

**THE INFLUENCE OF INTEROCEPTIVE AWARENESS ON BODY
DISSATISFACTION AND THE MEDIATING ROLE OF SELF-DISGUST AND
PHYSICAL APPEARANCE COMPARISONS**

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Abstract

Prior research has investigated the effects of interoceptive awareness and potential factors contributing to body dissatisfaction. The present study distinguishes itself from prior work by including physical appearance comparisons and self-disgust as potential mediators in the relationship between interoceptive awareness and body dissatisfaction. This study used results from the anxiety-related processes and body image disturbances (2022) survey and selected 178 female participants between 18 and 71 years with a mean age of 24 years that completed the MAIA-II questionnaire, the Physical Appearance Comparison Scale-3, the Body Attitude Test and the Self-disgust Scale. A sequential mediation between interoceptive awareness and body dissatisfaction with the mediators physical appearance comparison and self-disgust was hypothesized. The results demonstrated a negative effect of interoceptive awareness on physical appearance comparisons, self-disgust and body dissatisfaction. Moreover, physical appearance comparison was found to be linked with self-disgust and body dissatisfaction, and self-disgust was linked with body dissatisfaction. Most importantly, a sequential mediation effect of physical appearance comparisons and self-disgust on the relation between interoceptive awareness and body dissatisfaction has been found. However, including the mediators resulted in a non-significant direct effect of interoceptive awareness on body dissatisfaction. The findings of this study provide valuable new insights and implications for prospective research.

Key words: Interoceptive Awareness, Body Dissatisfaction, Physical Appearance Comparisons, Self-disgust

Introduction

When a person's internalized ideal does not happen to match the self-image of said person, he or she is likely to suffer from an impaired self-esteem and heightened self-criticism (Silberstein et al., 1988). A mismatch between the internalized ideal and the self-image describes the experience of body dissatisfaction. Previous studies have found a body dissatisfaction prevalence of 23-46% adolescent girls and 9-26% in adolescent boys (Neumark-Sztainer et al., 2004; Presnell et al., 2004; Stice & Whitenton, 2002) and 11-72% for adult women and 8-61% for adult men (Fiske et al., 2014). This dissatisfaction seems to increase until young adulthood (Bucchianeri et al., 2013) and decreases gradually in later adulthood (Esnaola et al., 2010). Being dissatisfied with one's own body can lead to several mental health problems, such as a lower satisfaction with one's physical attractiveness and sexuality (Silberstein et al., 1988). It can further cause a negative evaluation of physical qualities, such as stamina and strength, (Silberstein et al., 1988) and is linked to eating disorders such as anorexia nervosa (Borzekowski & Bayer, 2005). Due to its grave impact, it is important to further investigate the concept of body dissatisfaction to reduce or help to prevent the development of body dissatisfaction and the mental health problems associated with it. Therefore, the present study aims to explore potential factors that contribute to body dissatisfaction.

In a previous study by Todd et al. (2019), a possible relationship between interoceptive awareness and body dissatisfaction has been found. Interoceptive awareness is a concept often used to measure interoceptive abilities (Szulc, 2019). Interoceptive ability is the ability to sense the physiological state of one's own body (Hielscher & Zopf, 2021) and interoceptive awareness describes the metacognitive awareness and the self-reported detections of internal bodily sensations (Szulc, 2019). The study of Todd et al. (2019) examined how interoceptive awareness influences the body image, a concept that includes body dissatisfaction (Todd et al., 2019). Using the MAIA questionnaire (Mehling et al., 2019) different aspects of interoceptive

awareness, namely the awareness of body sensations, attention regulation, emotional awareness, self-regulation, body listening and trusting, were assessed and tested for an effect on different variables of body image, such as body appreciation and body pride. The results of this study showed a significant negative correlation between the variables of interoceptive awareness and body image. In other words, they found that a low interoceptive awareness is linked with a more negative view on one's body. Moreover, Brown et al. (2020) conducted a study on interoceptive awareness and eating disorder symptoms and found a link between interoceptive awareness and dissatisfaction with one's body shape and weight. These findings support the conclusion that a lower attentiveness to interoceptive stimuli might lead to body dissatisfaction. This relationship can potentially be explained with the theory of Pennebaker (Ainley & Tsakiris, 2013), that an individual focuses their attention toward the cue, either external or internal, they find most salient. In an individual with a low interoceptive awareness, the external cue is generally the more salient cue, which leads to a predominant focus on external stimuli, such as visual cues. Increased attention towards the visual aspects of the self then increases the possibility of body dissatisfaction (Todd et al., 2019).

A construct that has been linked to both interoceptive abilities and body dissatisfaction, and that could be a potential mediator of the two variables, is self-disgust. Self-disgust or disgust elicited by the self (Powell et al., 2013) is a negative emotion defined by feelings of physical nausea and social withdrawal (Clarke et al., 2018). It is associated with several mental health issues such as trauma-related disorders, mood disorders, symptoms of obsessive-compulsive disorder and borderline personality disorder (Clarke et al., 2018). Stasik-O'Brien and Schmidt (2018) found a link between body-image disturbances, a construct closely related with body-dissatisfaction, and heightened self-disgust. Akram et al. (2021) support these findings and point out that self-disgust could indeed contribute to experiencing body-image disturbances. They suggest that body-image disturbances may emerge through negative emotional experiences directed toward the self such as self-disgust. As for interoceptive

awareness and self-disgust, Moncrieff-Boyd et al. (2013) found a potential relationship between a reduced sensitivity to internal body signals, body awareness and self-disgust. In addition, Bou Khalil et al. (2021) found that heightened self-disgust and disturbed interoceptive abilities often occur together in patients with Anorexia Nervosa (AN) and point out a possible relationship between disgust and internal cues such as interoception. Moncrieff-Body et al. (2013) explain this relationship with the feeling that something is wrong or different about one's own body which is caused by a low sensitivity to internal body signals and body awareness. This feeling of "*otherness*" or "*wrongness*" then induces a feeling of disgust directed toward the self. Having a reduced sensitivity to internal body signals and a low body awareness, points toward a low interoceptive awareness and thus, an effect of interoceptive awareness on the experience of self-disgust seems plausible. Additionally, Holly (2020) conducted research about interoception and suggests that interoception forms affective feelings such as empathy and disgust.

Another construct that has gained attention in the field of psychology is physical appearance comparison. Physical appearance comparison describes the tendency to compare one's on physical appearance with the physical appearance of another person (Schaefer & Thompson, 2018). Through social media platforms and in real-life people compare their appearances with others. This can cause a feeling of inferiority of one's own appearance and thus often leads to a higher dissatisfaction of one's own weight and appearance (McComb & Mills, 2021). Fardouly and Vartanian (2016) who investigated the relationship between social media and body image, named physical appearance comparison as an important explanatory factor for this relationship. Furthermore, social comparison processes might influence the development of self-disgust. Ypysilanti (2018) suggests that an explanation for the development of self-disgust is the internalization of the comparison process that interplays with other factors, such as a predisposition toward disgust. Palmeira et al. (2017) indicate a similar process; they state that self-disgust could have its origin, amongst others in social comparisons.

They explain that social comparisons and other social learning experiences teach the individual about what others may find repulsive and thus cause a sense of repulsion in the individual as well. This relationship however, is not yet fully understood and more research is needed to find evidence for this relationship. Moreover, physical appearance comparisons seem to be negatively correlated with interoceptive awareness (Szulc, 2019; Ainley & Tsakiris, 2013). Ainley and Tsakiris (2013) explain this with the theory of Pennebaker mentioned above, namely that an individual focuses their attention toward the most salient cue and that in an individual with a low interoceptive awareness, the external cue is generally more salient. This then leads to a predominant focus on external stimuli and thus an increased tendency to engage in physical appearance comparisons. Taking the previously mentioned findings into account, physical appearance comparison might be another mediator of the relationship between interoceptive awareness and body dissatisfaction.

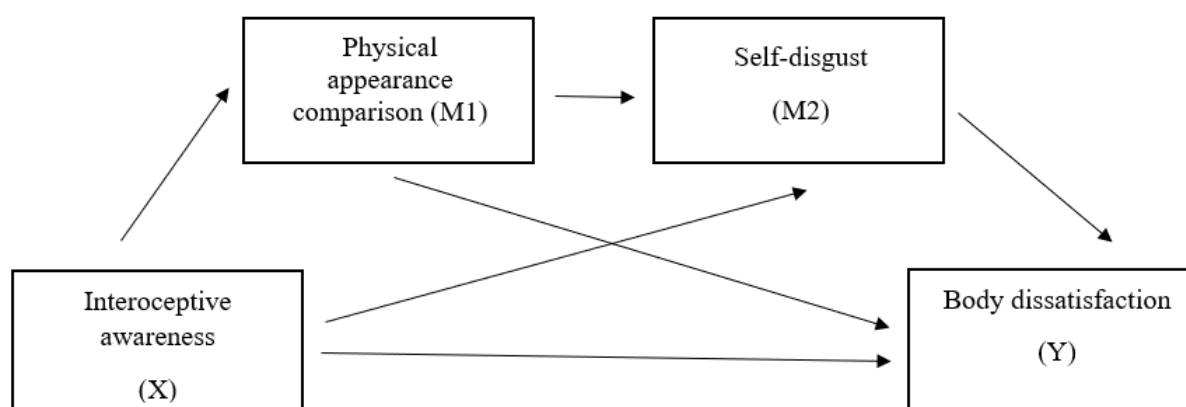
After examining these constructs, their importance and some of their relations, it is evident that more exploration is needed on the relationship between interoceptive abilities and body dissatisfaction, and how physical appearance comparisons and self-disgust might explain this relationship. The potential relationship between interoceptive abilities and self-disgust (Moncrieff-Boyd et al., 2013; Bou Khalil et al., 2021; Holly, 2020) should be explored further. Moreover, physical appearance comparison and self-disgust have both been associated with interoceptive awareness and body dissatisfaction and a relationship between the physical appearance comparisons and self-disgust has been indicated. However, a potential sequential mediation effect of physical appearance comparisons and self-disgust on the relationship between interoceptive awareness and body dissatisfaction has not been investigated yet. Additionally, a large part of body image research as well as some of the studies mentioned above (McComb & Mills, 2021; Szulc, 2019) have only included women in their sample. This is likely due to the assumption that issues such as body dissatisfaction and eating disorders are mainly female issues (Jones & Morgan, 2010; Primus, 2014). However, other potential

correlations have not or hardly been investigated for either gender. This is why the purpose of the present study is to answer the question of how interoceptive abilities and body dissatisfaction are related to each other in women, and how physical appearance comparison and self-disgust might present as mediators in this relationship.

The following hypotheses will be examined in this study. The first hypothesis that will be investigated is that lower interoceptive abilities are associated with heightened body dissatisfaction (Brown et al., 2020; Todd et al., 2019), more frequent physical appearance comparisons (Szulc, 2019; Ainley & Tsakiris, 2013), as well as higher levels of self-disgust (Bou Khalil et al., 2021; Holly, 2020; Moncrieff-Boyd et al., 2013). The second hypothesis suggests that more frequent physical appearance comparison is associated with higher levels of self-disgust (Palmeira et al., 2017; Ypsilanti, 2018) and a heightened body dissatisfaction (Fardouly & Vartanian, 2016; McComb & Mills, 2021). The third hypothesis is that higher self-disgust is associated with higher body dissatisfaction (Akram et al., 2021; Stasik-O'Brien & Schmidt, 2018). Lastly, hypothesis four proposes that the relationship between lower interoceptive abilities and heightened body dissatisfaction is mediated by physical appearance comparison and self-disgust. Figure 1 visualizes the model that will be investigated.

Figure 1

Sequential mediation model



Method

Participants

This study used the anxiety-related processes and body image disturbances (2022) survey results. The responses to this cross-sectional survey are stored in a dataset. In total, the dataset contained the responses of 456 adults between 18 and 71 ($M=23.87$, $SD=6.75$) that filled out a range of self-report questionnaires regarding psychological constructs such as body-dissatisfaction, self-disgust and interoceptive awareness. To determine the sample for the present study, all male participants and participants that did not complete the MAIA-II questionnaire (Mehling et al., 2018), the Physical Appearance Comparison Scale-3 (Schaefer & Thompson, 2018), the Body Attitude Test (Probst et al., 1995), and the Self-disgust Scale (Powell et al., 2014) or that had not answered questions in any of these questionnaires were removed from the dataset. As a result, the sample in this research consisted of 178 female participants aged between 18 and 71 ($M=23.77$, $SD=7.42$). The majority of participants indicated to be European (96.1%, $n=171$).

Measures

Interoceptive Awareness. To assess interoceptive awareness participants completed the Multidimensional Assessment of Interoceptive Awareness Version 2 (MAIA-II) questionnaire (Mehling et al., 2018). The MAIA-II is a widely used questionnaire to measure 8 different aspects of interoceptive awareness, such as awareness of body sensations, emotional awareness, body listening and attention regulation. It includes 37 items that are rated on a 6-point scale of “never” (1) to “always” (6). Examples of the items are “*I notice where in my body I am uncomfortable*” and “*I trust my body sensations.*” After reverse coding the negatively-worded items (item 5, 6, 7, 8, 9, 10, 11, 12 and 15), the mean of all items together made the total score of the participant. The scores could range between 8 and 48. A higher total score reflects a higher interoceptive awareness. The MAIA-II yielded a medium to good

reliability for each of the 8 different aspects of interoceptive awareness in the original study with a Cronbach's alpha between 0.64 and 0.83 (Mehling et al., 2018). In the present sample, Cronbach's alpha of the aspects was between 0.71 and 0.89. This indicated an overall good reliability. Moreover, the MAIA-II showed a moderate to strong validity with item-scale correlations between 0.30 and 0.89 (Mehling et al., 2018)

Physical appearance comparison. The frequency of the physical appearance comparison was assessed using the Physical Appearance Comparison Scale-3 (PACS-3) (Schaefer & Thompson, 2018). The PACS-3 consists of 9 items with two sub-questions for each item. An example for the items and sub-questions is *"When I watch television, I compare my weight/shape to the weight/shape of the actors/actresses,"* with sub-questions: *"When I make these comparisons, I typically believe that I look _____ than the person to whom I am comparing myself."* and *"When you make these comparisons, how does it usually make you feel?"* In the present study the main focus for physical appearance comparisons is on the frequency of the comparisons. Thus, only the questions that target this are being included, which results in 9 items in total. The participants rate each item on a 5-point scale ranging from "never" (1) to "always" (5). Scores ranging from 9-45 were possible, a higher score indicating a more frequent physical appearance comparison. The original study has found the internal consistency to be high in women ($\alpha=.85$) (Schaefer & Thompson, 2018). For the current sample, the internal reliability of the PACS-3 was excellent ($\alpha=.92$). The item-total correlation of the questionnaire ranged between 0.59 and 0.84 which translates into a medium to high validity (Schaefer & Thompson, 2018).

Self-disgust. Self-disgust was measured with the Self-disgust Scale Revised (SDS-R) by Powell et al. (2014). The SDS features 22 questions on a 7-point scale ranging from "strongly disagree" (1) to "strongly agree" (7). The negatively-worded items have to be recoded and the mean of all items together makes the total score of the participant. The lowest score possible is

a 9 and the highest score possible is a 154 with a higher score indicating a higher self-disgust. Example questions of the SDS are “*I find myself repulsive*” and “*I feel good about the way I behave.*” Internal reliability was found to be high in the present sample ($\alpha=.93$).

Body dissatisfaction. To measure body dissatisfaction, participants completed the Body Attitude Test (BAT) (Probst et al., 1995). The BAT uses 20 items that concern the participants attitude towards their body in order to assess how satisfied the participant is with their physical appearance. The items are questions such as “*I feel my body as a burden*” and “*I envy others for their physical appearance.*” The participant rates these questions on a 6-point scale from “never” (1) to “always” (6). After reverse coding the negatively worded items the mean of the items makes the score of the participant, with a higher score indicating a higher body dissatisfaction. Scores between 20 and 120 are possible. Probst et al. (1995) found to BAT to show a high internal consistency ($\alpha = .93$). For the current sample the reliability was also high ($\alpha = .94$). Further, the BAT shows a medium to high convergent and divergent validity ($r=0.21-0.93$) (Probst et al., 1995).

Procedure

The study was approved by the Ethical Review Board of the Faculty of Social and Behavioural Sciences of Utrecht University (22-0925) and the participants received an information letter before completing the survey and signed the informed consent (see Appendix). The questionnaire was administered over the online software Qualtrics and took approximately 30 minutes to answer. The questions were presented in the same order for each participant. The participants were able to terminate the study at any point. Students that participated and accessed the questionnaire over the SONA system of the Utrecht University were awarded 0.5 PPU credits.

Data analysis

Data analyses were conducted through the IBM Statistical Package for the Social Sciences (SPSS) version 28 (IBM Corp., 2021). Further, the PROCESS macro (Version 4.0; Hayes, 2022) was utilized for the mediation analysis. Before conducting the analysis, the assumptions of the statistical analysis, namely normality, multicollinearity, linearity and independence were tested for. Further, the dataset was tested for outliers. The cut-off score for outliers was set at ± 3 standard deviations or further from 0. The alpha to determine significance in this study is 0.05.

Results

The assumptions of linearity, multicollinearity and independence were met and no outliers were found in the sample. However, the normality test showed a slight deviation. Since no outliers were found in the sample, this deviation stems from a skewedness to the right. Nevertheless, since the Kurtosis showed no abnormalities and the sample size is high, the sample is robust to the violation of the normality assumption (Field, 2020).

Table 1 presents the descriptive statistics for each measure included in the model.

Table 1*Means, Standard Deviations, Minimum and Maximum Scores for the Measures*

Measure	M(SD)	Minimum	Maximum
IA (MAIA-II)	28.88 (5.23)	12.86	43.99
Body dissatisfaction (BAT)	60.51 (20.85)	24	114
Physical Appearance Comparisons (PACS-3)	25.86 (8.33)	10	46
Self-disgust (SDS-R)	63.97 (21.82)	27	124

Note. MAIA-2 = Multidimensional Assessment of Interoceptive Awareness (Version 2);

BAT = Body Attitude Test; PACS-3 = Physical Appearance Comparison Scale (Version 3);

SDS-R = Self-disgust Scale (Revised)

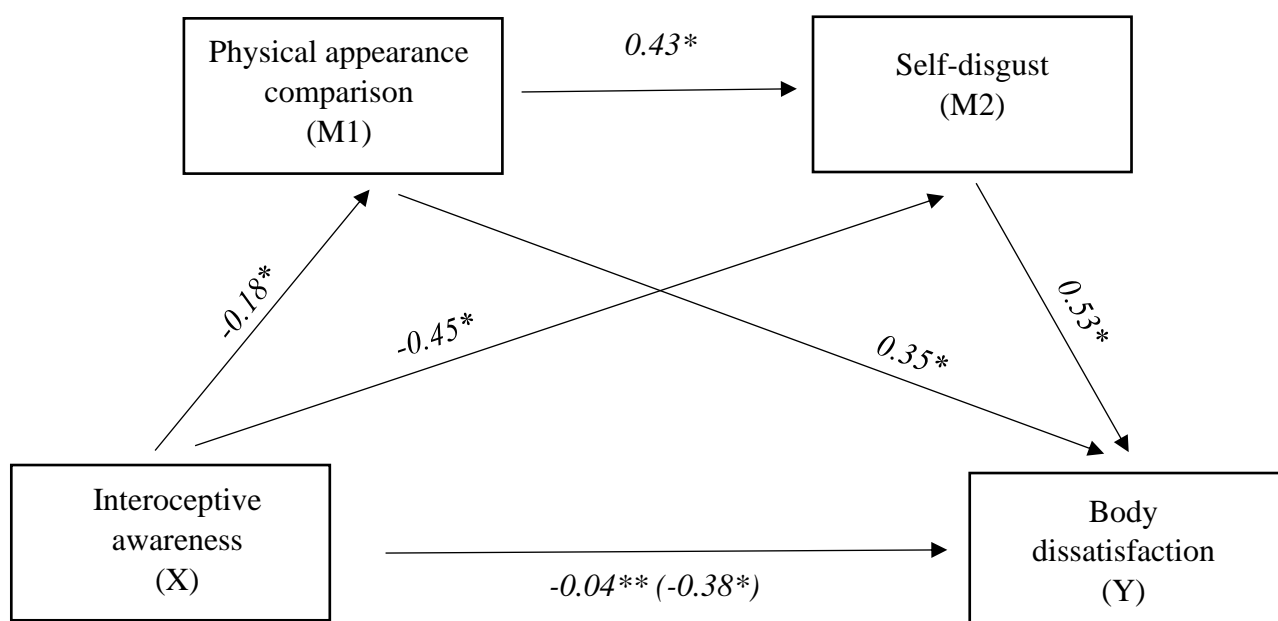
All the hypotheses were tested by running a sequential mediation model in PROCESS model template 6 (Hayes, 2022). The results of the regression analyses are shown as standardized regression coefficients in Figure 2. A significant total effect ($b=-1.51$, $F(1,176)=29.37$, $p<.001$) of interoceptive awareness on body dissatisfaction was found, with 14.3% of the variance in body dissatisfaction explained by interoceptive awareness. Further, interoceptive awareness had a significant negative effect on physical appearance comparison ($b=-0.29$, $t(177)=-2.43$, $p=.016$) and self-disgust ($b=-1.86$, $t(177)=-7.86$, $p<.001$). Moreover, physical appearance comparisons displayed a significant positive effect on self-disgust ($b=1.13$, $t(177)=7.63$, $p<.001$) and on body dissatisfaction ($b=0.87$, $t(177)=6.27$, $p<0.001$). The analysis testing whether self-disgust has a positive effect on body dissatisfaction, also showed a significant positive effect. ($b=0.51$, $t(177)=8.39$, $p<0.001$). A total amount of 45.60% of the variance in body dissatisfaction can be explained by interoceptive awareness and self-disgust

($F(2.175)=73.27, p>.001$). Finally, a total amount of 61.80% of variance in body dissatisfaction can be explained by interoceptive awareness, physical appearance comparison and self-disgust together ($F(3.174)=93.846, p>.001$).

The direct effect of interoceptive awareness on body dissatisfaction ($b=-0.15, t(177)-0.66, p=.509$) was found to be insignificant when including physical appearance comparison and self-disgust as mediators. Lastly, self-disgust (95% BCa CI [-.32; .16]), physical appearance comparison (95% BCa CI [-.12; -.01]), and physical appearance comparison and self-disgust together (95% BCa CI [-.09; -0.01]) were significant mediators for the relationship between interoceptive abilities and body dissatisfaction.

Figure 2

Standardized coefficients



Note. All coefficients are reported in standardized form. The total effect derived from step 1 of the mediation analysis is displayed in parentheses.

* $p<.001$, ** $p>.05$

Discussion

The aim of the present study was to further expand the current understanding of the relationship between interoceptive awareness and body dissatisfaction (Todd et al., 2019). Specifically, this study investigated the addition of the mediators self-disgust and physical appearance comparison to this relationship. As hypothesized, the results indicate that the effect of interoceptive awareness on body dissatisfaction is indeed mediated by self-disgust and physical appearance comparison. Moreover, interoceptive awareness was found to be negatively associated with body dissatisfaction, physical appearance comparison and self-disgust. Further, physical appearance comparison seems to have a positive effect on self-disgust and body dissatisfaction, and self-disgust was found to have a positive effect on body dissatisfaction. However, including the mediating variables resulted in a non-significant direct effect of interoceptive awareness on body dissatisfaction. Implications of the results, suggestions for further research, as well as strengths and limitations of the current study will be discussed in the following.

The current findings are largely consistent with the hypotheses and the previous research on the topic and they add valuable new insights to the body of existing research. A negative relationship with a medium sized effect between interoceptive awareness and physical appearance comparison was found, matching the findings of Szulc (2019) and Ainley and Tsakiris (2013). Consequently, this means that a lower awareness for interoceptive stimuli is likely to be linked with to a heightened frequency of physically comparing oneself to others. An explanation for this could be, as mentioned earlier, that in individuals with a low interoceptive awareness the more salient cue is the external stimuli which causes a predominant focus on external cues such as one's own as well as others physical appearance (Ainley & Tsakiris, 2013). However, the potential cause for this relationship is only speculation so far and further research regarding the explanations for this link is needed. Additionally, the findings of

the present study point to a moderately strong link between interoceptive awareness and self-disgust. Specifically, a lower interoceptive awareness could seem to result in experiencing more feelings of disgust toward the self. As mentioned earlier, this could potentially be due to the perception of the body being wrong or different caused by a low interoceptive awareness, that causes feelings of self-disgust (Moncrieff-Boyd et al, 2013). These findings are in line with the suggestions of Moncrieff-Boyd et al. (2013), Bou Khalil et al. (2021) and Holly (2020).

Moreover, as hypothesized and demonstrated by previous research (McComb & Mills, 2021; Fardouly and Vartanian, 2016; Ypsilanti, 2018) physical appearance comparisons were found to be linked with both self-disgust and body dissatisfaction. On both of the variables physical appearance comparisons show a moderately strong effect. More frequent physical appearance comparisons seem to be linked to more feelings of self-disgust, potentially through an internalization of comparison processes that interplays with other factors, such as a predisposition for experiencing disgust (Ypsilanti, 2018). Palmeira et al. (2017) similarly propose that self-disgust could have its root in social comparisons. Through social learning experiences such as social comparisons the individual learns about what others may find repulsive and thus experience a sense of repulsion toward the self. The positive effect of physical appearance comparison on the dissatisfaction of one's body, is likely caused by a feeling of inferiority of one's own appearance after the comparison (McComb & Mills, 2021). Furthermore, the findings showed a strong positive relationship between self-disgust and body dissatisfaction, as previously indicated by Stasik-O'Brien and Schmidt (2018) and Akram et al. (2021). Hence, more feelings of disgust towards the self are strongly associated with a higher body dissatisfaction. This relationship could be explained by the theory that body-image disturbances develop through negative emotional experiences directed toward the self, such as self-disgust (Akram et al., 2021).

The results of the analysis testing the hypothesis that interoceptive awareness is associated with body dissatisfaction, support the previously found evidence for a negative effect of interoceptive awareness on body dissatisfaction (Brown et al., 2020; Todd et al., 2019). Yet, when taking the mediators physical appearance comparison and self-disgust into account no direct effect of interoceptive awareness on body dissatisfaction was found. This leads to the conclusion that this relationship is completely mediated by other variables, which contradicts the findings of previous studies that do find a direct effect. Not finding a significant direct effect in this study, as opposed to other studies, is likely due to the mediators included that have not been investigated in this context before. These mediators seem to explain the previously found relationship better than interoceptive awareness alone.

As follows from the findings mentioned above, the mediation analysis partially brought the predicted results. Since the direct effect of interoceptive awareness on body dissatisfaction in the mediation analysis was not significant, but the sequential mediation effect with the variables self-disgust and physical appearance comparison was, one can conclude that these mediation variables are necessary and indispensable in the path diagram of effects to explain body dissatisfaction. In other words, there is thus a complete mediation, not a partial mediation as hypothesized. Hence, the current study shows evidence for an association between interoceptive awareness and body dissatisfaction, nevertheless it also further specifies the nature of this relationship and contradicts the theory of a direct effect (Todd et al., 2019; Brown et al., 2020). Physical appearance comparisons and self-disgust seem to explain more than half of the relationship between interoceptive awareness and body dissatisfaction. As follows, it seems that the most accurate way to describe this relationship is including other variables, such as in this case self-disgust and physical appearance comparison. However, former research has also shown an effect of other variables on body dissatisfaction and interoceptive awareness. There is evidence that anxiety, depression and eating disorder symptoms have been associated with both body dissatisfaction and interoceptive awareness (Dunn et al., 2010; Duchesne et al.,

2016). These variables could possibly act as mediators for the relationship between interoceptive awareness and body dissatisfaction as well. More research is needed on the influence of other potential variables, such as the ones mentioned above, and possible interactions between these variables and the ones discussed in the present study.

Moreover, there are clinical implications of the current findings. The findings suggest to investigate whether improving interoceptive awareness can lessen feelings of self-disgust, physical appearance comparisons and body dissatisfaction, in order to prevent the development of or decrease their impact on mental health problems. For example, exercises such as mindfulness meditation, meditation with a focus on breath sensation, a heightened focus on bodily and narrative aspects of the self, as well as yoga have been effective in increasing interoceptive awareness (Ainley et al., 2013; Bornemann et al., 2015; Dittmann & Freedman, 2009; Weng et al., 2021). Additionally, an approach to increase interoceptive abilities is biofeedback (Meyerholz et al., 2019). During biofeedback, the patients receive feedback, for example visual or acoustic, on the activity of their heart, which helps them to identify and potentially even influence their body processes more precisely (Meyerholz et al., 2019). Furthermore, the results point to physical appearance comparisons and self-disgust as important concepts in the model, that not only have an effect on body dissatisfaction, but also on each other. Preventive methods and interventions that target physical appearance comparisons and self-disgust should be further developed and applied in order to counter their potentially aversive effects, that include mental health issues such as mood disorders and a dissatisfaction with one's own body (Clarke et al., 2018; McComb & Mills, 2021).

The strengths of the present study will be discussed below. A strength of the study is the age range that the sample includes. The participants were between 18 and 71 years old which helps to improve the generalizability of the sample. Secondly, the survey collected the answers of a relatively big sample, which is useful to create an overview of potential relationships and

suggests correlations for future research to explore in depth. On top of that the survey was easily accessible for all participants, only a device and internet connection were needed to fill out the survey, and completing the questionnaires only took approximately 30 minutes. This made a wider variety of participants possible and thus also enhances the studies generalizability. Lastly, the current study used multiple standardized measures that are supported by literature, widely used and have a high reliability. Reliable and commonly used measures lead to more certain findings and produce results are easy to be compared to other literature (Szulc, 2019).

In the following the different limitations of the study and consequently recommendations for future research will be discussed. One limitation of the study is the self-reported data. Self-reported data is difficult to be independently verified and susceptible for biases, such as consistency seeking or self-enhancement. Additionally, false memories or constrained self-knowledge can negatively influence the accuracy of self-reports as well (Robins et al., 2007). As an example for a more objective measure, the study of Dubois et al. (2016) used a heartbeat monitoring task to measure interoceptive awareness. Their participants rated whether an auditory tone was synchronous to their heartbeat and the discrepancy score between their perceived performance and their actual heartbeat then was used as a measure for their interoceptive awareness. Another limitation of the study is the cross-sectional study design. In a cross-sectional study the data of a population is taken at one point in time, assuming that the constructs measured are stable over time and static in their nature. Potential limitations of cross-sectional research are for example biases such as the sample bias, or in other words, certain individuals out of the population being more likely to participate in the study than others, that may lead to a false representation of the overall population (Wang & Cheng, 2020). Moreover, the population in the sample consists of mostly Europeans. Previous research has shown cultural differences in body dissatisfaction, physical appearance comparisons and interoceptive awareness (Swami et al., 2010; Chentsova-Dutton, & Dzokoto, 2014; Schaefer et al., 2015). This means that the results of this study are not necessarily applicable for different

cultures and ethnicities. Additionally, due to the limited scope of the present study, the focus of the physical appearance comparisons was on the frequency of the comparisons. However, since the Physical Appearance Comparison Scale-3 (PACS-3) (Schaefer & Thompson, 2018) offers the opportunity to investigate the direction of the comparison as well, it could be valuable for future research to explore the relationship of the direction of the comparison on the model that has been discussed. For example, Fuller-Tyszkiewicz et al. (2019) found that negative physical appearance comparisons seem to negatively influence the experience of body dissatisfaction (Fuller-Tyszkiewicz et al., 2019). The final limitation of this study is its focus on women. Many studies, including the present study, focused on the different mechanisms in women, while the investigation of the relationships of interoceptive awareness, self-disgust, physical appearance comparison, body dissatisfaction and other variables in men has not been researched to the same extent. However, studies have shown that a majority of men experience some form of dissatisfaction with their body (Mishkind et al., 1986). Adams et al. (2005) found that body dissatisfaction in men identical to body dissatisfaction in women, stems from a discrepancy of the body ideal and the perceived self and that the men as well describe their body dissatisfaction in cognitive, behavioural and affective terms. Thus, the mechanisms leading to body dissatisfaction in men need to be further explored.

In conclusion, this study offers new and valuable insights for future research on body dissatisfaction. A complete mediation between interoceptive awareness and body dissatisfaction, mediated by physical appearance comparisons and self-disgust, has been found, as well as an effect of interoceptive awareness on physical appearance comparisons and self-disgust. Further, physical appearance comparisons were linked to self-disgust and body dissatisfaction, and self-disgust was found to be associated with body dissatisfaction. The findings propose to investigate whether targeting interoceptive awareness in women can potentially help preventing physical appearance comparisons, feelings of self-disgust, and body dissatisfaction in women. Moreover, the findings suggest the importance of directing attention

towards reducing appearance comparisons and feelings of self-disgust in order to reduce body dissatisfaction. More research is needed on the interplay of these factors in men and on the influence of the direction of physical appearance comparisons.

Overall, the findings provide clear evidence that body dissatisfaction is influenced by interoceptive awareness through physical appearance comparisons and self-disgust.

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Appendix A

Information letter and informed consent

A study into anxiety-related processes associated with body image disturbances.

Dear participant,

Are you 18 years and older? Then we kindly ask you to participate in our study about anxiety-related processes that are potentially associated with body image disturbances. Before you decide whether or not to participate in this study, it is important to carefully read the information below. Please take your time to read the information. If you have any questions feel free to ask them and email the researcher on this project: Jojanneke Bijsterbosch (j.m.bijsterbosch@uu.nl).

1. What is the purpose of the study?

Results from previous studies show that a large number of people experiences difficulties regarding the thoughts and feelings of their bodies. These body image-related issues consequently could play an important important and disadvantageous role in the lives of many people. Disturbances in body image often consist of three components: perception, cognition/affection and behaviour. The perceptual component refers to how accurately individuals perceive the size of their body. The cognitive/affective components consists of the feelings and thoughts you might have about your body, whereas the behavioral component includes behaviors that are associated with the body (such as body checking and body avoidance). This study only focusses on the cognitive/affective and behavioral components. Specifically, the aim of our study is to investigate to what extend anxiety and anxiety-related processes can be linked to the above described disturbances in body image in a general population. Examples of these anxiety-related processes are, among others, intolerance of uncertainty, shame and social anxiety. Studying this topic might contribute to a better understanding of the exact nature of these processes and how they contribute to the development of body image disturbances. We aim to publish important results in scientific journals and present them at conferences.

2. How will the study be carried out and what is expected of you?

This study will be carried online (through Qualtrics). To be able to study potential factors that might contribute to body image disturbances, you will be asked to complete a number of different questionnaires. These

questionnaires will be related to body dissatisfaction, body checking and avoidance, as well as difficulties in eating and social anxiety processes. The entire test battery will take no longer than 30 minutes.

3. What are the potential advantages and disadvantages of participating in this study?

There are no disadvantages associated with participating in this study, except for the time spent completing the test battery. Participating also does not have specific benefits for you, but this study might provide better insights in the dynamics of body image disturbances in a general population.

4. What will happen if you decide not to participate in this study?

Participation in this study is entirely voluntary. You can end your participation in the study at any time, without any explanation and without any negative consequences.

5. What will happen when the study is finished?

The study will be terminated when a sufficient number of participants have completed the test battery (at least 500 people). After the study has completed, participants can request to be informed about the results. You will then receive an email on the general findings on a group level. Communicating findings on an individual level will not be possible.

6. What will happen with your data?

Data collected during the study will be stored, processed and used anonymously and confidentially. Only the executive researchers will have access to the (coded) data of this study. Participation is completely anonymous as you are not required to fill out your name. After the study has completed, your data will be stored for 10 years on a server in Europe. It is possible that the data collected in this study will also be used for other studies as well. You consent to this by consenting to participating in this study. If you are uncomfortable with your data being used in future studies, it is unfortunately not possible to participate in our study.

7. What happens if we come across an incidental finding?

This study is limited to processing data on a group level. Examining individual findings is not within the scope of this study and, as such, incidental findings will not occur. As mentioned before, personal feedback on individual findings will not be communicated. This means that you will not find out whether or not you will have a high or low score on a questionnaire.

8. Will there be additional costs or a reward if you decide to participate in this study?

If you are a Psychology student at Utrecht University, you will be rewarded with 0.5 PPU. In all other cases, there is no reward for participating in this study.

9. Is there anything else you would like to know?

If you have any questions regarding this study, please contact Dr. Lot Sternheim (l.c.sternheim@uu.nl) or the executive researcher, Jojanneke Bijsterbosch, MSc (j.m.bijsterbosch@uu.nl).

10. What do I do if I have any complaints?

If you have any complaints about this study, please report them to Dr Lot Sternheim (l.c.sternheim@uu.nl) or klachtenfunctionaris-fetcsocwet@uu.nl for any formal complaints.

Sincerely yours,

Lot Sternheim, senior researcher and assistant professor Clinical
Psychology Utrecht University
E-mail: l.c.sternheim@uu.nl

Appendix B

Appendix Information

Appendix Information regarding your Thesis

Please, enter your information, copy-paste it and send it by email to your supervisor accompanied by the final version of your thesis.



Student ID: *	0633003
Initials & prefix: *	L.
Last name: *	Müller
Master: *	Clinical Psychology

Co-author (if applicable)

Student ID:	
Initials & prefix:	
Last name:	
Master:	

Thesis supervisor

Name supervisor: *	Birgit Hasenack
Name 2nd supervisor: (if applicable)	

Thesis

Title thesis: *	The influence of interoceptive awareness on body dissatisfaction and the mediating role of self-disgust and physical appearance comparisons
Language of thesis: *	English/Dutch/etc.
Abstract:	<p>Prior research has investigated the effects of interoceptive awareness and potential factors contributing to body dissatisfaction. The present study distinguishes itself from prior work by including physical appearance comparisons and self-disgust as potential mediators in the relationship between interoceptive awareness and body dissatisfaction. This study used results from the anxiety-related processes and body image disturbances (2022) survey and selected 178 female participants between 18 and 71 years with a mean age of 24 years that completed the MAIA-II questionnaire, the Physical Appearance Comparison Scale-3, the Body Attitude Test and the Self-disgust Scale. A sequential mediation between interoceptive awareness and body dissatisfaction with the mediators physical appearance comparison and self-disgust was hypothesized. The results demonstrated a negative effect of interoceptive awareness on physical appearance comparisons, self-disgust and body dissatisfaction. Moreover, physical appearance comparison was found to be linked with self-disgust and body dissatisfaction, and self-disgust was linked with body dissatisfaction. Most importantly, a sequential mediation effect of physical appearance comparisons and self-disgust on the relation between interoceptive awareness and body dissatisfaction has been found. However, including the mediators resulted in a non-significant direct effect of interoceptive awareness on body dissatisfaction. The findings of this study provide valuable new insights and implications for prospective research.</p>

INTEROCEPTIVE AWARENESS AND BODY DISSATISFACTION

Keywords: (separated by ;)	Interoceptive Awareness; Body Dissatisfaction; Physical Appearance Comparisons; Self-disgust
Make publicly accessible: *	<u>Yes</u> /No
Or make accessible after date:	(dd-mm-yyyy)

Information entered on: * 09.06.2022 By: * Laura Müller

* = mandatory fields