

# FROM FEELING INFERIOR TO BEING CONCERNED ABOUT ONE'S BODY WEIGHT AND SHAPE:

## THE WEIGHT OF BODY IMAGE - RELATED INFLEXIBILITY

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### Introduction

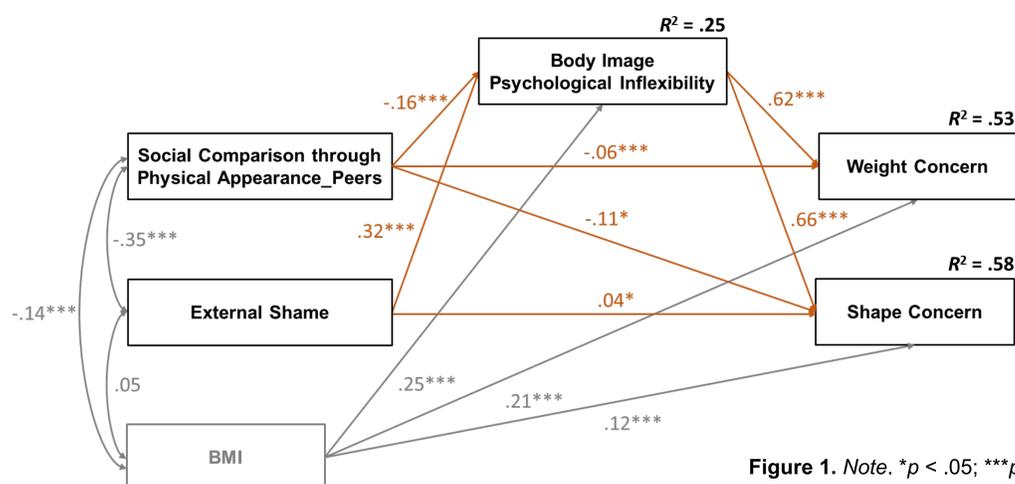
Literature has put emphasis on the idea that women who compare their bodily appearance with others, and perceive that others judge negatively one's characteristics (external shame) are at greater risk for body image dissatisfaction and developing an eating disturbance (e.g., Ferreira, Pinto-Gouveia, & Duarte, 2013; Goss & Allan, 2009; Tiggemann, Polivy, & Hargreaves, 2009).

Moreover, in the area of body image and eating-related psychopathology, one construct that has been underlined as malign and pervasive is body image-related psychological inflexibility, i.e., the incapacity or unwillingness to accept and experience undesired perceptions, sensations, feelings, thoughts and beliefs regarding one's physical appearance, and attempts to change their intensity, frequency or form (Sandoz, et al., 2009).

Nonetheless, relationships between the aforementioned variables remain scarcely explored, namely the ones underlying emotion regulation mechanisms. In this line, the present study aimed at testing a path model in which was hypothesized that appearance-based social comparison with peers and shame are associated with higher body weight and shape concerns (main risk factors for eating disorders) via higher body image-related inflexibility, while controlling the effect of body mass index.

	M (SD)	1	2	3	4	5
1. BMI	21,86 (3,14)	-				
2. Social Comparison through Physical Appearance (Peers)	63,43 (12,58)	-.14***	-			
3. External Shame	5,76 (14,28)	.05	-.35***	-		
4. Body Image Psychological Inflexibility	28,30 (14,28)	.29***	-.31***	.39***	-	
5. Weight Concern	1,69 (1,36)	.39***	-.29***	.31***	.70***	-
6. Shape Concern	1,78 (1,45)	.32***	-.34***	.36***	.74***	.89***

Table 1. Note. \*\*\* $p < .001$



### Methods

This study was conducted in a community sample of Portuguese females ( $N = 776$ ) aged between 18 and 34 ( $M = 20,60$ ;  $SD = 2,18$ ). Body mass index values were in accordance with those found in the Portuguese population ( $M = 21.86$ ;  $SD = 3.14$ ).

The following set of self-report measures were administrated to participants:

- **Social Comparison through Physical Appearance Scale** (Ferreira, Pinto-Gouveia, & Duarte, 2013) – to measure social comparison with peers through physical appearance;
- **The Other as Shamer Scale – 2** (Matos, Pinto-Gouveia, Gilbert, Matos, & Figueiredo, 2015) – to evaluate external shame;
- **Body Image – Acceptance and Action Questionnaire** (Sandoz, Wilson, Merwin, & Kellum, 2013; Ferreira, Pinto-Gouveia, & Duarte, 2011) – to assess body image-related psychological inflexibility;
- **Eating Disorders Examination - Questionnaire** (Fairburn & Beglin, 1994; Machado et al., 2014) – subscales Weight Concern and Shape Concern – to assess pathological concerns about one's weight and shape;
- **Body Mass Index** (WHO, 1995) – BMI.

Descriptive and correlation analyses (Table 1) were conducted to explore the characteristics of the sample and associations between variables. To assess the mediator role of body image psychological inflexibility, a path analysis was performed (Figure 1).

### Results

Path analysis' results (Fig. 1) showed that the negative impact of favourable social comparison with peers based on physical appearance on both concerns with weight ( $\beta = -.10$ ;  $CI = -.15$  to  $-.05$ ) and body shape ( $\beta = -.11$ ;  $CI = -.16$  to  $-.06$ ) is partially mediated by body image psychological inflexibility.

Regarding external shame, while its effect on shape concern is both direct and indirect ( $\beta = .21$ ;  $CI = .16$  to  $.27$ ), its effect on weight concern is only significant at an indirect level, i.e., when mediated by body image psychological inflexibility ( $\beta = .20$ ;  $CI = .15$  to  $.26$ ).

The tested model accounted for 25%, 53%, and 58% of the variances of body image psychological inflexibility, weight concern and shape concern, respectively, and presented excellent model fit indices.

### Discussion

Results from the present study showed that higher favourable comparison with others based on physical appearance associate with lower concerns about body weight and shape via lower psychological inflexibility. Moreover, the perception that others judge one's features in a negative way associates with a higher display of body image-related concerns, via higher psychological inflexibility.

Overall, results seem to suggest that the inability to accept and experience uncomfortable internal events related to body image without engaging in experiential avoidance (or trying to change their intensity, frequency or form) seems to be a mediator of the impact of comparisons with peers based on physical appearance and external shame on pathological concerns about one's weight and shape, which are considered to be central symptoms of eating disorders. Moreover, results seem to enhance that, in women, body image-related psychological inflexibility may be an ineffective and costly mechanism to deal with discomfort and suffering.

These findings appear to be relevant to the design of upcoming interventions to treat prevent body image and eating-related disturbances among women, by suggesting the pertinence of targeting psychological inflexibility, and combining Compassion Focused Therapy and Acceptance and Commitment Therapy.

### References

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