist stereotypes and gender stereotypes.³⁴

Women may be more prone to poor body image, for instance because of societal expectations which emphasise their appearance rather than their achievements.³⁵ This is linked to the sexualisation and self-sexualisation of young women, with studies demonstrating that girls put significant value on a “sexy” appearance.³⁶

20. While attention has historically focused on young women, we also received evidence of young men being detrimentally impacted by societal expectations around body image. In particular, while the idealised body shape amongst young women tends to be focused on a slender body with fuller hips and breasts, young men typically aspire to developing a muscular physique.³⁷ As Natasha Devon put it:

...your average man’s shame trigger relates to strength. So, if you want to shame a man, you will call him weak. I think that might explain why, for example, the Telegraph found last year that 45 percent of British men will experience a period of so-called bigorexia, or an obsession with muscle building at some point during their lives, because muscles are an outward manifestation of strength.³⁸

32 [Q4](#) [Professor Ringrose]; [Q114](#) [Rosamund McNeil]

33 See for instance [Q2](#) [Professor Fonagy]; [Q126](#) [Natasha Devon]; [Q172](#) [Tara Kaufmann]

34 [Q114](#) [Rosamund McNeil]

35 Alex Russell ([BYC002](#)); Helen Walsh ([BYC014](#)); Hannah Lewis ([BYC016](#)); National Union of Teachers ([BYC039](#)); The Children’s Society ([BYC046](#))

36 Professor Jessica Ringrose ([BYC064](#))

37 Helen Walsh ([BYC014](#)); Plymouth Young People Group ([BYC041](#)); Simran Kaur Sanghera ([BYC057](#))

38 [Q114](#) [Natasha Devon]

An emphasis on not appearing weak may explain why young men often feel unable to access support with body image issues, and why frontline educational and health professionals may be slower to recognise and engage with body image issues in this group.³⁹

21. Young people who are lesbian, gay, or bisexual, or who are trans, non-binary, gender fluid, or non-conforming, may find it difficult to meet gendered expectations, but equally may be discriminated against if they do conform to a particular image outside of straight, cis-gender expectations.⁴⁰ For instance, young people who took part in a series of discussions hosted by an organisation that supports LGBT+ young people in Dorset reported a “Catch 22 – judged for not fitting societies ideal body type, e.g. fat shamed, yet still being judged for fitting into it, e.g. thin shaming”.⁴¹ We were struck by the evidence of Chandler Wilson, a transgender, non-binary person who showed immense courage in writing to the Committee about their mental health issues associated with body image problems.⁴²

22. Moreover, the idealised images which dominate in the media and the global beauty industry tend to emphasise fair skin and straight hair.⁴³ This may lead to body dissatisfaction amongst those who do not meet these standards, as demonstrated by reports of young ethnic minority women manipulating photos on social media to make themselves look “whiter”.⁴⁴ We heard from Stephanie Yeboah, a plus-size fashion blogger and social media influencer, that these racialised standards impact even the body positivity movement, which encourages more affirmative attitudes to one’s own body:

...body positivity seems to only serve those who fit the “acceptably fat” description: white, beautiful by Westernised standards, and small/hourglass shaped fat. The movement does not help those who fall outside of what is considered to be beautiful, even within the plus-size community.⁴⁵

23. Disabilities, disfigurements or having a serious illness may also affect a young person’s body image. Again, this was linked to not meeting the dominant image of beauty and being perceived as “different”.⁴⁶ For instance, Changing Faces provided evidence suggesting that half of all children with a disfigurement experienced bullying at school.⁴⁷ Cameron Wood, who has a disability and uses a wheelchair told us that “... there is not a lot of disability stuff out there in the media. That may be why young people bully people like me—because they have not been exposed to it.”⁴⁸ We also received evidence from organisations which support children and young people with cancer about how body changes such as hair loss, scars, and weight loss or gain, which can be associated with cancer treatments, may impact on a young person’s body image.⁴⁹

24. Finally, socioeconomic status has an impact on body dissatisfaction. For instance, children from underprivileged backgrounds are more likely to be overweight, but are also

39 RSBC Youth Forum ([BYC069](#))

40 Professor Jessica Ringrose ([BYC064](#))

41 Helen Walsh ([BYC014](#)); see also Sheena Amos Youth Trust (SAYIT) ([BYC030](#))

42 Chandler Wilson ([BYC017](#))

43 Professor Jessica Ringrose ([BYC064](#)); [Q5](#) [Professor Ringrose]; [Q51](#) [Chidera Eggerue]

44 [Q5](#) [Professor Ringrose]

45 Stephanie Yeboah ([BYC013](#))

46 Cameron Wood ([BYC009](#)); Plymouth Young People Group ([BYC041](#))

47 Changing Faces ([BYC027](#))

48 [Q144](#) [Cameron Wood]

49 CLIC Sargent ([BYC010](#)); The Christie NHS Foundation Trust and Teenage Cancer Trust ([BYC015](#))

more likely to perceive themselves as weighing less than they actually do; young women from higher socioeconomic groups on the other hand are more likely to have poor body image.⁵⁰ However, young people from more deprived backgrounds may have less in the way of parental and other resources to help them challenge body dissatisfaction.⁵¹

25. The influences on and impact of poor body image can only be understood by examining the specific context in which they occur. The social expectations and challenges associated with gender, gender identity, sexual orientation, ethnicity, disability, and socioeconomic background are all reflected in body image.

Existing body image campaigns

26. During our inquiry we took evidence on a number of different initiatives and campaigns which aimed to promote body positivity. The Be Real Campaign was launched in response to the APPG on Body Image’s 2012 report. Supported by various stakeholders including the YMCA, the personal care brand Dove, Superdrug, New Look, Facebook, and the Government Equalities Office, it facilitates access to educational information, resources and networks; promotes body confidence based on healthy living and general wellbeing; and encourages the media to reflect diversity in the UK.⁵²

27. Another prominent initiative related to body image is Sport England’s “This Girl Can” campaign, launched in January 2015.⁵³ It aims to encourage more women to take part in physical activity, in part through using images showing a diverse range of women exercising.⁵⁴ Apart from the obvious health benefits, we received evidence that physical activity can improve body image by diverting attention from what the body looks like to what it can do.⁵⁵ Finally, Girlguiding has been active in promoting positive body image, for instance with its “Free Being Me” body confidence badge and its “Girls Matter” campaign which calls on schools to teach body confidence and gender equality.⁵⁶

28. Campaign representatives told us of the difference they were making. For instance This Girl Can claimed it was reaching 2.8 million women, encouraging them to be more active.⁵⁷ We heard that schools and teachers responded positively to the Be Real Campaign toolkit.⁵⁸

29. However, many of the most prominent campaigns tend to focus on women, with other groups receiving much less attention. Kate Dale of Sport England acknowledged the need for a diverse range of campaigns, telling us that “[y]ou need initiatives that target specific demographics and ethnic, cultural, sexual orientation or gender groups, because there will be specific issues and barriers”.⁵⁹ Harnaam Kaur, a model and body confidence advocate, also commented on the need to make the body positivity movement accessible to all:

50 Government Equalities Office; Department for Culture, Media & Sport; Department for Education; and Department of Health ([BYC066](#))

51 [Q10](#) [Professor Ringrose]; [Q114](#) [Rosamund McNeil]

52 YMCA, [Be Real Campaign](#) [accessed 19 October 2017]

53 [This Girl Can](#) [accessed 16 June 2017]

54 [Q26](#) [Kate Dale]

55 Dr Charlotte Kerner ([BYC042](#))

56 Girlguiding, [Girls Matter](#) [accessed 30 August 2017]; Girlguiding, [Free Being Me](#) [accessed 30 August 2017]

57 [Q28](#) [Kate Dale]

58 [Q29](#) [Liam Preston]

59 [Q32](#) [Kate Dale]

We forget about people who are disabled. I tried my best to find amputees who were willing to portray their bodies...I tried to put pictures up of people who were diverse and who you wouldn't even think of. Who would think that disabled people could be body-positive as well? We don't think of things like that.⁶⁰

30. We commend the work carried out by the Be Real Campaign, Girlguiding, Sport England and others in promoting body confidence. However, many of the most visible campaigns are directed at women. While we accept that women are often particularly susceptible to body dissatisfaction, there is a danger that the distinctive challenges faced by young men, LGBT+ youth, ethnic minorities, and those with disabilities or serious illnesses are overlooked. *The Government Equalities Office should work with the Be Real campaign and relevant interest groups to develop resources and support specific to these groups, alongside the more generic offering, within the next six months. The Government Equalities Office should also provide support to ensure that the target groups are aware of the support available.*

31. Some of the young people we heard from also suggested that current campaigns were not reaching as many people as they should. For instance, the Cainscross Youth Forum reported that “body image campaigns in general are not reported as being well known or...readily identified by young people”.⁶¹ Dr Diedrichs told us that there had been little research on how to “get them [interventions] out there on a broad scale and how to get members of the community involved to deliver those interventions”.⁶² In 2014, a Body Confidence Week was held to focus attention on body image issues, but this was a one-off rather than annual event.⁶³

32. *In order to increase the awareness and uptake of resources, we recommend that the Government establish an annual National Body Confidence week to act as a focus for body image activities and to encourage involvement from a wider range of organisations. This initiative should be run jointly by the Departments of Health, Education and Digital, Culture, Media and Sport to ensure participation of health professionals, educational establishments, sports clubs, advertisers, and others.*

Government approach to body image

33. Although it is not currently running an active campaign, the Government Equalities Office, an inter-departmental body, leads on body image issues within Government.⁶⁴ The Rt. Hon Justine Greening MP, Secretary of State for Education and Minister for Women and Equalities, has overall responsibility for all of education policy and the range of equalities issues. The current ministerial lead for body image is Anne Milton MP, Minister of State in the Department for Education, who has responsibility for Apprenticeships and Skills alongside being Minister for Women. The 2016 Youth Select Committee, which conducted an inquiry into racism and religious discrimination, concluded that the practice of both Government Equalities Office ministers also having major departmental responsibilities in the Department for Education gives the impression of equalities being

60 [Q62](#) [Harnaam Kaur]

61 Cainscross Youth Forum ([BYC028](#)); see also for instance Emma Ghanem ([BYC006](#))

62 [Q7](#) [Dr Diedrichs]

63 Government Equalities Office, [Body confidence toolkit launched](#), 13 October 2014 [accessed 22 September 2017]

64 [Q169](#) [Tara Kaufmann]

a secondary concern.⁶⁵ The Government rejected the Committee’s recommendation that the Government Equalities Office should have a separate minister on the basis that an inter-departmental body helps focus responsibility while ensuring that equalities issues are not seen as the preserve of a particular department.⁶⁶ We agree that it is important to have a cross-departmental body with clear responsibility for equalities. However, unless the relevant minister has an equally well defined portfolio, it may be difficult to deliver the necessary leadership on issues such as body image.

34. While both equality ministers also have education responsibilities it is difficult for the Government Equalities Office to provide the necessary leadership on body image. We reiterate the 2016 Youth Select Committee’s recommendation that a Government Equalities Office minister who is responsible exclusively for equalities issues be appointed.

35. The Department for Digital, Culture, Media and Sport, the Department for Education, and the Department of Health also have responsibilities relevant to body image.⁶⁷ Tara Kaufmann, then Head of Women’s Engagement and Gender Representation at the Government Equalities Office, told us this was an “appropriate recognition that body image is a diffuse and disparate area”.⁶⁸ We agree, and support joint departmental working on this issue. In this respect, we were encouraged by the evidence prepared with input across Government. We are particularly grateful to Ms Kaufmann and Emily Antcliffe, Deputy Director for Mental Health at the Department of Health, for giving oral evidence together. However, we were surprised at the refusal of the Department for Digital, Culture, Media and Sport to provide an official to give evidence, given the clear importance of issues central to this inquiry, particularly in relation to digital policy and sport, on which it leads.

36. The required commitment to addressing body image issues across Whitehall is currently lacking, as indicated by the Department for Digital, Culture, Media and Sport failing to provide an official to give oral evidence to our inquiry. More must be done to embed body image as a policy area across relevant departments. Specific recommendations for particular departments are set out later in this Report.

65 Youth Select Committee 2016, [Young people and issues of racism and religious discrimination](#), para 91

66 Home Office, Department for Communities and Local Government, Department for Education, [The Government Response to the 2016 Youth Select Committee Report](#), January 2015, p15

67 Government Equalities Office; Department for Culture, Media & Sport; Department for Education; and Department of Health ([BYC067](#))

68 [Q171](#) [Tara Kaufmann]

3 Advertising and digital

37. Young people are more likely to be dissatisfied with their bodies if they are constantly surrounded by unrepresentative and unattainable ideals. The first part of this chapter considers what measures could be taken to promote diversity in advertising. The remainder of the chapter examines the link between social media and poor body image, recommending actions which recognise the positive effects of social media while mitigating the negative.

Promoting diversity in advertising

38. As discussed above in paragraph 10, the use of idealised body images in advertising is one of the factors which contributes to poor body image. In 2012, the APPG on Body Image recommended that advertisers develop campaigns that more accurately reflect the diversity of the population.⁶⁹ This was echoed by a number of our witnesses. For instance, Natasha Devon emphasised the need to use images of people of all “shapes, sizes, ages and races” in advertising, so that “the message we get is that there are lots of different ways to be attractive”.⁷⁰

39. Advertising in the UK is regulated by the Advertising Standards Authority (ASA) and the Committee of Advertising Practice (CAP), bodies established and paid for by the advertising industry. The CAP is responsible for writing the Advertising Codes which set out the rules for the industry, while the ASA carries out research and responds to complaints.⁷¹

40. On the 18 July 2017, the ASA published a report on gender stereotypes, “Depictions, Perceptions and Harm”, which concluded that a tougher line on advertisements that feature gender stereotypes was required.⁷² These conclusions reflect the evidence we received about how gender impacts on body dissatisfaction (paragraphs 19 -20 above). It also found that although ASA decisions relating to body image, sexualisation and objectification are broadly appropriate, some of these standards need to be formalised.⁷³ In response to the report, the CAP will be developing new standards for the ASA to enforce and will report on its progress before the end of 2017.

41. The Be Real Campaign encourages organisations to sign up to their “Body Image Pledge”. This involves using adverts which reflect the diversity of the UK; show people as they are in real life (with alterations limited to technical corrections); promote a healthy appearance; and promote the pledge.⁷⁴ As Liam Preston, Senior Parliamentary and Policy Officer at the YMCA, and co-ordinator of the campaign told us:

69 APPG on Body Image, [Reflections on body image](#), May 2012, p52

70 [Q128](#) [Natasha Devon]

71 ASA and CAP, [Self-regulation and co-regulation](#) [accessed 6 September 2017]; ASA and CAP, [About the ASA and CAP](#) [accessed 6 September 2017]

72 Advertising Standards [Authority, Deceptions, Perceptions and Harm](#), July 2017

73 Advertising Standards [Authority, Deceptions, Perceptions and Harm](#), July 2017

74 Be Real Campaign, [Body Image Pledge](#) [accessed 19 October 2017]

When you start to see people who look like you, who sound like you and who reflect your choices in life, that is when you start to feel more confident in yourself. So that for us was what we put front and centre of our body image pledge.⁷⁵

42. Kate Dale and Liam Preston welcomed the support of brands in their campaigns.⁷⁶ However, there is some concern that even those organisations who claim to be body positive are still perpetuating harmful social norms. For instance, Hounslow Youth Council and Chidera Eggerue, a fashion blogger and social media influencer, questioned the credibility of body positivity campaigns run by organisations who are trying to sell beauty or fashion products.⁷⁷ Moreover, the Beauty Demands Network (an academic run multidisciplinary research network) suggested that, while advertisers may be using “larger, fuller, fatter figures”, this is “often while conforming to other features of the contemporary beauty ideal”.⁷⁸ In other words, brands may pay lip service to the idea of diversity but continue to emphasise the message that some conventional ideals of beauty are important.

43. The Committee welcomes the Advertising Standards Agency project in relation to harmful gender stereotypes, which we know can contribute to poor body image, and its commitment to formulate stricter rules in this respect. We agree that the rules on inappropriate sexualisation and adverts which suggest that it is acceptable to be unhealthily thin need clarification, and look forward to the Committee of Advertising Practice bringing forward new rules which reflect this evidence by the end of the year. However, regulation is only part of the answer - we also need to see a culture change across industry. This involves brands committing to using more diverse models and paying more than lip service to this commitment. *The Government Equalities Office should organise a series of workshops with the Be Real Campaign and major brands to encourage a greater uptake of the Body Image Pledge. The workshops should also explore how brands can achieve real, rather than superficial, diversity in their advertising.*

Relationship between social media and body image

44. Social media use has grown significantly amongst young people in recent years. A recent report by the Royal Society for Public Health (RSPH) found that 91 percent of 16–24 year olds use the internet for social networking.⁷⁹ 19 percent of mid-teenage girls say they spend more than three hours a day on Facebook and/or Twitter.⁸⁰ Another recent study found that 75 percent of boys reported using YouTube, 72 percent Facebook, 43 percent Instagram, and 42 percent Twitter.⁸¹

45. Social media increases the exposure of young people to social norms and ideals of beauty; ten million new photographs are uploaded to Facebook alone every hour.⁸² In a study co-authored by Dr Diedrichs, female participants who spent time browsing on

75 [Q41](#) [Liam Preston]

76 [Q34](#) [Kate Dale]; [Q34](#) [Liam Preston]

77 Hounslow Youth Council ([BYC045](#)); [Q59](#) [Chidera Eggerue]

78 Beauty Demands Network ([BYC031](#))

79 RSPH and the Young Health Movement, [#StatusOfMind](#), May 2017, p3

80 Credos, [Pretty as a Picture](#), December 2011, p9

81 Credos, [Picture of Health](#), August 2016, p13

82 Mayer-Schönberger, V., & Cukier, K., *Big data: A revolution that will transform how we live, work and think*, 2013; Dr Barbara Mitra ([BYC012](#)); Kirstie Stage ([BYC023](#)); Beauty Demands Network ([BYC031](#)); The Friendly Development Charity ([BYC043](#)); Hounslow Youth Council ([BYC045](#))

their Facebook profile reported a more negative mood than those who spent time on a control website.⁸³ Young people also regularly come across content on social media which advises dieting, exercise, or beauty regimes, implying that individuals are in control of and responsible for their appearance.⁸⁴ Former “selfie addict”, Danny Bowman told us that:

You go on Instagram and see six-packs left, right and centre. You see a lot of the same body type. I think that a lot of men are looking at that and thinking, “Hold on. These guys are getting huge amounts of likes. They are getting a lot of validation. I need to look like that”.⁸⁵

46. Moreover, even images uploaded by “normal” users are likely to have been staged, edited or digitally altered. 40 percent of young adults have used or asked someone else to use airbrushing techniques to make a photo of themselves look more attractive while platforms like Instagram enable users to enhance their pictures through filters before posting.⁸⁶ In February 2017, CBBC’s Newsround commissioned a survey of 1001 children, asking for their views on “selfies”. More than four out of five said that if they take a picture of themselves to put on social media, it was “important” to look good.⁸⁷ Kirstie Stage, a young person who provided evidence to the Committee, highlighted the “constant pressure to look good, for regular snapchats”.⁸⁸

47. Interactions between users on social media can also promote negative body image. Cameron Wood described the bullying of young disabled people over social media platforms, expressing the opinion that this would not happen in person for fear of the bully getting in trouble.⁸⁹ Two thirds of respondents to a 2015 survey of 15 year olds said that someone had taken unflattering or inappropriate pictures of them without their permission and posted them online.⁹⁰ Many young people report feeling anxious if they do not get a certain number of “likes” for content posted on social media.⁹¹ For instance, one young person told us:

I think that the number of “likes” or “favs” you get on social media sites such as Facebook, Instagram and Twitter really does affect people’s body image. If you get a lot of likes on a picture sometimes people can feel really happy with themselves but if you don’t get a huge amount people can often feel down about themselves which is a huge part of social media.⁹²

48. However, social media also provides a place for people to create content which challenges dominant norms around body image. The fashion blogger and social media influencer, Bethany Rutter commented:

83 Jasmine Fardouly, Philippa C. Diedrichs, Lenny R. Vartanian and Emma Halliwell, [Social comparisons on social media: The impact of Facebook on young women’s body image concerns and mood](#), *Body Image* 13, 2015

84 Credos, [Pretty as a Picture](#), December 2011, p11; Dr Barbara Mitra ([BYC012](#)); Stephanie Yeboah ([BYC013](#)); University of Birmingham ([BYC032](#)); this particularly relates to the “fitspiration” trend on Instagram, see The Centre for Appearance Research ([BYC055](#))

85 [Q48](#) [Danny Bowman]

86 Credos, [Pretty as a Picture](#), December 2011, p11; Dr Barbara Mitra ([BYC012](#))

87 BBC ([BYC063](#))

88 Kirstie Stage ([BYC023](#))

89 Cameron Wood ([BYC009](#))

90 Association for Young People’s Health ([BYC029](#))

91 YMCA ([BYC058](#))

92 Chloe Lintern ([BYC024](#)); see also Fixers ([BYC038](#))

I see social media and my place in it as a way to plug the gap that is not being met by mainstream media. I feel like a lot of how we talk about social media and body image is very negative—it encourages poor self-image—but for people like Steph [Yeboah] and me who, as Steph said, are not receiving positive images in mainstream media, it is a way to represent yourself and see people like you being represented.⁹³

49. Body positivity campaigns have a high profile across social media; for instance in a poll of young people conducted by UNICEF’s U-Report for the Committee, 63 percent of respondents said that they followed people who advocated on body image issues on social media.⁹⁴ Social media also allows people to connect with those who can offer targeted support; CLIC Sargent pointed to its #Nofilterforcancer campaign which aimed to reveal the “hidden” costs of cancer for young people and promote associated resources with practical advice on how cancer and treatment can impact young people’s body, hair, appearance, health, wellbeing, and confidence.⁹⁵ Support can also come from peers; seven out of ten teenagers report receiving support on social media through tough times, and Facebook users are more likely to report having higher levels of emotional support than general internet users.⁹⁶

50. Although it is clear that social media can have a profound positive and negative influence on body image, we heard evidence that more research was needed. Emily Antcliffe from the Department of Health told us that “[w]e do not know enough about what impact the social media world is having on young children. It is growing so quickly.”⁹⁷ Similarly, Dr Diedrichs told us that more work was needed in particular on the positive influences of social media.⁹⁸

51. Social media can have serious and detrimental effects on the body image of young people. However, we must not lose sight of the extent to which social media can promote body positivity through allowing young people to connect with individuals with similar experiences and take control of their own image. The scale and speed with which social media has become an integral part of young people’s lives means too little is known about its impact. We recommend that the Department for Digital, Culture, Media and Sport, working with the Government Equalities Office, commissions research with young people in the next six months examining the positive and negative impact of social media on young people’s body image.

Moderation and content control on social media

52. The Government told us that it “expects social media sites to behave responsibly and also to respond quickly to any incidents of abusive behaviour on their networks”.⁹⁹ This view is shared by young people; 87 percent of those who responded to the poll conducted by UNICEF said that social media platforms have a responsibility to tackle trends which

93 [Q46](#) [Bethany Rutter]

94 U-Report, [The Youth Select Committee asks, does social media impact how you feel about your body](#) [accessed 19 October 2017]

95 CLIC Sargent ([BYC010](#))

96 RSPH and the Young Health Movement, [#StatusOfMind](#), May 2017, p14

97 [Q227](#) [Emily Antcliffe]

98 [Q7](#) [Dr Diedrichs]

99 Government Equalities Office; Department for Culture, Media & Sport; Department for Education; and Department of Health ([BYC066](#))

entrench poor body image.¹⁰⁰ Under the current system, each platform has its own policy on permissible content. Karim Palant, Public Policy Manger at Facebook told us that Facebook and Instagram (which Facebook also owns) mainly relied on reports from users to identify content which did not comply with their policies; every Facebook user who makes a report receives a reply.¹⁰¹ Content is also moderated using technology. For instance, Facebook recently identified and removed tens of thousands of accounts which were not in the name of a real person; such accounts are often used to bully other users.¹⁰² Twitter also uses technology to identify accounts associated with abusive tweets and limits them for a time.¹⁰³ Facebook has recently increased the number of human moderators it has from 4,500 to 7,500.¹⁰⁴ Mr Palant told us that that Facebook was “moving in the right direction in terms of getting reports down”.¹⁰⁵

53. However, a number of those we heard from suggested that platforms were still falling short in responding to users.¹⁰⁶ For instance, Girlguiding highlighted the lack of action taken to date in tackling inappropriate and abusive behaviours such as cyber-bullying, body shaming, and the widespread availability of pornographic material to children under 18.¹⁰⁷ A survey of people with disfigurements found that all those who had complained to social media platforms about content had been ignored or dismissed.¹⁰⁸ The NHS Youth Forum told us that:

Social media companies also need to take more responsibility for cyber abuse and moderating what is published on their sites, because there is a vast quantity of hate speech, defamation, sexual harassment and other abuse directed at people because of their weight, physical appearance or looks.¹⁰⁹

We also note that concerns about social media platforms avoiding their responsibilities have recently been expressed by the Home Affairs Select Committee, and in a joint report by the Education and Health Select Committees.¹¹⁰

54. The industry works with Government, along with representatives from civil society, academia and the legal profession to consider child safety online through the UK Council of Child Internet Safety (UKCCIS).¹¹¹ UKCCIS provides guidance to industry, schools, and parents on issues relating to child safety. In some cases, the guidance touches on issues relating to body image, including sexting in schools and colleges. It also offers examples of good practice for providers of social media and interactive services on issues

100 U-Report, [The Youth Select Committee asks, does social media impact how you feel about your body](#) [accessed 19 October 2017]

101 [Qq82-3](#) [Karim Palant]

102 [Q88](#) [Karim Palant]

103 Twitter ([BYC074](#))

104 [Q80](#) [Karim Palant]

105 [Q86](#) [Karim Palant]

106 See for instance, Chandler Wilson ([BYC017](#)); [Q65](#) [Harnaam Kaur]

107 Girlguiding ([BYC049](#))

108 Changing Faces ([BYC027](#))

109 NHS Youth Forum ([BYC035](#))

110 Home Affairs Committee, Eighth Report of Session 2016–17, [Radicalisation: the counter-narrative and identifying the tipping point](#), HC 125; Education Committee and Health Committee, First Joint Report of Session 2016–17, [Children and young people’s mental health – the role of education](#), HC 849, paras 49–52

111 HM Government, [UK Council for Child Internet Safety](#) [accessed 19 October 2017]

such as managing content and dealing with abuse.¹¹² Mr Palant told us that UKCCIS was “world-leading”, but acknowledged there was scope for body image to be higher up on its agenda.¹¹³ We also did not receive any evidence demonstrating the practical impact that UKCCIS is having.

55. UKCCIS does not have an enforcement role and there is currently no mechanism to ensure social media companies abide by certain minimum standards. In the 2017 Queen’s Speech, the Government indicated that it intended to bring forward proposals for “a new digital charter”.¹¹⁴ Although what exactly the charter will encompass is not clear, Tara Kaufmann told us that as part of the development work, a new social media code of practice is being discussed.¹¹⁵ In its written evidence, Twitter highlighted that “the laws around online speech are complicated and in many cases were written before the advent of widespread internet access”.¹¹⁶ The Law Commission has indicated that it may consider how the law around online communications may be made clearer within its forthcoming programme of law reform.¹¹⁷

56. We were struck by how little young people seem to have been involved in discussions around social media regulation. Although representatives from Facebook and Twitter contributed to this inquiry, Google declined our invitation to provide oral or written evidence; it is unacceptable that such a large and powerful company has so little interest in the views of young people. Moreover, when our predecessor Committee recommended in 2015 a roundtable of technology companies, young people and the Government in relation to safety online, the Government responded “Large formal groups comprised primarily of adult professionals are not always the best arenas for the most vulnerable young people to make their voices heard.”¹¹⁸ We recognise that young people, particularly those who have had difficult experiences, should be engaged in a number of ways. However, it is not acceptable that young people should be shut out of conversations about our own experiences online, and is patronising to suggest that we and our peers are incapable of engaging with adults. Some of the evidence we received, including from Twitter, supported the principle that young people should have more of a voice in tackling this issue.¹¹⁹

57. The lack of clarity around the law on online communications and the current absence of industry minimum standards mean that social media companies wield significant power in deciding what content is removed and when. We agree with previous Select Committees that social media companies are not taking their responsibilities in moderating and removing harmful content seriously enough. Although it is welcome that UKCCIS brings together key people from industry, government and civil society to discuss these issues, there is a danger it is perceived as a mere talking shop. This is particularly the case as young people are currently excluded from both UKCCIS and conversations about social media regulation more broadly.

112 UKCCIS, [Sexting in schools and colleges: responding to incidents and safeguarding young people](#), 2016; UKCCIS, [Child Safety Online: A Practical Guide for Providers of Social Media and Interactive Services](#), December 2015; Department of Health and Department for Education, [The Government Response to the 2015 Youth Select Committee Report: Young People’s Mental Health](#), January 2016, para 45

113 [Q72](#), [Q98](#) [Karim Palant]

114 HM Government, [Queen’s Speech 2017](#), 21 June 2017

115 [Q173](#) [Tara Kaufmann]

116 Twitter ([BYC074](#))

117 Law Commission, [Should we include these projects in the 13th Programme](#) [accessed 22 September 2017]

118 Department of Health and Department for Education, [The Government Response to the 2015 Youth Select Committee Report: Young People’s Mental Health](#), January 2016, para 46

119 University of Birmingham ([BYC032](#)); Twitter ([BYC074](#))

58. *Social media companies must engage meaningfully with government and civil society to agree minimum standards across industry in relation to content moderation and removal. This could be achieved through a taskforce drawn from UKCCIS. These standards should be enforced through powers set out in the digital charter. UKCCIS should engage more directly with young people, for example appointing a group of young people to act as independent advisors, including in relation to the digital charter.*

59. We heard a number of specific proposals for measures which social media companies could take to minimise the negative impact of their platforms on young people's body image. Shirley Cramer, Chief Executive of the RSPH recommended a voluntary code of practice in which brands, celebrities, and other advertisers agreed to place a small icon on images which have been digitally altered.¹²⁰ We note considerable support for this idea among the young people we heard from, including Elena Veris Reynolds, Kirstie Stage, and Susie Williams.¹²¹ However, Tara Kaufmann suggested that retouching was often used for innocent purposes (for instance, removing a hair which had floated into the picture) and that deciding which instances of digital manipulation needed to be identified under such a system would be complicated.¹²² Moreover, there is some research indicating that the addition of such warning labels is not effective in reducing body dissatisfaction.¹²³

60. We also received suggestions that social media platforms use the data which they hold about users (and which they use to direct advertising) to identify people suffering with body dissatisfaction and make them aware of resources or organisations which may be able to help. This could be modelled on the existing system in which Google displays information about the Samaritans to people who enter search terms related to suicide.¹²⁴ Karim Palant told us that where users reported someone who they were worried about, Facebook would contact that individual with information about the Samaritans.¹²⁵ However, we accept, as Mr Palant pointed out, that there are significant privacy concerns associated with private companies guessing the emotional state of individuals through their use of social media and directing the resources they see accordingly.

61. The RSPH also recommended that users who exceed a certain number of hours on a social media platform should see a pop up warning, potentially alongside links to information and advice on social media addiction.¹²⁶ Mr Palant suggested that most people dislike pop ups and that they may not read them as a result. However, a number of the young people we heard from were highly supportive of the idea as a way of challenging compulsive use of social media. For instance, Kirstie Stage told us:

With social media, it is very easy to get linked into that vicious circle of opening another tab or going on to another app, rather than talking to a friend or making relationships and getting to know new people.¹²⁷

120 RSPH and the Young Health Movement, [#StatusOfMind](#), May 2017; [Q34](#) [Shirley Cramer]

121 [Q34](#) [Elena Veris Reynolds]; [Q154](#) [Susie Williams]; [Q154](#) [Kirstie Stage]

122 [Q103](#) [Karim Palant]

123 The Centre for Appearance Research ([BYC055](#))

124 RSPH and the Young Health Movement, [#StatusOfMind](#), May 2017, p26

125 [Q105](#) [Karim Palant]

126 RSPH and the Young Health Movement, [#StatusOfMind](#), May 2017, p24

127 [Q155](#) [Kirstie Stage]; see also [Q155](#) [Susie Williams]; [Q155](#) [Cameron Wood]

62. We heard numerous proposals for measures that social media companies could take to mitigate the negative effects of their platforms on young people's body image. We accept that both marking images as digitally altered and directing resources to users on the basis of their perceived emotional state have potentially serious drawbacks which need to be investigated in more detail before they can be implemented. However, pop up warnings indicating heavy usage are a simple measure which would make young people more aware their reliance on social media. *The social media code of practice accompanying the digital charter should include a requirement on social media platforms to warn users after they have been using the platform for a certain amount of time. The Department for Digital, Culture, Media and Sport should examine other approaches to encouraging healthy social media use and commit to publishing a consultation on its proposals within the next 12 months.*

4 The role of schools in promoting positive body image

63. Schools have a crucial role to play in promoting positive body image. This can take the form of specific body image classes which provide a space for young people to discuss body image, and can act as an early intervention to address attitudes or behaviours which may lead to body dissatisfaction. However, as we discuss in this chapter, a “whole school approach” encompassing subjects across the curriculum, the ethos of the school, and adequate counselling and nursing support, is also essential.

Teaching body image in schools

64. Schools in England are not currently required to provide lessons about body image, as part of the national curriculum, at any key stage.¹²⁸ However in March 2017, responding to concerns that the social and emotional wellbeing of pupils was being neglected, the Secretary of State for Education announced her intention to make relationships education (in primary schools in England) and relationships and sex education (RSE) (in secondary schools in England) compulsory from 2019.¹²⁹ The Government expects these subjects to focus on: the different types of relationships and, at secondary school, intimate relationships; how to build healthy relationships, including self-respect and respect for others; how relationships may affect health and wellbeing, including mental health; healthy relationships and safety online; and, at secondary school, sex, sexual health and sexuality. Pending further consideration and consultation, the Secretary of State also indicated that she may make personal, social, health and economic (PSHE) classes statutory in the future.¹³⁰ There is clear scope for these classes to include material focusing on body image.

65. Despite not being compulsory, a number of schools do offer body image lessons. However, we heard that some approaches are more effective than others. The Centre for Appearance Research told us of a recent systematic review which suggested that the most effective programmes are “interactive, contain multiple lessons (usually 5–8 lessons), and include activities addressing media literacy, self-esteem, and the influences of peers”.¹³¹ A number of those who gave evidence to the Committee highlighted media literacy in particular as an essential component of any school based intervention, allowing young people to develop the ability to challenge idealised images of the body and eating practices that can contribute to negative body image.¹³² For instance, Karim Palant suggested that Facebook:

...would love to work with everybody in this space to make sure that that curriculum was as interesting and engaging as possible in this area, so that it was able to give people a real sense of what it is like online—to judge

128 Department for Education, [The national curriculum](#) [accessed 22 September 2017]

129 Department for Education, [Schools to teach 21st century relationships and sex education](#), 1 March 2017; Department for Education, [Policy statement: Relationships education, relationships and sex education, and personal social, health and economic education](#), March 2017

130 Department for Education, [Policy Statement: Relationships education, relationships and sex education, and personal, social, health and economic education](#), March 2017

131 The Centre for Appearance Research ([BYC055](#))

132 Dr Barbara Mitra ([BYC012](#)); Association for Young People’s Health ([BYC029](#)); University of Birmingham ([BYC032](#)); Emma Rich ([BYC073](#)); [Q2](#) [Professor Ringrose]; [Q124](#) [Rosamund McNeil]; [Q185](#) [Tara Kaufmann]

between an authentic image or not, or to see themselves for themselves, to share their authentic selves online, have a positive experience online, get the best out of it and find people who share their interests online.¹³³

66. However, there is concern that some schools may be using approaches which have no, or even a detrimental, impact. In her evidence, Dr Diedrich said:

There are a lot of common-sense approaches, like getting guest speakers in to share their experiences or just talk about the issue in general, which may seem at face value to have an impact, but the research shows that it is not effective and, in some cases, can cause harm... There are a lot of programmes in schools in the UK at the moment that have not been tested. That means we do not know if they are actually having a positive impact; we don't know if they are causing harm, and it is a potential waste of resources.¹³⁴

67. Rosamund McNeil from the NUT agreed that there was excellent evidence and research on this issue but suggested that “we are relying on teachers in schools just navigating it themselves, finding resources and making quality assurance decisions themselves”.¹³⁵ However, Tara Kaufmann told us that the Government has funded the PSHE Association to develop guidance on how best to teach body image, including a list of recommended resources.¹³⁶ Ofsted has also promoted work developed by Oak Cottage Primary School as a good practice example promoting body confidence.¹³⁷

68. We welcome the Government’s decision to make RSE and (pending further consideration) PSHE compulsory. Although we appreciate the Department for Education wishes to avoid being too prescriptive, the importance of body image to young people is such that the curriculum should make explicit reference to promoting positive body image. The PSHE curriculum should also include specific reference to media literacy; guidelines on teaching media literacy should be drawn up in concert with industry partners. It is essential that teachers are using evidence based resources in their classes. The Department for Education should assess the effectiveness of its communications channels with teachers in relation to body image to ensure that they have access to up to date research on which approaches work.

69. Classes focused specifically on body image sit most naturally within the PSHE and RSE curriculums. However, this does not mean that positive body image cannot be promoted within other subjects, using a “whole school approach”. In its written evidence, the NUT argued that access to sports and physical activity is critical in developing confidence, wellbeing and positive body image in young people.¹³⁸ Dr Charlotte Kerner, lecturer in Physical Education (PE) and Youth Sport at Brunel University suggested that PE “has the potential to focus attention on the functional capabilities of the body” as opposed to its aesthetics.¹³⁹ Witnesses pointed out numerous other opportunities to discuss body dissatisfaction, for instance through examining lighting and digital manipulation in

133 [Q111](#) [Karim Palant]

134 [Q15](#) [Dr Diedrichs]

135 [Q124](#) [Rosamund McNeil]

136 [Q190](#) [Tara Kaufmann]

137 Ofsted, [Promoting positive body image within primary schools](#), 11 February 2017

138 National Union of Teachers ([BYC039](#))

139 Dr Charlotte Kerner ([BYC042](#))

photography classes or through arts and drama.¹⁴⁰ However, while (as noted above) the PSHE Association provides resources on teaching body image to PSHE teachers, far fewer resources seem to be available to teachers of other subjects.

70. We also heard that the wider school environment can also have a profound impact on body dissatisfaction. For instance, schools often reflect a gender binary, with single sex schools or different uniforms or sports opportunities for boys and girls in mixed sex schools; this can pose challenges for young people who do not conform to this binary.¹⁴¹ Similarly, school uniforms designed for white girls may be ill-fitting for girls of other ethnicities, exacerbating body confidence issues.¹⁴² Other practices within schools which may also have a negative impact on body image include fitness testing, weighing, or teacher commentary around weight or food.¹⁴³ As Kirstie Stage told us, body image:

...should be in the everyday ethos of schools that we are taught values such as diversity, tolerance, acceptance and all those key things, especially from a young age, so that it is clear that it is not okay to exclude people or to bully.¹⁴⁴

71. As detailed in paragraph 12 above, peers are an important influence on body image. We heard numerous examples of peer support being used to promote positive body image in different settings. The Girlguiding “Free Being Me” programme can be delivered by peer educators, while the Be Real Campaign has developed toolkits that allow both teachers and peers to run sessions promoting positive body image.¹⁴⁵ We also received evidence about a body image support group started in 2013 for young people with cancer. The group provides space for a regular, facilitated discussion allowing young people to share their experiences.¹⁴⁶ However, the Committee heard from young people that availability of peer support within schools is not consistent. Cameron Wood told the Committee that he was able to access an extensive peer support network, whilst Susie Williams’ experience of peer support in school was much more limited.¹⁴⁷

72. If it is to be effective, the promotion of positive body image cannot be confined to specific subjects, but must be integrated into schools’ wider approach and harness the power of peer to peer support. Although body image resources are available to PSHE teachers, much less support is available to teachers of other subjects or to those considering how the wider ethos of the school impacts on body dissatisfaction. *The Department for Education should commission guidance for teachers of physical education and other subjects outside of PSHE, and on body image and the school ethos, within the next six months. Specific resources should also be developed to support teachers in encouraging peer to peer support. It is essential that young people are involved in the development of these resources.*

140 [Q29](#) [Liam Preston]

141 [Q6](#) [Professor Ringrose]

142 Professor Jessica Ringrose ([BYC064](#))

143 Dr Emma Rich ([BYC073](#))

144 [Q143](#) [Kirstie Stage]

145 [Q31](#) [Elena Veris Reynolds]; [Q29](#) [Liam Preston]

146 The Christie NHS Foundation Trust and Teenage Cancer Trust ([BYC015](#))

147 [Q160](#) [Cameron Wood]; [Q160](#) [Susie Williams]

School time and resources

73. Although the whole school approach is essential to tackling body dissatisfaction, we heard evidence that pressure on school time and funding was encouraging a narrow focus on academic subjects. For instance, the NUT told the Committee that schools were becoming “exam factories” and that the pressure to meet national performance indicators has resulted in other important topics, including body image, being “squeezed out of the curriculum.”¹⁴⁸ Professor Ringrose also suggested that schools need more resources to focus on wellbeing generally and body image more specifically, arguing that:

Especially in the underprivileged, marginalised communities, there are less and less resources for schools. So really we need wide-scale Government change. We need more resources for what used to be normal in schools—more extracurricular activities—and for it to be built into the formal curriculum as well.¹⁴⁹

Tara Kaufman of the Government Equalities Office, conceded that the Government is:

...obviously very aware of concerns that there is huge pressure on schools and teachers to achieve high exam results, which might be pushing out other issues that are more concerned with students’ wellbeing.¹⁵⁰

74. In July 2017, the Secretary of State for Education announced that schools would receive an additional £1.3 billion over two years in core funding for schools. In view of the issues discussed above, the Committee welcomes extra funding for schools; however, we are concerned that the £1.3 billion has been reallocated from other parts of the Department’s existing budget rather than representing additional money.¹⁵¹ In particular, much of the funding comes from the healthy pupils capital budget, announced in February 2017, which was introduced to fund PE facilities, after school activities, healthy eating, and to provide support to children with physical or mental health conditions.¹⁵² Given the importance of physical activity promoting healthy lifestyles, including a positive body image, we are not convinced that this reallocation of money will serve to improve the wellbeing or body image of pupils.

75. As school budgets have come under pressure, less time has been devoted to activities that support the wellbeing of children and young people. The Government’s recent announcement of £1.3 billion for core funding for schools is simply a reallocation of existing funding, principally from the healthy pupils capital budget which was used to support PE, after school activities, and facilities for pupils with physical or mental health conditions. Such ring-fenced funding is crucial for supporting positive body image and wider wellbeing amongst young people. This approach amounts to robbing Peter to pay Paul. *Instead of shuffling money from one budget to another, the Department for Education must accept that supporting the wellbeing of young people requires additional upfront investment in preventative services. The Department must explain what additional resources will be available to support schools’ core budgets while ensuring that long term capital funding is not neglected.*

148 National Union of Teachers ([BYC039](#))

149 [Q18](#) [Professor Ringrose]

150 [Q217](#) [Tara Kaufmann]

151 Department for Education, [£1.3bn for core schools budget delivers rise in per pupil funding](#), 17 July 2017

152 Department for Education, [New funding to boost schools facilities and healthy lifestyles](#), 28 February 2017

76. The recent changes in education funding have also had an impact on counselling and school nurse provision.¹⁵³ In England, counselling provision in schools is not statutory (as in Wales); nor are schools provided with specific funding (as in Northern Ireland). The NUT told us that the number of health professionals working in school nursing roles in England has declined from 3,026 in January 2010 to 2,599 in July 2016.¹⁵⁴ The NUT also notes that the Education Services Grant, which was used to pay for services such as education welfare services, music, therapies, and other health-related services, has also been cut; in a recent survey of 500 teachers, 55 percent said their school had reduced pastoral support in the last few years.¹⁵⁵ The Government's focus has been on developing links between different services rather than increasing specialist support within schools. A recent pilot jointly funded by the Department for Education and NHS England to support 200 schools to work more closely together with mental health services led to strengthened communication and joint working arrangements; the Government intends to extend the pilot to 1,200 schools.¹⁵⁶

77. Appearing before the Committee, Kirstie Stage, Susie Williams, and Cameron Wood told us of the importance of having school nurses and counsellors who are able to identify potential mental health issues and provide support with body dissatisfaction.¹⁵⁷ In addition, the NHS Youth Forum argued that:

...there is a lack of counsellors, school nurses and mental health experts actually available and easily accessible to young people. As a result many who suffer with low self-esteem, anxiety about their appearance, depression and other mental health conditions feel isolated.¹⁵⁸

78. Wellbeing support in school needs to be underpinned by statutory minimum provision of school nurses and counsellors across the UK and supported by a ring-fenced budget. *The Department for Education should consult on minimum provision as soon as possible, with a view to introducing minimum provision from the 2018/19 school year.*

153 Kirstie Stage ([BYC023](#)); Chloe Lintern ([BYC024](#)); Gresham's School ([BYC025](#)); NHS Youth Forum ([BYC035](#))

154 National Union of Teachers ([BYC039](#))

155 National Union of Teachers ([BYC039](#)); [Q132](#) [Rosamund McNeil]

156 Written evidence submitted by the Government Equalities Office; Department for Culture, Media & Sport; Department for Education; and Department of Health ([BYC066](#))

157 [Q162](#) [Susie Williams]; [Q162](#) [Kirstie Stage]; [Q162](#) [Cameron Wood]

158 NHS Youth Forum ([BYC035](#))

5 Health and body image

79. As discussed above in paragraphs 14 and 15, poor body image is associated with a range of mental health issues including depression, anxiety, and some eating disorders. It is also a predictor for behaviours which have an adverse impact on health, such as smoking, alcohol and drug use, and over-exercising or not exercising. In this chapter we consider whether the emphasis on promoting health by tackling obesity has inadvertently led to increased body dissatisfaction amongst young people. We also examine the different sources of health support which young people with body image issues may access, including online information, primary health care, and specialist support. Finally, we consider the funding available for these services and the scope for young people to influence their design.

Anti-obesity campaigns and body image

80. Reducing obesity, particularly amongst children, is a public health priority. Obese people are more likely to develop health conditions such as type two diabetes, heart conditions, certain cancers, and depression; they are also more likely to have poor body image. Nearly a third of children aged two to 15 are overweight or obese.¹⁵⁹ The Government's Childhood Obesity strategy includes a number of interventions aimed at promoting healthy eating, exercise, and supporting health professionals to discuss weight and nutrition issues.¹⁶⁰ We fully endorse the aim of this initiative, which seeks to ensure that children and young people live healthy lives.

81. However, we received evidence suggesting that some messaging around childhood obesity may be encouraging the widespread but erroneous view that a person's weight is a clear and unambiguous indicator of their health.¹⁶¹ Moreover, because the underlying assumption is often that people can control and shape their bodies through exercise and diet, weight also becomes a measure for laziness or failure.¹⁶² This provides a social license for individuals to comment and judge the weight of others. As Stephanie Yeboah put it:

One of the main detriments we have to face as fat people is that we always have to apologise for being us. We have to apologise for existing, basically. Even if we're not doing anything wrong, we always have to justify and defend our bodies.¹⁶³

82. Perpetuating such stigma is counter-productive; people who have a positive perception of their bodies are more likely to eat healthily and exercise an appropriate amount.¹⁶⁴ In schools, the drive to tackle obesity may lead to approaches which inadvertently encourage poor body image. For instance, one study of young women with severe body dissatisfaction and/or eating disorders found that some had negative experiences at school of being

159 Public Health England, [Health matters: obesity and the food environment](#), 31 March 2017

160 Cabinet Office, Department of Health, HM Treasury, Prime Minister's Office, [Childhood obesity: a plan for action](#), 18 August 2016

161 Dr Emma Rich ([BYC073](#))

162 [Q23](#) [Dr Diedrichs]

163 [Q53](#) [Stephanie Yeboah]

164 [Q23](#) [Dr Diedrichs]

weighed which contributed to their later health issues.¹⁶⁵ As the This Girl Can campaign shows, moreover, it is perfectly possible for healthy living to be promoted without “fat-shaming”.

83. There is no necessary contradiction between encouraging healthy lifestyles which address obesity and body confidence campaigns, as the This Girl Can campaign demonstrates. However, too often anti-obesity campaigns can be interpreted as “fat shaming”. This can be counter-productive, as those with lower body confidence are less likely to have healthy lifestyles. The Government must ensure that health education campaigns around obesity focus on overall physical and mental health rather than too narrowly on weight. Public Health England and the Department for Education must ensure that any guidance to schools around obesity stresses the importance of avoiding the stigmatisation of obesity and offers practical examples of how this can be achieved.

Online and digital support

84. Young people and parents are increasingly turning to social media and digital technologies for health related information.¹⁶⁶ Depending on the perceived credibility of the author, online information can be extremely influential; one study found that 51 percent of young people would consider changing their behaviour in response to information posted by an official organisation.¹⁶⁷ The 2015 Future in Mind report on young people’s mental health recommended that the Government should look at options enabling children, young people, parents and carers to access high quality and reliable online information and support.¹⁶⁸ This recommendation was endorsed by the 2015 Youth Select Committee.¹⁶⁹

85. In October 2015, the Government launched the Youth Mental Health Hub on NHS Choices.¹⁷⁰ The site includes information and guidance on mental health — including videos, interactive elements such as a mood self-assessment, signposting to local mental health services, and links to other online resources — and received 77,313 views between October 2015 and August 2017.¹⁷¹ NHS England recently ran a one off project, the Digital Development Lab, in which developers were invited to submit apps to support children and young people’s mental health; those which meet the quality and safety standards will be added to the NHS app library.¹⁷² The Government funds other resources such as MindEd, an online e-learning resource on young people’s mental health which is aimed at parents and frontline professionals such as teachers, health workers and police officers. It also supports Parent Info, which provides information to parents and carers about their children’s wellbeing and resilience, on topics which include body image, sex, and peer pressure.¹⁷³

165 Dr Emma Rich ([BYC073](#))

166 University of Birmingham ([BYC032](#)); NHS Youth Forum ([BYC035](#)); [Q161](#) [Susie Williams]

167 University of Birmingham ([BYC032](#))

168 NHS Taskforce, [Future in mind: Promoting, protecting and improving our children and young people’s mental health and wellbeing](#), March 2015, para 5.13

169 Youth Select Committee 2015, [Young people’s mental health](#), para 79

170 NHS Choices, [Young people and mental health](#) [accessed 19 October 2017]

171 Department of Health and Department for Education, [The Government Response to the 2015 Youth Select Committee Report: Young People’s Mental Health](#), January 2016, paras 52–4

172 [Q188](#) [Emily Antcliffe]; Department of Health ([BYC070](#))

173 [PQ 47009](#) on Children: Social Media, 17 October 2016; Department of Health and Department for Education, [The Government Response to the 2015 Youth Select Committee Report: Young People’s Mental Health](#), January 2016, para 48; [Q202](#) [Emily Antcliffe]

86. With the exception of Parent Info, none of these projects include resources specifically focused on body image, although the issue is considered in the context of other issues such as anxiety, depression, and eating disorders on the Youth Mental Health Hub and MindEd.¹⁷⁴ We also note that the Youth Mental Health Hub does contain specific resources on other issues that in themselves are also not mental health conditions, including two of the most frequently accessed resources: “Raising low self-esteem” and “Cannabis - the facts”.¹⁷⁵

87. The Department of Health and NHS England have taken significant steps forward in their provision of general online resources on young people’s mental health. However, poor body image is either not addressed at all or buried in other resources. Given the importance of body dissatisfaction as a sub-clinical issue and contributor to other mental health disorders, it deserves greater prominence. *The Department of Health and NHS England should ensure that the suite of Government funded mental health resources, and in particular the Youth Mental Health Hub, includes material specifically focused on body dissatisfaction.*

88. Although the Government does support the development of resources for young people and parents, is not clear how well known these resources are. Susie Williams of the NHS Youth Forum told us that when it came to mental health services “there is a bit of a gap between what they [the Government] are doing and communicating that with young people”.¹⁷⁶ As discussed above in paragraph 11, parents also have an essential role in promoting positive body image in young people. However, Shirley Cramer told the Committee that parents are “desperate” to know and understand about body image issues in young people, and that contradictory pieces in the press make them unsure about the best approach to take.¹⁷⁷ Professor Fonagy echoed the need to ensure parents have access to evidence based information with regard to body image, telling the Committee that if he “had just one recommendation, it would be for more extensive use of evidence-based and probably internet-based support for parents.”¹⁷⁸

89. Despite the importance of their role in promoting positive body image in young people, parents and young people can have difficulty accessing appropriate resources. Evidence based resources do exist but are not widely known about. *The Government Equalities Office should work with the Department for Education and Department of Health, young people and parents to identify communications channels in which resources on body image can be more effectively promoted.*

Initial contact with health services

90. We received evidence that on their first contact with health services, young people with body dissatisfaction may be treated as if they are going through a “phase” rather than exhibiting a symptom which could indicate serious mental distress.¹⁷⁹ There is currently no National Institute for Health and Care Excellence (NICE) guidance or GP training around managing body image concerns before they become clinical issues.¹⁸⁰ We are encouraged that a number of local Healthwatch organisations (the independent champions for health

174 [Q195](#) [Emily Antcliffe]; [Q202](#) [Emily Antcliffe]

175 [Department of Health \(BYC070\)](#)

176 [Q147](#) [Susie Williams]

177 [Q36](#) [Shirley Cramer]

178 [Q12](#) [Professor Fonagy]; [Q24](#) [Professor Fonagy]

179 [Chandler Wilson \(BYC017\)](#); [Beauty Demands Network \(BYC031\)](#)

180 [Dr L Boothroyd, Dr E Evans, Mrs T Thornborrow \(BYC040\)](#)

and social care) have carried out work highlighting body dissatisfaction amongst young people in their area. However, it is not clear what impact this has made on how GPs respond to young people with poor body image.¹⁸¹

91. **On their initial contact with health services, young people with body dissatisfaction are not always treated seriously. *The National Institute for Health and Care Excellence should review the case for producing guidance on body image. The Government Equalities Office should work with NHS England and young people to produce a pack of resources on body image, including a poster for waiting areas, which should be made available to every GP surgery within the next 12 months.***

Specialist mental health services

92. In January 2017, the Prime Minister announced a number of measures to “transform mental health support in our schools, workplaces and communities”, including a “new green paper on children and young people’s mental health to set out plans to transform services in schools, universities and for families.”¹⁸² Emily Antcliffe told us that the Green Paper would be published by the end of the year, and that the two main themes would be around preventing mental ill health and access to services for children and young people who have already experienced difficulties.¹⁸³ We support these themes, both of which are particularly pertinent to the impact that poor body image can have on young people’s mental health. However, when we asked whether the Green Paper would specifically address how body image impacts on mental health, we were told that it would “cover a wide range of issues across children and young people’s mental health”.¹⁸⁴ Given that body image has not traditionally been a central concern of professionals within the Child and Adolescent Mental Health Services (CAMHS), we are concerned that the opportunity presented by the Green Paper to raise the profile of the issue amongst medical professionals will be wasted.¹⁸⁵

93. Moreover, and as discussed above (paragraphs 18–25), the causes and consequences of poor body image vary between different demographic groups and individuals. Liz Ritchie, a body image therapist and psychotherapist, told us that minority groups and LGBT+ groups in particular were still not having their needs met by health services.¹⁸⁶ This was supported by the evidence of Chandler Wilson, a transgender, non-binary young person, who suggested that health professionals were often not trained in supporting gender variant people.¹⁸⁷ Danny Bowman, who was treated for an addiction to taking “selfies” told us:

When it comes to body image, there is not a lot of support for men, and it is not treated with the same level of importance—I don’t think, anyway—as it is for a woman. At the time I was Newcastle-based, and I had to get support from Maudsley hospital in London for my illness. The support was fantastic

181 See for instance Healthwatch Essex, [SWEET! 2](#), July 2017; Healthwatch Leicestershire, [Listen to me: young voices matter](#), June 2016; Healthwatch Sutton, [Body image: the views of young people in Sutton](#) [accessed 31 August 2017]

182 Prime Minister’s Office, [Prime Minister unveils plans to transform mental health support](#), 9 January 2017

183 [Q176–7](#) [Emily Antcliffe]

184 [Q178](#) [Emily Antcliffe]

185 Beauty Demands Network ([BYC031](#))

186 [Q134](#) [Liz Ritchie]

187 Chandler Wilson ([BYC017](#))

when I got it, but there was a period of time that I had to wait, and when there was a lot of uncertainty about what it actually was. I think if I was a woman, there might have been a diagnosis readily available quicker.¹⁸⁸

94. Specialist mental health services for young people which address body image are not adequate; this is particularly the case for certain demographic groups including young men and LGBT+ young people. *The Government must use its forthcoming Green Paper on young people’s mental health to set out proposals which specifically address this lack of support around body image, including body image training for CAMHS professionals. The Green Paper must also address the specific barriers that different demographic groups may face when accessing mental health services for issues associated with body image.*

Funding of mental health services

95. We received evidence suggesting that it was difficult for young people to access support for mental health issues associated with poor body image because the services were overstretched.¹⁸⁹ For instance, we were made aware of research showing that the average waiting time for a first appointment with CAMHS is now six months, and nearly ten months until treatment begins.¹⁹⁰ There was concern that pressure on the services meant that support would only be available for those suffering acute conditions.¹⁹¹ For instance, Susie Williams told us:

If you are a young person and you do not have a school nurse, and it takes two to four weeks to get an appointment with your GP and the counselling list is huge, you cannot go to CAMHS. It’s like, how bad do I need to get for someone to pay attention to me? Do I need to have bulimia or severe anorexia?¹⁹²

96. In its inquiry into young people’s mental health, the 2015 Youth Select Committee described young people’s mental health as the “Cinderella of Cinderella services” because of the disproportionate lack of funding compared to adult mental health services and physical services for all ages.¹⁹³ Emily Antcliffe from the Department of Health told us that the Government has added £1.4 billion for children and young people’s mental health over the last five years; this money is given to Clinical Commissioning Groups (CCGs) which then decide spending based on local priorities. The 2017–18 report on CCG spend showed a 3.9 percent increase in spend on young people’s mental health and a two per cent increase in spending on children and young people’s eating disorders.¹⁹⁴ We heard that while there is no legal power to ring-fence funding to CCGs, CCGs must submit their plans for spending which are then made publicly available.¹⁹⁵ However, research carried out by the charity Young Minds shows that in the first year of extra funding (2015–16)

188 [Q58](#) [Danny Bowman]

189 Kirstie Stage ([BYC023](#))

190 Young Minds, *Mental Health Statistics 2017*, referenced in CLIC Sargent ([BYC010](#))

191 Dr L Boothroyd, Dr E Evans, Mrs T Thornborrow ([BYC040](#))

192 [Q162](#) [Susie Williams]

193 Youth Select Committee 2015, [Young people’s mental health](#), paras 18–19

194 [Q206](#) [Emily Antcliffe]

195 [Q207](#) [Emily Antcliffe]

only 36 percent of CCGs who responded to the Freedom of Information increased their CAMHS spend to reflect the additional funds and 64 percent used some or all of the money to backfill cuts or spend on other priorities.¹⁹⁶

97. **While we welcome the additional funding which has been available for young people’s mental health, evidence of frontline improvements is so far limited and we are concerned that some funding is being used to address cuts in other areas. *The forthcoming Green Paper on Young People’s Mental Health should include proposals for more robust mechanisms to ensure that money intended for young people’s mental health is not spent elsewhere.***

Involvement of young people in the design of mental health services

98. It is crucial that services intended to support young people are developed in conjunction with young people. We heard that the testing process for the Digital Development Lab was focused on clinical effectiveness and did not involve young people, although developers were asked to demonstrate that young people were involved in the design and development of the app.¹⁹⁷ In relation to the forthcoming Green Paper, the Department of Health held a workshop with 21 young people with experience of mental health services and engaged with organisations who work with and represent young people. NHS England also seeks feedback on the Youth Mental Health Hub through a standard user feedback form on the website and a biannual survey.¹⁹⁸

99. We recognise that the Department of Health and NHS England have made attempts to understand the views of young people, but engagement typically seems to be through intermediaries rather than direct contact between young people, officials and ministers. Moreover, by limiting feedback of the Youth Mental Health Hub to those who have used the website, NHS England may be failing to understand why other young people are not using the site. More must be done to directly engage young people. As Susie Williams put it, this involves:

... going into schools and colleges and going to where young people are, instead of expecting them to come out to you, would change things massively. Young people should be involved in making the services and be consulted on what is needed, and when you do have something, in order to communicate that to them, you need to take it to them.¹⁹⁹

100. **We are concerned that the voices of young people are not being heard in the development of mental health services. *Following the publication of the Green Paper on Young People’s Mental Health, the Department of Health should hold a series of engagement events around the country with young people to test the proposals. In the longer term, the Department of Health and NHS England should review how they seek to engage with young people to ensure that young people’s voices are being heard directly, as well as through intermediaries.***

196 Young Minds, [Stop the Leak](#) [accessed 31 August 2017]

197 [Q191](#) [Emily Antcliffe]; Department of Health ([BYC070](#))

198 Department of Health ([BYC070](#))

199 [Q147](#) [Susie Williams]

Conclusions and recommendations

Body dissatisfaction amongst young people and current responses

1. Body dissatisfaction affects a large proportion of young people and can have serious and long lasting consequences for health, education, and wider life outcomes. Idealised images, parents, peers and the general pressure that young people are under to be “perfect” all influence body image. We know that these factors are complex, interconnected and socially embedded, although in many areas gaps remain in our understanding. *We recommend that the Government Equalities Office commission research in the next six months to address current gaps in the evidence base, including on poor body image in pre-adolescents, the link between poor body image and risky behaviours, and the long term impact of poor body image on young people’s education, relationships and agency.* (Paragraph 17)
2. The influences on and impact of poor body image can only be understood by examining the specific context in which they occur. The social expectations and challenges associated with gender, gender identity, sexual orientation, ethnicity, disability, and socioeconomic background are all reflected in body image. (Paragraph 25)
3. We commend the work carried out by the Be Real Campaign, Girlguiding, Sport England and others in promoting body confidence. However, many of the most visible campaigns are directed at women. While we accept that women are often particularly susceptible to body dissatisfaction, there is a danger that the distinctive challenges faced by young men, LGBT+ youth, ethnic minorities, and those with disabilities or serious illnesses are overlooked. *The Government Equalities Office should work with the Be Real campaign and relevant interest groups to develop resources and support specific to these groups, alongside the more generic offering, within the next six months. The Government Equalities Office should also provide support to ensure that the target groups are aware of the support available.* (Paragraph 30)
4. *In order to increase the awareness and uptake of resources, we recommend that the Government establish an annual National Body Confidence week to act as a focus for body image activities and to encourage involvement from a wider range of organisations. This initiative should be run jointly by the Departments of Health, Education and Digital, Culture, Media and Sport to ensure participation of health professionals, educational establishments, sports clubs, advertisers, and others.* (Paragraph 32)
5. While both equality ministers also have education responsibilities it is difficult for the Government Equalities Office to provide the necessary leadership on body image. *We reiterate the 2016 Youth Select Committee’s recommendation that a Government Equalities Office minister who is responsible exclusively for equalities issues be appointed.* (Paragraph 34)
6. The required commitment to addressing body image issues across Whitehall is currently lacking, as indicated by the Department for Digital, Culture, Media and Sport failing to provide an official to give oral evidence to our inquiry. More

must be done to embed body image as a policy area across relevant departments. *Specific recommendations for particular departments are set out later in this Report.* (Paragraph 36)

Advertising and digital

7. The Committee welcomes the Advertising Standards Agency project in relation to harmful gender stereotypes, which we know can contribute to poor body image, and its commitment to formulate stricter rules in this respect. We agree that the rules on inappropriate sexualisation and adverts which suggest that it is acceptable to be unhealthily thin need clarification, and look forward to the Committee of Advertising Practice bringing forward new rules which reflect this evidence by the end of the year. However, regulation is only part of the answer - we also need to see a culture change across industry. This involves brands committing to using more diverse models and paying more than lip service to this commitment. *The Government Equalities Office should organise a series of workshops with the Be Real Campaign and major brands to encourage a greater uptake of the Body Image Pledge. The workshops should also explore how brands can achieve real, rather than superficial, diversity in their advertising.* (Paragraph 43)
8. Social media can have serious and detrimental effects on the body image of young people. However, we must not lose sight of the extent to which social media can promote body positivity through allowing young people to connect with individuals with similar experiences and take control of their own image. The scale and speed with which social media has become an integral part of young people's lives means too little is known about its impact. *We recommend that the Department for Digital, Culture, Media and Sport, working with the Government Equalities Office, commissions research with young people in the next six months examining the positive and negative impact of social media on young people's body image.* (Paragraph 51)
9. The lack of clarity around the law on online communications and the current absence of industry minimum standards mean that social media companies wield significant power in deciding what content is removed and when. We agree with previous Select Committees that social media companies are not taking their responsibilities in moderating and removing harmful content seriously enough. Although it is welcome that UKCCIS brings together key people from industry, government and civil society to discuss these issues, there is a danger it is perceived as a mere talking shop. This is particularly the case as young people are currently excluded from both UKCCIS and conversations about social media regulation more broadly. (Paragraph 57)
10. *Social media companies must engage meaningfully with government and civil society to agree minimum standards across industry in relation to content moderation and removal. This could be achieved through a taskforce drawn from UKCCIS. These standards should be enforced through powers set out in the digital charter. UKCCIS should engage more directly with young people, for example appointing a group of young people to act as independent advisors, including in relation to the digital charter.* (Paragraph 58)

11. We heard numerous proposals for measures that social media companies could take to mitigate the negative effects of their platforms on young people's body image. We accept that both marking images as digitally altered and directing resources to users on the basis of their perceived emotional state have potentially serious drawbacks which need to be investigated in more detail before they can be implemented. However, pop up warnings indicating heavy usage are a simple measure which would make young people more aware their reliance on social media. *The social media code of practice accompanying the digital charter should include a requirement on social media platforms to warn users after they have been using the platform for a certain amount of time. The Department for Digital, Culture, Media and Sport should examine other approaches to encouraging healthy social media use and commit to publishing a consultation on its proposals within the next 12 months.* (Paragraph 62)

The role of schools in promoting positive body image

12. We welcome the Government's decision to make RSE and (pending further consideration) PSHE compulsory. *Although we appreciate the Department for Education wishes to avoid being too prescriptive, the importance of body image to young people is such that the curriculum should make explicit reference to promoting positive body image. The PSHE curriculum should also include specific reference to media literacy; guidelines on teaching media literacy should be drawn up in concert with industry partners. It is essential that teachers are using evidence based resources in their classes. The Department for Education should assess the effectiveness of its communications channels with teachers in relation to body image to ensure that they have access to up to date research on which approaches work.* (Paragraph 68)
13. If it is to be effective, the promotion of positive body image cannot be confined to specific subjects, but must be integrated into schools' wider approach and harness the power of peer to peer support. Although body image resources are available to PSHE teachers, much less support is available to teachers of other subjects or to those considering how the wider ethos of the school impacts on body dissatisfaction. *The Department for Education should commission guidance for teachers of physical education and other subjects outside of PSHE, and on body image and the school ethos, within the next six months. Specific resources should also be developed to support teachers in encouraging peer to peer support. It is essential that young people are involved in the development of these resources.* (Paragraph 72)
14. As school budgets have come under pressure, less time has been devoted to activities that support the wellbeing of children and young people. The Government's recent announcement of £1.3 billion for core funding for schools is simply a reallocation of existing funding, principally from the healthy pupils capital budget which was used to support PE, after school activities, and facilities for pupils with physical or mental health conditions. Such ring-fenced funding is crucial for supporting positive body image and wider wellbeing amongst young people. This approach amounts to robbing Peter to pay Paul. *Instead of shuffling money from one budget to another, the Department for Education must accept that supporting the wellbeing of young people requires additional upfront investment in preventative services. The Department must explain what additional resources will be available to support schools' core budgets while ensuring that long term capital funding is not neglected.* (Paragraph 75)

15. Wellbeing support in school needs to be underpinned by statutory minimum provision of school nurses and counsellors across the UK and supported by a ring-fenced budget. *The Department for Education should consult on minimum provision as soon as possible, with a view to introducing minimum provision from the 2018/19 school year.* (Paragraph 78)

Health and body image

16. There is no necessary contradiction between encouraging healthy lifestyles which address obesity and body confidence campaigns, as the This Girl Can campaign demonstrates. However, too often anti-obesity campaigns can be interpreted as “fat shaming”. This can be counter-productive, as those with lower body confidence are less likely to have healthy lifestyles. *The Government must ensure that health education campaigns around obesity focus on overall physical and mental health rather than too narrowly on weight. Public Health England and the Department for Education must ensure that any guidance to schools around obesity stresses the importance of avoiding the stigmatisation of obesity and offers practical examples of how this can be achieved.* (Paragraph 83)
17. The Department of Health and NHS England have taken significant steps forward in their provision of general online resources on young people’s mental health. However, poor body image is either not addressed at all or buried in other resources. Given the importance of body dissatisfaction as a sub-clinical issue and contributor to other mental health disorders, it deserves greater prominence. *The Department of Health and NHS England should ensure that the suite of Government funded mental health resources, and in particular the Youth Mental Health Hub, includes material specifically focused on body dissatisfaction.* (Paragraph 87)
18. Despite the importance of their role in promoting positive body image in young people, parents and young people can have difficulty accessing appropriate resources. Evidence based resources do exist but are not widely known about. *The Government Equalities Office should work with the Department for Education and Department of Health, young people and parents to identify communications channels in which resources on body image can be more effectively promoted.* (Paragraph 89)
19. On their initial contact with health services, young people with body dissatisfaction are not always treated seriously. *The National Institute for Health and Care Excellence should review the case for producing guidance on body image. The Government Equalities Office should work with NHS England and young people to produce a pack of resources on body image, including a poster for waiting areas, which should be made available to every GP surgery within the next 12 months.* (Paragraph 91)
20. Specialist mental health services for young people which address body image are not adequate; this is particularly the case for certain demographic groups including young men and LGBT+ young people. *The Government must use its forthcoming Green Paper on young people’s mental health to set out proposals which specifically address this lack of support around body image, including body image training for CAMHS professionals. The Green Paper must also address the specific barriers that different demographic groups may face when accessing mental health services for issues associated with body image.* (Paragraph 94)

21. While we welcome the additional funding which has been available for young people's mental health, evidence of frontline improvements is so far limited and we are concerned that some funding is being used to address cuts in other areas. *The forthcoming Green Paper on Young People's Mental Health should include proposals for more robust mechanisms to ensure that money intended for young people's mental health is not spent elsewhere.* (Paragraph 97)
22. We are concerned that the voices of young people are not being heard in the development of mental health services. *Following the publication of the Green Paper on Young People's Mental Health, the Department of Health should hold a series of engagement events around the country with young people to test the proposals. In the longer term, the Department of Health and NHS England should review how they seek to engage with young people to ensure that young people's voices are being heard directly, as well as through intermediaries.* (Paragraph 100)

Witnesses

Friday 7 July, Morning session

Question number

Dr Philippa Diedrichs, Associate Professor, Centre for Appearance Research, University of the West of England, **Professor Peter Fonagy**, Professor of Contemporary Psychoanalysis and Developmental Science, University College London and Chief Executive Officer, Anna Freud Centre, and **Professor Jessica Ringrose**, Professor of the Sociology of Gender and Education, University College London Institute of Education

[Q1–24](#)

Shirley Cramer CBE, CEO, Royal Society for Public Health, **Kate Dale**, Strategic Lead, Brand and Digital, Sport England, **Liam Preston**, Senior Parliamentary and Policy Officer, YMCA, Be Real Campaign, and **Elena Veris Reynolds**, Advocate, Girlguiding

[Q25–42](#)

Friday 7 July, Afternoon session

Danny Bowman, Mental health and body image campaigner, **Chidera Eggerue**, fashion blogger and ambassador for the ICA and Mobo Awards, **Harnaam Kaur**, body confidence activist, anti-bullying activist and model, **Bethany Rutter**, body confidence and fashion blogger, and **Stephanie Yeboah**, style and inclusivity blogger and mental health and body confidence activist

[Q43–69](#)

Karim Palant, Public Policy Manager UK, Facebook and Instagram

[Q70–111](#)

Friday 14 July, Morning session

Natasha Devon MBE, Founder, Self-Esteem Team, **Rosamund McNeil**, Head of Education and Equality Policy, National Union of Teachers, and **Liz Ritchie**, Body image therapist and psychotherapist, St Andrews Healthcare

[Q112–139](#)

Kirstie Stage, Member of the Youth Parliament for West Wiltshire, **Susie Williams**, NHS Youth Forum, and **Cameron Wood**, Young Persons Network, Herefordshire

[Q140–166](#)

Friday 14 July, Afternoon session

Emily Antcliffe, Deputy Director for Mental Health, Department of Health, and **Tara Kaufmann**, Head of Women's Engagement and Gender Representation, Government Equalities Office

[Q167–228](#)

List of published written evidence

The following written evidence can be viewed on the [British Youth Council's website](#).

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- 29 [Association for Young People's Health](#)
- 30 [Sheena Amos Youth Trust \(SAYiT\)](#)
- 31 [Beauty Demands Network](#)
- 32 [University of Birmingham](#)
- 33 [HBSC team at CRIPACC, University of Hertfordshire](#)
- 34 [Focus The Identity Trust](#)
- 35 [NHS Youth Forum](#)
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- 37 [Royal College of Paediatrics and Child Health](#)

- 38 [Fixers](#)
- 39 [National Union of Teachers](#)
- 40 [Dr L Boothroyd, Dr E Evans, Mrs T Thornborrow](#)
- 41 [Plymouth Young People Group](#)
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About the British Youth Council

The British Youth Council works to ensure that every young person is empowered to create social and political change. As the national youth council of the UK, the British Youth Council brings young people together to find their voice and use it to improve the lives of young people. We work with others to amplify young people's voices to create an environment in which young people views are valued, sought and acted upon.

We are youth led

Young people are agents of change and will always be at the forefront of our work. As a youth-led charity, young people are our leadership through our governance structures. They lead and shape our work, and we support them to define their own action for change. We champion youth leadership across all sections of society, evidencing the benefits of engaging young people in decision making and delivery and supporting that to happen.

We are collaborative

We actively seek to collaborate with others to make positive change happen. We seek to work with relevant partners to add value to our campaigns and activity, and to be more creative in our approach to making change happen with and for young people. We recognise the skills, knowledge and experience of young people, volunteers, staff and partners, and strive to achieve more by maximising the opportunities that collaboration provides.

We are inclusive

We respect and value diversity and act in a way that includes all. We ensure that all our activities are inclusive, recognising the needs of young people across different communities, and bring young people and partners together to learn from each other.

For more information about the British Youth Council visit www.byc.org.uk, email info@byc.org.uk or call 020 7250 8374.

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