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# How Standard Beauty Ideals Offered by Fashion Brands affect Body Dysmorphic Disorder and Self-Esteem in Men

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The present study investigated beauty ideal-related implications for men by exploring the effects of body positive and body idealistic images, as presented by fashion brands and social media, on body dysmorphic disorder (BDD). BDD is heavily linked to negative body image and low self-esteem, and will therefore be measured on these variables. Efforts to include men in the body positive movement have been rather sparse. The movement's purpose was to empower women of all shapes and sizes by posting images of models that are more representative of the general public. Therefore, it is hypothesized that body idealistic images have negative effects on both body image and self-esteem, whereas body positive images have positive effects. Subsequently, it was hypothesized that these body idealistic images pose a greater threat to BDD. Lastly, it was hypothesized that body image related issues are indifferent amongst men and women. Participants were exposed to either nothing, body idealistic images or body positive images followed by questionnaires that would measure body image, BDD, self-esteem and sociocultural attitudes towards appearance. Results indicated that body idealistic images have a negative effect on men's self-esteem, and body positive images have a positive effect. This study does not indicate whether body idealistic images pose a greater threat to BDD, but it has shown that there are no gender differences. Taken together, the results indicate that men should receive equal treatment in online portrayed beauty ideals for the sake of their self-esteem.

*Keywords:* body dysmorphic disorder, body image, self-esteem, men's health, fashion

## **How Standard Beauty Ideals Offered by Fashion Brands affect Body Dysmorphic Disorder and Self-Esteem in Men**

### **Introduction**

#### **Body Dysmorphic Disorder**

A widely discussed topic, primarily in Western society, is the standard beauty ideal of men and women. Magazines, Hollywood, TV and other media outlets have been glorifying beauty standards that are simply unattainable for a lot of people. As a result, people that are more affected by these external influences, engage in behaviours related to body dysmorphic disorder (BDD), in order to achieve the beauty standard as depicted in media (Holmqvist & Frisé, 2010). BDD itself is characterized by one's dissatisfaction with their body or aspects of their body parts. Individuals become obsessed with their 'flaws' to the extent that they undergo extreme measure to either hide or fix them (Corve & Gleaves, 2001). Women are more concerned with hiding or fixing their skin, breasts, and nose (Möllmann et al., 2017). Men on the other hand are more concerned about their muscularity (Heath et al., 2016; Möllmann et al., 2017). Even to the extent that these concerns can impede daily functioning, including job disruptions, sexual difficulties, or relationship problems (Heath et al., 2016).

#### **Body Image**

More generally, poor body image, or rather body dissatisfaction, is seen to be predictive of BDD (Quittkat et al., 2020). Quittkat and their colleagues (2020) stated, "Body image is conceptualized as a multidimensional construct, which encompasses a behavioural component involving body-related behaviours (e.g. checking behaviours), a perceptual component involving the perception of body characteristics (e.g. estimation of one's body size or weight), and a cognitive-affective component involving cognitions, attitudes, and feelings toward one's body" (p. 1). Part of the cognitive-affective component is body dissatisfaction,

which is defined by one's negative thoughts and feelings about their body (Quittkat et al., 2020).

### **Not Anorexia Nervosa**

Similar to anorexia nervosa, people with body dysmorphia engage in unhealthy and drastic measure to lose weight at all costs (Grant & Phillips, 2004; Yan & Bissel, 2015; Dryer et al., 2016). On the contrary, anorexia nervosa can have no apparent reason for individuals to engage in these behaviours, whereas in body dysmorphia, the person is concerned about their appearance and sees flaws in themselves that others do not see (Grant & Phillips, 2004).

### **Concerns in Men and their Self-Esteem**

As mentioned before, BDD is easier to track with women due to increased entries for plastic surgery, but also due to the registered therapy patients, as generally speaking more women are in therapy than men (Terlizzi & Zablotsky, 2020). For men on the other hand, there is less data available. It is harder to measure as it is unclear when something is considered body dysmorphic behaviour since men tend to be healthy-looking, while exhibiting signs of BDD (Leone, Sedory & Gray, 2005). On top of that, individuals might be so obsessed and ashamed of their bodies that they do not share their body dysmorphic symptoms with a clinician (Bjornsson, Didie & Philips, 2022). Disorders related to negative body image, such as BDD, can be triggered by low self-esteem (Holmqvist & Frisén, 2010). This notation is also supported by Ogihara and Kusumi (2020). In addition, they also stress the importance of self-esteem to maintain good mental health. Self-esteem refers to one's self-worth and overall positivity of an individual's self-evaluation (Rosenberg, 1965; Ogihara & Kusumi, 2020). The reason why men start to work out so much while simultaneously losing weight, is because they are comparing themselves to others (Swami et al., 2010). Moreover, due to the 'male-taller' norm, culture, society and media have put a lot of importance on the height of men, which can lead to extreme bodily dissatisfaction, since taller men tend to

attract greater preference in the opposite sex (Swami et al., 2010). Also, a topic of concern: hair loss has been a very sensitive topic in recent years, and individuals become more likely to get hair transplants (Grant & Phillips, 2004).

### **The Role of Media and Fashion**

Body image concerns in men have also spiked in recent years, suggesting that men experience similar feelings towards their appearance as women while also suffering from the same mental health issues that come with negative body image (Thompson & McKinney, 2020). Fashion for women has been made largely inclusive already with the body positive movement (BPM) and its extension of size ranges, but men have been widely excluded (Thompson & McKinney, 2020). However, research has shown that the media can predict body dissatisfaction (Dryer et al., 2016). Men supposedly experience similar pressures to fit into the societal body ideal that is expressed in mainstream media and little collective efforts have been made to increase body satisfaction in men (Thompson & McKinney, 2020). According to Thompson and McKinney (2020), 40% of men in the US experience issues with sizing and fitting of clothes while shopping. Many apparel companies only run sizes from small to extra-large, which only makes up 15% of the targeted population, which subsequently leads to more pressure on plus-size men to fit into this body ideal. On the contrary, female sizing has already been extended for more inclusivity (Thompson & McKinney, 2020). This also gives reason for concern since body dysmorphia due to distorted body image starts in the adolescent years already. Especially with the increase of social media influence and its incidence, this topic requires more attention (Himanshu et al., 2020). To add to this, Quittkat and their colleagues (2020) reported that age has no effect on body dissatisfaction in men, which could possibly imply that adolescents who develop a negative body image are more likely to have stable negative feelings towards their bodies.

Research has primarily investigated the effects of magazines, TV, and other traditional media on women, or the preferred beauty ideal in the eyes of men and women, but the literature often neglects effects on men or at least is rather limited when compared to the investigations on women. Especially when it comes to body image, which has primarily been focusing on women, while neglecting male body image (Quittkat et al., 2019). Previous research has investigated mainly the effects of images in traditional media, such as TV and magazines, on body image, but suggested that online images, especially on social media, can have equal, if not more intense, effects than traditional media (Tamplin, McLean & Paxton, 2018). Social media usage has gained more and more popularity within the last decade which ultimately led to increased exposure to content that put individuals' self-esteem at risk. There is a strong link between the influences of social media and self-esteem in the context of body image set by society and the general media (Yan & Bissel, 2014; Heath et al., 2016; Dryer et al., 2016). Most brands in the fashion industry nowadays use their social media presence to present their products and depict certain beauty ideals. This can become very problematic since the primary activity of online environments, such as Instagram, is content sharing, which allows for frequent appearance comparison. Research has shown that exposure to body idealistic images on social media can have negative effects on body image (Tamplin, McLean & Paxton, 2018).

### Research Question

This research aims to understand the factors that pose a threat to male body-related self-esteem and body image. By investigating the link between online exposure to mainstream beauty standards, set by popular fashion outlets and their online shopping services, and the self-esteem of men, this study hopes to identify contributing factors that lead to BDD. More specifically, it wants to look at how participants' self-esteem is affected when faced with body

positive images versus body idealistic images. In return, potential results that can be derived from this study will aid in addressing the topic in a meaningful way.

**H1:** Since there is a strong link between the output of online media outlets and body image (Yan & Bissel, 2014; Heath et al., 2016; Dryer et al., 2016), it is expected that body idealistic images have a negative effect on men's body image and therefore also on self-esteem. The latter is assumed to be negatively affected due to the link between self-esteem and body dissatisfaction (Holmqvist & Frisén, 2010; Heath et al., 2016; Dryer et al., 2016).

**H2:** At the same time, it is expected to have reversed effects for men that have been exposed to body positive images. Positive effects are expected on self-esteem and body image after the exposure to body positive images.

**H3:** Moreover, body idealistic images are expected to pose a greater threat to BDD since Holmqvist and Frisén (2010) already suggested that different media types can have an effect on BDD.

**H4:** Due to a lack of research on men in this field, as mentioned by Quittkat and their colleagues (2020), levels of body image in men are expected to be equal when compared to women. This hypothesis serves to emphasize the importance of body dysmorphia in men and that research should view the effects on men as equally important.

## **Methods**

### **Participants**

We collected data of 211 participants. 70 of those who participated had to be removed, because they either did not pass the attention check or did not complete the survey. 141 participants remained of which 86 were women, aged 18 to 33, and 55 were men, aged 20 to 30. Based on a preliminary power analysis ( $\alpha = .05$ , Power  $(1-\beta) = .8$ , Effect Size  $|p| = .3$ ) a minimum sample size of 82 was required.

Participants have been recruited via a convenience sample. We utilized the Sona Systems (<https://www.sona-systems.com/>), provided by Utrecht University, and social media platforms, such as Instagram. Participants that have been recruited via the Sona Systems (<https://www.sona-systems.com/>), have received course credits in exchange. The ethics committee of Utrecht University approved the experiment and participants gave their informed consent.

In order to participate, one must identify as either male or female. Since we are focusing on male and female only, we unfortunately had to exclude other genders with no malintent.

Since the research is mainly concerned with men, female participants have only been utilized to control for gender effects via unmanipulated control groups. Though the data on women has been collected by another student.

### **Stimuli**

Stimuli, in the form of images, have been derived from various websites and brands, such as 'Urban Outfitters', 'ASOS', and 'Calvin Klein' (2022). These images depict men of different body shape, who model for clothing brands. There was a total amount of 13 images (Appendix A), eight of which depict men of rather slender, lean or muscular body types which represent the male body ideal (Klimek et al., 2018). The remaining five images depict men of larger size that have overall more body fat than the body idealistic images. These images are being categorized as body positive or body inclusive.

In total there were two sets of images. One set for the body idealistic images and one set for the body inclusive images. To ensure that the body positive images are inclusive to all body shapes and sizes, three of body idealistic images have been mixed with the five body positive images (Appendix A).



## **Measures**

The output of this study has been generated via Qualtrics software with its latest version of 2022. Copyright © 2022 Qualtrics. The data output from Qualtrics has been exported to Microsoft Excel, version 16.61.1. In Excel, the data has been cleaned and organized before being put in SPSS, version 28.0.1.0, in which the data analysis has been conducted.

### ***Independent Measures***

**Body type.** One of two independent variables has been manipulated, namely the ‘body type’ that is exposed to participants. Body type has been separated into three different conditions: the control condition, the body ideal condition, and the body positive/inclusive condition. The control condition did not display any sort of body type, instead participants were prompted to fill out the questionnaires right away. The body ideal condition displayed the set of body idealistic images, whereas the body positive/inclusive condition displayed the set of body positive/inclusive images.

**Gender.** The second independent variable has been separated into two conditions: male and female. Although the primary concern of this study is men, both genders, namely, male and female, will be compared in order to assess whether gender effects differ in their extent.

### ***Dependent Measures***

The primary outcome measures were body image and self-esteem. Body image refers to the degree of overall body dissatisfaction and body image impairment, whereas self-esteem refers to the degree of positive self-perception (Rosenberg, 1965; Ogihara & Kusumi, 2020; Quittkat et al., 2020). Secondary outcome measures were sociocultural attitudes towards appearance, to assess whether attitudes are predictive of higher body dissatisfaction, and appearance anxiety, to assess whether body idealistic images pose a greater threat to body image anxiety (BIA) and BDD.

**Body Image.** To measure body image, parts of the Body Image Questionnaire (BIQ) of Cash and Szymanski, from 1995, have been utilized. From the BIQ, the screening questions and its subscale on body shape or weight have been utilized.

The screening questions consist of 12 items. The screening questions were deemed as sufficient since it measures body image impairment. The items present multiple-choice questions such as ‘How often does your feature(s) currently lead you to avoid situations or activities?’, or ‘How do your features compare to others of the same age, sex, and ethnic group?’. Questions were rated on a five-point Likert scale ranging from 1 (about 40 times or more a day) to 5 (I never check). Scores on items 1, 2, and 4 were reversed (Appendix B). Body image impairment was calculated by the sum score of the items. The subscales on body shape and weight use the same scale and scoring system. They measure the frequency of exhibited behaviors that are related to body image concerns. Eight statements were presented and participants needed to indicate whether they were applicable to them or not. With Cronbach’s alpha of .95, the questionnaire was deemed to have adequate reliability.

**Self-Esteem.** To measure self-esteem, the Rosenberg Self-Esteem Scale (RSES; Rosenberg, 1965) has been utilized. The questionnaire is made up by 10 items that measure global self-worth by measuring both positive and negative feelings towards one self (Rosenberg, 1965). Five Likert scale items were assessed on a scale from 1 (strongly disagree) to 5 (strongly agree). An example question would be ‘On the whole, I am satisfied with myself’, or ‘All in all, I am inclined to feel that I am a failure’. Items 2, 5, 6, 8 and 9 were reversed questions (Appendix C). Self-esteem was measured by the sum score of all items. Higher scores are indicative of higher self-esteem. The RSES yields an internal consistency of .86.

**Sociocultural Attitudes.** With the slightly modified Sociocultural Attitudes Towards Appearance Scale 3 Revised edition (SATAQ-3R; Thompson et al., 2000), endorsement of

western sociocultural beauty standards, as presented on social media and on shopping websites, have been measured. Subscales of the SATAQ-3R are measuring pressures, importance, social comparison, and internalization of western beauty standards. The original version asks about the pressures and importance of people depicted in magazines, TV, and music videos. Questions have therefore been adjusted in this study by replacing TV and music videos with clothing websites and images on clothing websites. A couple of questions have also been removed because they were either redundant or they did not suit the research question. Originally, the scale consisted of 38 items, but it has been reduced to 31 items. The items correspond to a five-point Likert scale with 1 being the lowest score and 5 the highest (Appendix D) With internal consistency of .95, the SATAQ-3R indicates adequate reliability.

**Appearance Anxiety.** To measure BIA and BDD, the ten-item Appearance Anxiety Inventory (AAI) has been utilized (Veale et al., 2014). Questions are to be answered on a five-point Likert scale, ranging from 0 (not at all) to 4 (all the time). The AAI also has two subscales with items 1, 3, 4, 7, 9 and 10 measuring avoidance, and items 2, 4, 6 and 8 measuring threat monitoring (Appendix E). A cut-off score, for BDD diagnosis, has not been provided by Veale et al. (2014), but a cut-off score of 20 has been suggested by Mastro et al. (2016), as indicative of high BDD risk. Internal consistency was adequately reliable with a Cronbach's Alpha of .95.

## **Procedure**

Potential participants have been redirected to Qualtrics (Qualtrics, Provo, UT) where the study has been conducted. The study was entirely in English. Participants were first faced with an instruction page where they were informed that the research aims to find out people's preferences for clothing to not give away the actual intent. They were also informed that participation was anonymous. Afterwards, they were prompted to give their informed consent followed by questions on their gender and age. The study would terminate itself when

participants provided no consent, were younger than 18 years, or indicated a gender any other than male or female. Participants were then randomly allocated to one of the three conditions (control, body ideal, body positive). Stimuli for men and women were different, so based on that only the control conditions have been compared. Based on the conditions, participants in the body ideal and body positive conditions were first tasked to scan the condition's respective set of images followed by an attention check. To pass the attention check, participants must indicate that they have seen 'clothing'. Participants in the control condition, who were not presented with stimuli, simply had to indicate that they have seen 'nothing'. The questionnaires followed afterwards and were identical for each condition. At the end of the experiment, participants received a debriefing, in which the experiment was explained.

## Results

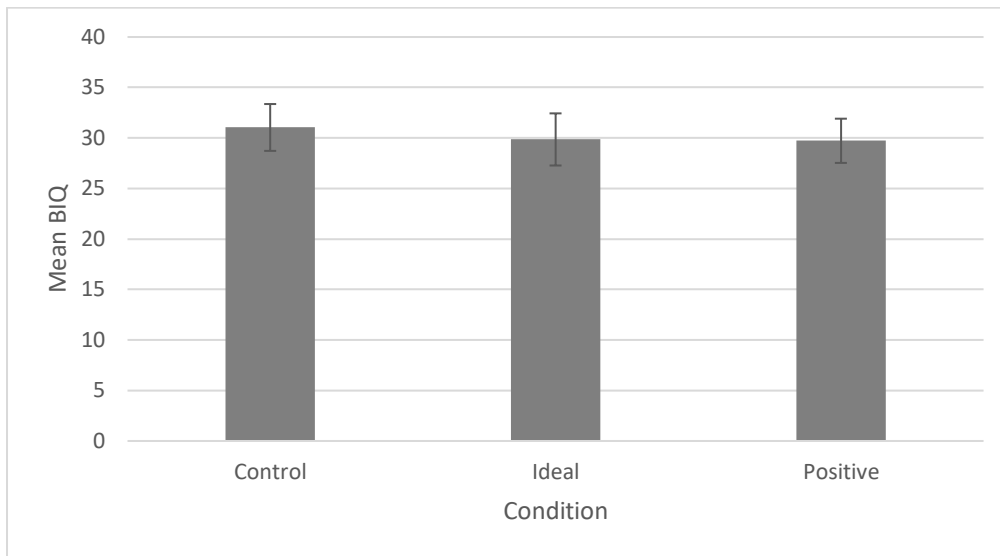
### Body Image Questionnaire

To analyse the results of the BIQ, a one-way ANOVA has been conducted. Based on the calculated Levene's statistic, all conditions can be assumed as equal with  $p = .426$ . Moreover, a normal probability plot indicated a normal population distribution and the data has been collected independently. The manipulation on the conditions did not yield any significant effects on BIQ,  $F(2, 52) = .457, p = .636$  (Figure 1). Surprisingly, the control condition indicated the highest score with  $M = 31.04, SD = 5.364$ . The body ideal condition reports a score of  $M = 29.86, SD = 4.470$ , and the body positive condition reports a score of  $M = 29.72, SD = 4.403$ . These findings are not in line with the first hypothesis, which assumes the body ideal condition to have a negative impact on one's body image. Moreover, the findings do not support the second hypothesis either since body positive images do not have positive effects on body image.

Another one-way ANOVA was run for the subscale ‘shape or weight’ with results indicating no significance,  $F(2, 52) = 1.199, p = .310$ . The body positive condition had the lowest mean score with  $M = 12.17, SD = 3.073$  (Figure 2).

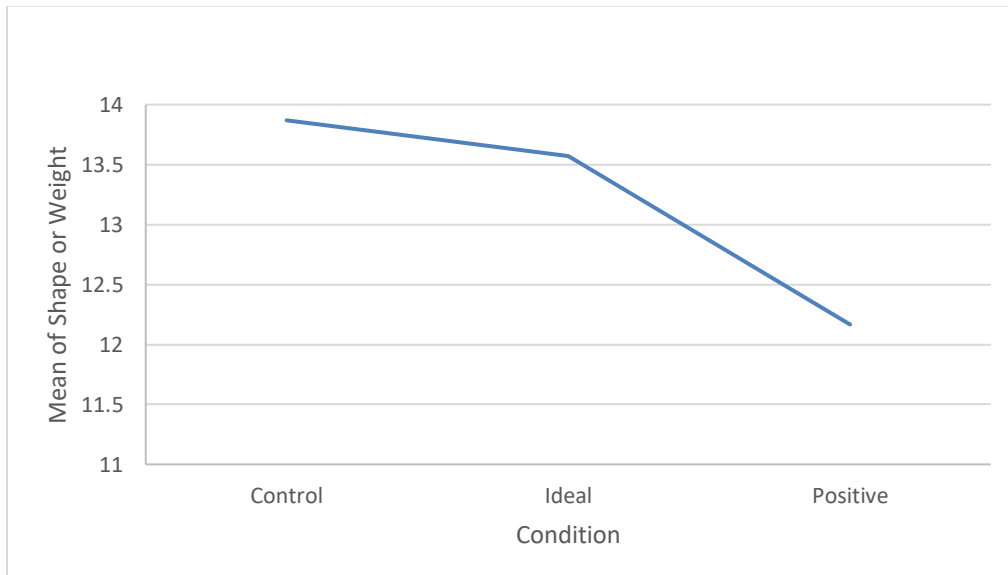
### Figure 1

*Mean scores of BIQ between groups*



### Figure 2

*Mean scores of ‘shape or weight’ between groups*



### Rosenberg’s Self-Esteem Scale

Main effects were found on self-esteem after conducting a one-way ANOVA for the RSES variable. With a Levene’s statistic of  $p = .864$ , the different conditions can be assumed

to be equal. The ANOVA yields significance with  $F(2, 52) = 5.359, p = .008$ . The post hoc test shows that the body ideal condition ( $M = 35.50, SD = 3.937$ ) scores significantly lower than the control condition ( $M = 39.04, SD = 4.095$ ) and body positive condition ( $M = 39.93, SD = 3.873$ ; Table 1). This is in line with the first hypothesis since exposure to body idealistic images lowers self-esteem significantly when compared to the other conditions. The body positive condition reports the highest mean score, but only shows a significant mean difference when compared to the body ideal condition (Table 1). This is also in line with the second hypothesis, which states that exposure to body positive images has a positive effect on self-esteem.

**Table 1**

*Mean differences of RSES scores between conditions*

(I) Condition	(J) Condition	Mean Difference (I- J)	Std. Error	Sig.	95% Confidence Interval	
					Lower Bound	Upper Bound
Control	Ideal	3.543*	1.351	.034	.20	6.88
	Positive	-.901	1.254	1.000	-4.00	2.20
Ideal	Control	-3.543*	1.351	.034	-6.88	-.20
	Positive	-4.444*	1.420	.009	-7.96	-.93
Positive	Control	.901	1.254	1.000	-2.20	4.00
	Ideal	4.444*	1.420	.009	.93	7.96

\*. The mean difference is significant at the 0.05 level.

### Appearance Anxiety Inventory

The one-way ANOVA, conducted for the AAI, did not yield any significance,  $F(2,52) = 1.365, p = .264$ . Conditions are assumed to have equal variances based on a Levene's statistic,  $p = .455$ . The control condition reports an average of  $M = 11.26, SD = 4.234$ , the body ideal condition reports an average of  $M = 13.64, SD = 5.183$ , and the body positive condition reports an average of  $M = 11.89, SD = 3.546$ . The body ideal condition has the highest average AAI score, but shows no significant mean difference to the other conditions

(Table 2). This is not in line with the third hypothesis, which suggested that body idealistic images pose a greater threat to BDD. A cut-off score, indicative of BDD, was suggested to be set at 20 (Mastro et al., 2016), but all conditions have average scores below 20. When taking a closer look at the data set, there are five participants with scores equal to or higher than 20. Three of these participants belong to the body ideal condition and the other two belong to the control condition.

A Pearson's correlation has moreover shown a negative correlation between AAI and RSES with  $r = -.325$ ,  $p = .015$  (across all conditions) indicating that high scores on the AAI are associated with low scores on the RSES.

**Table 2**

*Mean differences of AAI scores between conditions*

(I) Condition	(J) Condition	Mean Difference (I- J)	Std. Error	Sig.	95% Confidence Interval	
					Lower Bound	Upper Bound
Control	Ideal	-2.382	1.455	.323	-5.98	1.22
	Positive	-.628	1.350	1.000	-3.97	2.71
Ideal	Control	2.382	1.455	.323	-1.22	5.98
	Positive	1.754	1.529	.770	-2.03	5.54
Positive	Control	.628	1.350	1.000	-2.71	3.97
	Ideal	-1.754	1.529	.770	-5.54	2.03

### **Sociocultural Attitudes Towards Appearance 3 Revised Edition**

Levene's statistic assumes equal variance between groups,  $p = .347$ . A one-way ANOVA on the SATAQ-3R variable yielded no significance,  $F(2, 52) = 2.832$ ,  $p = .068$ . Mean score for the body ideal condition has been the highest ( $M = 94.57$ ,  $SD = 22.880$ ), whereas the body positive condition has the lowest score ( $M = 76.78$ ,  $p = 18.374$ ).

One-way ANOVAs have also been conducted for each subscale of the SATAQ-3R individually. Importance yielded insignificant results with  $F(2, 52) = 1.565$ ,  $p = .219$ ,

pressures yielded insignificant results with  $F(2, 52) = 2.303, p = .110$ , internalization-web/mag yielded no significance with  $F(2, 52) = 1.289, p = .284$ , internalization-comparison yielded no significance with  $F(2, 52) = 1.578, p = .216$ , and awareness yielded no significance either with  $F(2, 52) = 2.408, p = .100$ . Across all subscales, all mean scores were highest in the body ideal condition, and all mean scores were the lowest in the body positive condition (Table 3).

**Table 3**

*Mean scores of SATAQ-3R subscales between conditions*

		Mean	Std. Deviation
Importance	Control	19.13	7.558
	Ideal	20.93	7.395
	Positive	16.44	6.776
Pressures	Control	16.43	7.096
	Ideal	17.86	6.100
	Positive	13.06	6.440
Web_Mag	Control	9.22	4.221
	Ideal	10.79	3.886
	Positive	8.56	3.666
Compare	Control	9.91	4.044
	Ideal	11.50	4.879
	Positive	8.78	4.152
Awareness	Control	32.39	4.639
	Ideal	33.50	5.259
	Positive	29.94	4.582



## Gender

After conducting a one-way ANOVA on gender, mean differences of the male and female control conditions showed significant differences for AAI and its subscale avoidance, and for the SATAQ-3R and its subscales pressures and internalization-comparison at a significance level of .05 (Table 4). Tests of homogeneity of variances indicated no significant differences, so both independent variables are assumed to be equal. Women ( $M = 14.48$ ,  $SD = 5.419$ ) scored higher on average than men ( $M = 11.26$ ,  $SD = 4.234$ ) on the AAI. For its subscale avoidance, women ( $M = 9.48$ ,  $SD = 3.400$ ) also scored higher on average than men ( $M = 7.13$ ,  $SD = 2.510$ ). On the SATAQ-3R, women ( $M = 105.29$ ,  $SD = 18.953$ ) scored higher on average than men ( $M = 87.09$ ,  $SD = 22.488$ ). For the subscale pressures, men ( $M = 16.43$ ,  $SD = 7.096$ ) scored on average lower than women ( $M = 24.38$ ,  $SD = 7.871$ ). On the internalization-comparison scale, men ( $M = 9.91$ ,  $SD = 4.044$ ) also scored significantly lower than women ( $M = 14.19$ ,  $SD = 4.400$ ). Scores on the BIQ and RSES were insignificantly different (Table 4) and is therefore in line with the fourth hypothesis. Men ( $M = 13.87$ ,  $SD = 4.181$ ) scored on average higher than women ( $M = 12.14$ ,  $SD = 3.103$ ) on shape or weight, but no significance indicated,  $F(1, 42) = 2.382$ ,  $p = .130$ . Men ( $M = 39.04$ ,  $SD = 4.095$ ) also scored higher than women ( $M = 36.76$ ,  $SD = 4.878$ ) on self-esteem, but no significance indicated,  $F(1, 42) = 2.841$ ,  $p = .99$ .

When looking across all conditions, there are some consistencies with the prior results. AAI indicates significant results,  $F(1, 139) = 8.475$ ,  $p = .004$ , as well as its subscale, avoidance,  $F(1, 139)$ ,  $p = .007$ . SATAQ-3R also reports significant differences,  $F(1, 139) = 18.828$ ,  $p < .001$ , as well as its subscales, pressure,  $F(1, 139) = 49.932$ ,  $p < .001$ , and internalization-comparison,  $F(1, 139) = 25.971$ ,  $p < .001$ . Contrary to the findings within the control group comparison, internalization-websites/magazines also reports significant

differences,  $F(1, 139) = 7.529, p = .007$ , with women ( $M = 11.40, SD = 4.350$ ) scoring higher on average than men ( $M = 9.40, SD = 3.984$ ).

**Table 4**

*ANOVA table of male and female control condition*

		Sum of Squares	df	Mean Square	F	Sig.
BIQ	Between Groups	3.637	1	3.637	.130	.720
	Within Groups	1175.909	42	27.998		
	Total	1179.545	43			
AAI	Between Groups	113.486	1	113.486	4.855	.033
	Within Groups	981.673	42	23.373		
	Total	1095.159	43			
Avoidance	Between Groups	60.403	1	60.403	6.859	.012
	Within Groups	369.847	42	8.806		
	Total	430.250	43			
Threat	Between Groups	.251	1	.251	.087	.770
	Within Groups	121.636	42	2.896		
	Total	121.886	43			
Shape or Weight	Between Groups	32.729	1	32.729	2.382	.130
	Within Groups	577.180	42	13.742		
	Total	609.909	43			
Importance	Between Groups	172.559	1	172.559	3.083	.086
	Within Groups	2350.418	42	55.962		
	Total	2522.977	43			
Pressures	Between Groups	693.123	1	693.123	12.406	.001
	Within Groups					

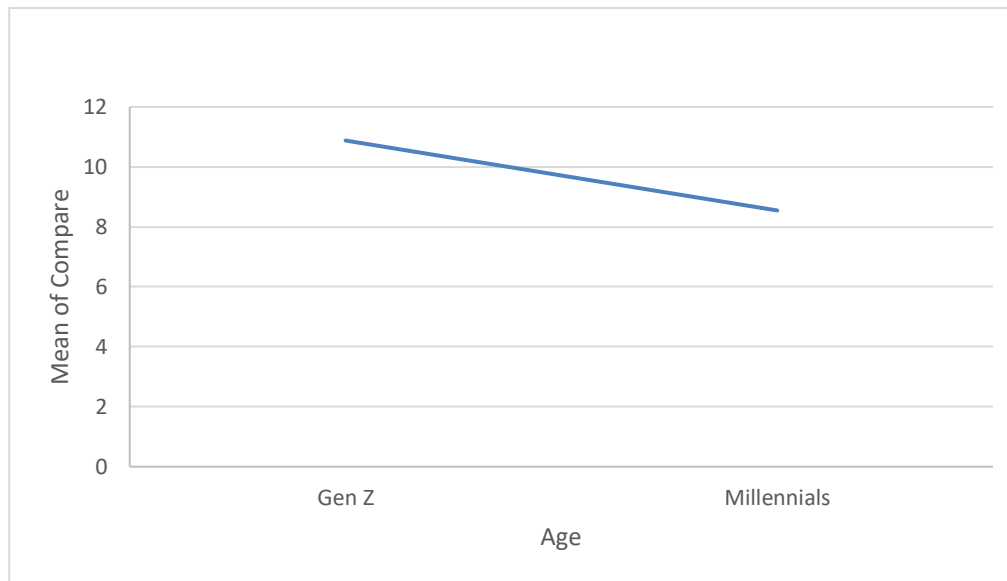
	Within Groups	2346.605	42	55.872		
	Total	3039.727	43			
Web_Mag	Between Groups	38.709	1	38.709	2.180	.147
	Within Groups	745.723	42	17.755		
	Total	784.432	43			
Compare	Between Groups	200.845	1	200.845	11.292	.002
	Within Groups	747.064	42	17.787		
	Total	947.909	43			
Awareness	Between Groups	.193	1	.193	.007	.935
	Within Groups	1214.716	42	28.922		
	Total	1214.909	43			
SATAQ-3R	Between Groups	3635.615	1	3635.615	8.339	.006
	Within Groups	18310.112	42	435.955		
	Total	21945.727	43			
RSES	Between Groups	57.143	1	57.143	2.841	.099
	Within Groups	844.766	42	20.113		
	Total	901.909	43			

### Age

Differences in age have also been analysed. Age groups were determined based on their generation. Participants of ages 20 to 24 belong to Gen Z while participants of ages 25 to 30 belong to the Millennials. Based on the ANOVA output, no significant differences can be assumed except for the internalization-comparison scale,  $F(1, 53) = 4.014$ ,  $p = .050$ , with Gen Z reporting the higher mean score ( $M = 10.88$ ,  $SD = 4.526$ ; Figure 3).

### Figure 3

*Mean scores of 'internalization-comparison' between Gen Z and Millennials*



### Discussion

The purpose of this study was to examine the effect different body types, as depicted on online websites, have on male body image and male body-related self-esteem. The hypothesis that exposure to body idealistic images have a negative effect on self-esteem and body image was partly supported by this study's findings. While there are no significant differences in body image across all conditions, findings have shown that self-esteem is negatively impacted when presented with body idealistic images. My second hypothesis that would see reversed effects with body positive images, is partially supported by the data. Self-esteem was positively affected by body positive images, but again, no significant differences in body image. In contrast, the third hypothesis, which suggested that body idealistic images pose a greater threat to BDD, was not supported by the data. Additionally, the fourth hypothesis, which stated that women and men alike experience similar levels of body image, was supported by the results.

In addition to the main findings, results have indicated that lower levels of self-esteem are related to higher BIA and BDD. Furthermore, other gender effects and an age effect have been found. For instance, women indicated higher levels of BIA/BDD than men. Scores on the AAI were not indicative of BDD though since a cut-off score of 20 was suggested (Mastro

et al., 2016). Results have also shown that women are overall more avoidant towards their bodies than men, meaning that they are more likely to hide aspects of their appearance for example. Women also tend to endorse media more than men, as they feel more pressure from online websites and the models depicted on them. Additionally, they also compare themselves more often to models on websites than men do. When analysing the data across all conditions, women also desire more to look like the people on online websites or magazines than men. This is in line with the findings of Quittkat and their colleagues (2020), who stated that the importance of appearance is high in young women, and often leads to comparison with others. In regards to the age effect, age predicts the levels of comparison. Male Gen Z participants are more likely to compare their bodies to the bodies of models on online websites than male Millennials, which is also in line with the findings of Quittkat and their colleagues (2020), who noted that age is predictive of how important appearance is to men.

In contrast to previous research, which suggests that exposure to certain beauty ideals and body idealistic images online have negative effects on body image (Tamplin, McLean & Paxton, 2018), this study's findings do not allow for such conclusion. Body image was not significantly affected by body idealistic images. This effect might have been more significant if the BIQ would have been used to the full extent. The screening of the BIQ gives the predetermined body image impairment and might therefore not be the ideal scale to measure body image as portrayed in this study.

In line with previous research are the findings on self-esteem, which also indicated that online contents, related to certain beauty ideals, affect self-esteem (Holmqvist & Frisén, 2010; Yan & Bissel, 2014; Heath et al., 2016; Tamplin, McLean & Paxton, 2018). These findings extend the existing research in so far since they have investigated the effects of body positive images, which indicate positive effects on self-esteem, whereas previous research was mainly invested in the negative effects. It has to be mentioned that differences between

the body positive condition and the control condition were not significant, but the body positive condition had the highest average score. This effect could perhaps be amplified with a larger sample set. Moreover, these findings add to the research of Thompson and McKinney (2020), who talked about the negative impact non-inclusive fashion has on men. Their research mentioned the pressures and the body dissatisfaction that come with mainstream fashion, and this study adds the factor self-esteem. These findings stress the importance as to why men should also be more incorporated in the BPM.

Heath and their colleagues (2016) as well as Dryer and their colleagues (2016) mentioned that BDD can be triggered by low self-esteem. Findings of the present study cannot say whether BDD is triggered by low self-esteem, but results have shown that BIA/BDD and self-esteem are negatively correlated, meaning that people with higher self-esteem seem to be more robust towards BDD. The average scores of BIA/BDD were higher in the body ideal condition, but since the effects were insignificant, a meaningful conclusion cannot be derived. Nevertheless, when looking at individual scores, participants, that met the cut-off score of the AAI (20 pts), were primarily from the body ideal conditions. Potentially, a sample larger in size would amplify the mean difference and would therefore align with previous research.

The findings on sociocultural attitudes were mainly insignificant, but measures on pressures were in support of what Thompson and McKinney (2020) have researched before. The lack of BPM for the male gender on online platforms has put a lot of pressure on men to fit into the mainstream beauty ideal (Thompson & McKinney, 2020). Men that have been exposed to body ideal images felt more pressure than participants that have not. Based on this study's outcomes, the pressures could potentially be eradicated with more content that supports the BPM. The lack of participants can possibly be blamed for the lack of significance on the other subscales, but when looking at the mean averages, individuals exposed to body

idealistic images scored higher. A larger sample size could potentially aid in amplifying these scores.

Although the findings on gender and body image are in line with the fourth hypothesis and with the findings of previous research (Thompson & McKinney, 2020), the use of the BIQ screening was perhaps not sufficient enough to draw any meaningful conclusions from this. As mentioned before with body image differences between conditions, effects are expected to be different should the BIQ be used in its entirety.

Findings on age effects are in line with the research carried out by Quittkat and their colleagues (2020), who suggested that age is not predictive of bodily satisfaction. Though, findings have shown that Gen Z participants tend to compare themselves more to people depicted in online media. Disruptions in body image are often associated with constant comparing, which is potentially higher in younger participants since appearance is more important to them than older participants (Himanshu et al., 2020; Quittkat et al., 2020).

### **Limitations**

This study provides important theoretical and practical implications. When interpreting the findings of this study, one must consider the implications the experiment brought along. First of all, participants were self-selected from the researcher's own network or were recruited via the Sona System, which compensated students for their efforts. Such recruitment procedure could have potentially brought bias into the study. Moreover, the utilization of the BIQ is very flawed and was not properly thought out. The screening test indicates the level of body image impairment by asking for the frequency of occurring thoughts and behaviours. It is unlikely that the frequency changes after the exposure to certain images. Also, by using the full BIQ, data such as, weight, height, and BMI would have been provided, which would allow for further insights. Participants in the body ideal condition might be of similar body type and feel therefore not affected by it. Generally speaking, the

data set was rather scarce since 55 participants had to be split into three different groups. This puts the reliability of the whole study in question.

### **Future Research**

For the future, it is suggested to collect data from a larger sample to buff the reliability. Future research could invest more time and resources in creating an experimental website that participants have to properly scan since participants of this study were only prompted to look at images without a time indicator. It should also include more measures from the BIQ to derive more information on the participants' body type. With that information, participants could be allocated to conditions that portray body types unequal to their own to trigger their self-esteem for example. Additionally, BIA/BDD should be further investigated since this study was not able to find significant differences between conditions, yet higher scores in BIA/BDD were associated with lower scores in self-esteem.

### **Conclusion**

Despite all limitations, this study has shown how negatively impacted the self-esteem of participants was when faced with body ideal images. This stresses the importance of fashion brands' responsibilities. With frequent internet usage and exposure to content that allows for comparison with others, brands should acknowledge their own responsibility in regard to men's mental health. These findings add to the notation that fashion brands should not neglect male body type diversity and instead should treat them equally as females in regard to the BPM. More inclusive images should therefore be reinforced, so that men are equally involved in the BPM as women, especially since body positive images could see a boost in self-esteem within the male population.



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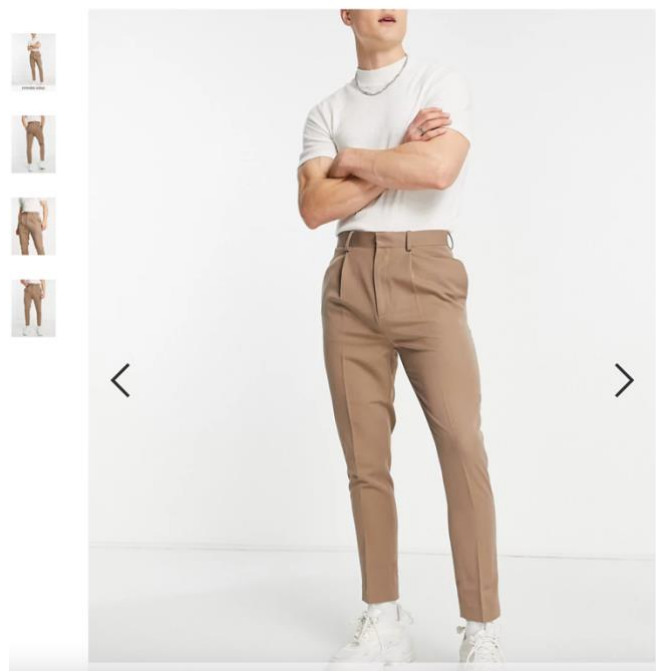
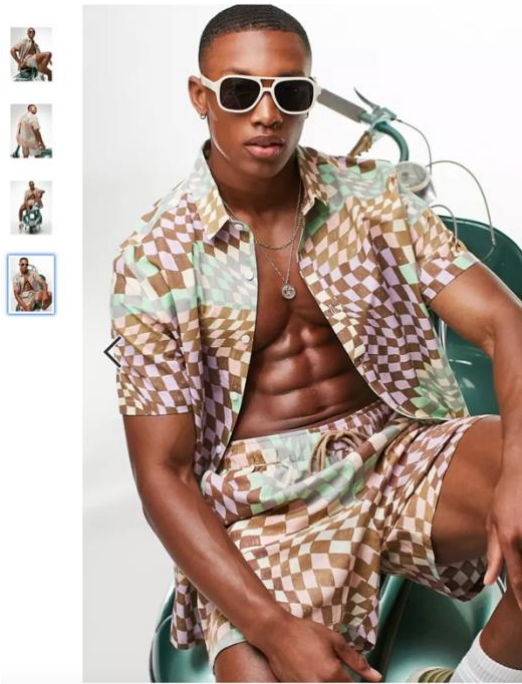
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Appendix A

Body Ideal and Body Positive Images

Body Ideal Images





Body Positive Images





**Appendix B**

**BIQ**

**1) How often do you deliberately check your feature(s)? Not accidentally catch sight of it.**

**Please include looking at your feature in a mirror or other reflective surfaces like a shop window or looking at it directly or feeling it with your fingers.**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>About 40 times or more a day</b>	<b>About 20 times a day</b>	<b>About 10 times a day</b>	<b>About 5 times a day</b>	<b>I never check</b>

**2) How much do you feel your feature(s) is currently ugly, unattractive or ‘not right’?**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**3) How much does your feature(s) currently cause you a lot of distress?**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**4) How often does your feature(s) currently lead you to avoid situations or activities?**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>



**5) How much does your feature(s) currently preoccupy you? That is, you think about it a lot and it is hard to stop thinking about it?**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**6) If you have a partner, how much does your feature(s) currently have an effect on your relationship with an existing partner? If you do not have a partner, how much does it have an effect on dating or developing a relationship?**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**7) How much does your feature(s) currently have an effect on an existing or potential sexual relationship? (e.g., enjoyment of sex, frequency of sexual activity)**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**8) How much does your feature(s) currently interfere with your ability to work or study, or your role as a homemaker? (Please rate this even if you are not working or studying: we are interested in your ability to work or study.)**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
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<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>
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**9) How much does your feature(s) currently interfere with your social life?**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**10) How much do you feel your appearance is the most important aspect of who you are?**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**11) How noticeable do you feel your feature is to other people (if you do not camouflage yourself e.g., with clothes, padding and/or makeup) and the feature has not been pointed out to them)?**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**12) How does your feature compare to others of the same age, sex, and ethnic group?**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**Shape or Weight****1. I body build with weights**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**2. I use steroids**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**3. I weigh myself more than necessary**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**4. I restrict my food to improve my shape or reduce my weight**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**5. I sit with my toes on the floor to avoid my thighs spreading**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**6. I eat more food to increase my weight**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

**7. I use diet pills, laxatives or diuretics**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Not at all</b>	<b>A little</b>	<b>A moderate amount</b>	<b>A lot</b>	<b>A great amount</b>

## Appendix C

## RSS

1) On the whole, I am satisfied with myself.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree

2) At times I think I am no good at all.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree

3) I feel that I have a number of good qualities.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree

4) I am able to do things as well as most other people.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree

5) I feel I do not have much to be proud of.

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neither Agree or Disagree</b>	<b>Agree</b>	<b>Strongly Agree</b>

6) I certainly feel useless at times.

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neither Agree or Disagree</b>	<b>Agree</b>	<b>Strongly Agree</b>

7) I feel that I'm a person of worth, at least on an equal plane with others.

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neither Agree or Disagree</b>	<b>Agree</b>	<b>Strongly Agree</b>

8) I wish I could have more respect for myself.

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neither Agree or Disagree</b>	<b>Agree</b>	<b>Strongly Agree</b>

9) All in all, I am inclined to feel that I am a failure.

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neither Agree or Disagree</b>	<b>Agree</b>	<b>Strongly Agree</b>

**10) I take a positive attitude toward myself.**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neither Agree or Disagree</b>	<b>Agree</b>	<b>Strongly Agree</b>

**Appendix D****SATAQ-3R***Importance*

- 1) Clothing Websites are an important source of information about fashion and “being attractive”.
- 2) Pictures on websites are an important source of information about fashion and “being attractive”.
- 3) Models depicted on websites are an important source of information about fashion and “being attractive”.
- 4) Fashion Magazines are an important source of information about fashion and “being attractive”.
- 5) Magazine articles are an important source of information about fashion and “being attractive”.
- 6) Magazine advertisements are an important source of information about fashion and “being attractive”.
- 7) Pictures in magazines are an important source of information about fashion and “being attractive”.

*Pressures*

- 8) I've felt pressure from websites or magazines to lose weight.
- 9) I've felt pressure from websites or magazines to look pretty.
- 10) I've felt pressure from websites or magazines to be thin.
- 11) I've felt pressure from websites or magazines to have a perfect body.
- 12) I've felt pressure from websites or magazines to diet.
- 13) I've felt pressure from websites or magazines to exercise.
- 14) I've felt pressure from websites or magazines to change my appearance.



*Internalization-Websites/Magazines*

15) I would like my body to look like the people who are on clothing websites.

16) I would like my body to look like the models who appear in magazines.

17) I try to look like the people on clothing websites.

18) I try to look like the people in magazines.

*Internalization-Comparison*

19) I compare my body to the bodies of models on clothing websites.

20) I compare my appearance to the appearance of models on clothing websites.

21) I compare my body to the bodies of people who appear in magazines.

22) I compare my appearance to the appearance of people in magazines.

*Awareness*

23) Clothes look better on people who are attractive.

24) Clothes look better on people who are thin.

25) Clothes look better on people who have an athletic body.

26) Attractive people are better liked than unattractive people.

27) People who are thin are better looking than people who are overweight.

28) People who have an athletic body are better looking.

29) Physically fit people are more attractive.

30) Good looking people are more successful.

31) Attractive people are happier.

*This scale is scored from 1 to 5: definitely disagree, somewhat disagree, neither disagree nor agree, somewhat agree, and definitely agree.*

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Definitely disagree</b>	<b>Somewhat disagree</b>	<b>Neither disagree nor agree</b>	<b>Somewhat agree</b>	<b>Definitely agree</b>

## Appendix E

## AAI

		Not at all	A little	Often	A lot	All the time
1	I compare aspects of my appearance to others	0	1	2	3	4
2	I check my appearance (e.g. in mirrors, by touching with my fingers, or by taking photos of myself)	0	1	2	3	4
3	I avoid situations or people because of my appearance	0	1	2	3	4
4	I brood about past events or reasons to explain why I look the way I do	0	1	2	3	4
5	I THINK about how to camouflage or alter my appearance	0	1	2	3	4
6	I am focussed on how I feel I look, rather than on my surroundings	0	1	2	3	4
7	I avoid reflective surfaces, photos, or videos of myself	0	1	2	3	4
8	I discuss my appearance with others or question them about it	0	1	2	3	4
9	I try to camouflage or alter aspects of my appearance	0	1	2	3	4
10	I try to prevent people from seeing aspects of my appearance within particular situations (e.g., by changing my posture, avoiding bright lights)	0	1	2	3	4