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# INFLUENCE OF THE BODY-POSITIVE MOVEMENT ON YOUTH HABITS, EATING BEHAVIOR AND SOCIAL PARTICIPATION Bianca Puntareli<sup>a;</sup> Gabriella A. Di Capua<sup>b</sup>, Carolina Jimenez<sup>c</sup>,

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### ABSTRACT

Introduction: The Body-Positive Movement is a movement that promotes the acceptance of different body types in social networks, challenging the prevailing stereotypical norms and ideals around physical appearance. As a result of its high diffusion and increasing reach in the population, knowing if there is a relationship between the BPM and people's daily life behaviors is a challenge. Objective: To determine the influence of the movement on the habits, eating behavior and social participation of its followers considering a human occupation perspective. Methodology: Analytical cross-sectional study. A survey was designed to assess the extent to which the modifications introduced in habits, eating behavior and social participation can be influenced by the movement. The survey was answered by 113 followers, residents of Chile, who were called through social networks from May to August 2023. The association of the influence of the BPM on the modification of habits, eating behaviors and social participation was determined by means of Fisher's exact test (95% CI, p< 0.05). Results: Instagram was positioned as the largest social network for dissemination and promotion of the movement. Most of its followers are regular connoisseurs and perceive it positively. The movement's influence was associated with the acquisition of healthy eating behaviors and habits but had no influence on aspects of social participation. Conclusion: BPM can be an effective tool to promote selfperception, body acceptance and improve people's relationship with food and physical activity. Keywords: Chile; Body-Positive Movement; Human Occupation; Social Networks; Instagram

#### RESUMEN

Introducción: El Movimiento Body-Positive es un movimiento que fomenta la aceptación de los diferentes tipos de cuerpos en redes sociales, desafiando las normas e ideales de estereotipos imperantes en torno a la apariencia física. A raíz de su alta difusión y alcance cada vez mayor en la población, conocer si existe una relación entre el BPM y las conductas de vida cotidiana de las personas supone un desafio. Objetivo: Determinar la influencia del movimiento sobre los hábitos, conducta alimentaria y participación social de sus seguidores considerando una perspectiva de ocupación humana. Metodología: Estudio transversal analítico. Se diseño una encuesta para valorar en cuanto las modificaciones introducidas en los hábitos, conductas alimentaria y participación social pueden estar influenciadas por el movimiento. La encuesta fue respondida por 113 seguidores, residentes en Chile, convocados a través de redes sociales de mayo a agosto del 2023. La asociación de la influencia del BPM sobre la modificación de los hábitos, conductas alimentaria y participación social fue determinada por medio de la prueba exacta de Fisher (95% IC, p < 0.05). Resultados: Instagram se posicionó como la mayor red social de difusión y promoción del movimiento. La mayoría de sus seguidores son conocedores asiduos y lo perciben de manera positiva. La influencia del movimiento se asoció con la adquisición de conductas alimentarias y hábitos saludables, pero no tuvo influencia sobre aspectos de participación social. Conclusión: El BPM puede ser una herramienta efectiva para fomentar la autopercepción, aceptación del cuerpo y mejorar la relación de las personas con la comida y actividad física.

Palabras claves: Chile; Movimiento Body-Positive; Ocupación Humana; Redes Sociales; Instagram

#### INTRODUCTION

Western culture is characterized by positioning physical beauty as the main quality that makes people valuable beings (Martínez & Muñoz, 2014), where being thin is synonymous with triumph (Behar, 2010). This perception is favored by multiple advertising messages in the media where beauty and success converge, thus contributing to the development of diet culture, changes in body image (Behar, 2010), and body dissatisfaction (Rodin et al., 1984).

Evidence shows that body dissatisfaction can manifest in all stages of the life cycle, both in men and women (Martini et al., 2023; Mellor et al., 2010; Talbot et al., 2019; Tremblay et al., 2011; Ricciardelli et al., 2001) and is identified as a predictor for the development of Eating Disorders (ED) (Jacobi et al., 2010; Stice et al., 2012; Stice et al., 2002). According to the DSM-V (2014), EDD is a behavioral disturbance linked to eating that lasts over time and causes psychosocial and physical impairment.

The use of social networks has facilitated the propagation of thinness as a standard of beauty and may have an impact on body dissatisfaction (Jiotsa et al., 2021). One of the current and main social networks linked to body image used in Chile is Instagram (Entel, 2021), in which people interact through audiovisual content, comments and likes. Photo editing and the use of filters is characteristic of this medium and also aim to reproduce hegemonic beauty standards (Bryant et al., 2018). According to Tiggerman et al. (2018), the visualization of images that endorse the ideal of thinness leads to greater body dissatisfaction, so that constant exposure to this type of audiovisual material on social networks affects the self-perception and valuation of the viewer.

During 2012, the Body-Positive Movement (BPM) was established in social networks with the aim of reducing the propagation of Western beauty standards, mitigating body dissatisfaction, as well as promoting the acceptance of all bodies, regardless of their size or shape (Cohen et al., 2021; Sastre, 2014). Currently, the hashtag #bodypositive reaches 18,932,996 posts on Instagram globally (Instagram, 2023) and 128,000,000 views on Tik-Tok domestically (Tik-Tok, 2023).

Several international studies have described positive impacts of BPM, such as improvements in selfesteem, mood and greater body satisfaction (Fioravanti et al., 2021; Nelson et al., 2022; Davies et al., 2020). Given the above, the aim of this article is to determine the degree of influence that BPM exerts on habit modification, i.e., occupational tendencies or patterns acquired over time (Kielhofner, 2015); social participation, understood as activities that involve social interaction with community members (AOTA, 2020) and on eating behavior, i.e., on practices, choices and motivation around eating (LaCaille, 2013; Grimm, 2011) using the Human Occupation Model as a theoretical perspective.

#### MATERIALS AND METHODS

The research was developed with a cross-sectional analytical design. For data collection, a selfapplicable survey was developed, which was designed considering the Model of Human Occupation (Kielhofner, 2017) and the Guide for Intervention in Eating Behavior Disorders in Occupational Therapy (Cabañero and Escrivá, 2016). The instrument was validated through expert judgment where two academics from the area of Nutrition and an Occupational Therapist from the University participated. The research protocol was approved by the Scientific Ethics Committee of the Universidad Andrés Bello and adheres to current ethical regulations.

The dissemination of the call was online using social networks. Responses to the survey questions were collected and recorded through the Google Form web application available from May to August 2023. Briefly, the instrument consists of 3 items and 34 questions (Table 1A, Annexes). The first item "Personal data" consists of 6 questions aimed at finding out demographic background and personal data of the participants considering the ethical aspects of voluntary participation and confidentiality. Item 2 "Knowledge about the BPM" consists of 6 questions aimed at finding out the movement and whether they would recommend it to others. A scale from 0 to 10 was applied to assess the participants' level of understanding of the movement. Finally, item 3 "Influence of the Body-Positive movement on behavioral patterns" is composed of 22 paired questions where the participant assigns for each question the level of influence associated with the BPM. Thus, eleven of the twenty-two questions were intended to assess the participants' eating behavior (questions 1 - 4), habits (questions 5 - 8) and occupational patterns (questions 9-11) with five response options (always, almost always, sometimes, rarely, rarely, never), while the remaining eleven aim to quantify to what degree such compartments may be associated with the influence of the BPM using a scale of high (scores from 7 to 10), moderate (4 to 6), low (1-3), no influence (0), shown in Table 1.

#### Data analysis

A total of 117 surveys were completed through Google Form. The data not considered for the subsequent analyses corresponds to 1/117 who did not accept the treatment of their data and 3/117 without residence in Chile, so the total sample was 113 participants, all of them of legal age (>18 years) and followers of the movement. To quantify the responses to question II.6, the quantitative content analysis technique was

applied to describe the motivations that users stated for recommending the movement (Table 2A, Annexes). For the statistical analyses, the average, mean, standard deviation (SD) and frequencies were used to describe the sample. The association of the degree of influence of the BPM on habits, eating behavior and social participation was determined using Fisher's exact test of two-tailed independence for small samples. The significance of the test is reported with a 95% confidence interval (p-value < 0.05) determined using GraphPad Prism software version 10.0.1, https://www.graphpad.com.

### RESULTS

### Followers of the Body-Positive Movement in Chile

The sample consisted of 113 participants (109 females, 4 males), aged between 48 and 18 years, with an average age of 30.7 years± 7.3 SD, and a mode of 23 years distributed throughout the country. The vast majority of the respondents are assiduous connoisseurs of the BPM (Figure 1A). In fact, 75/113 (66%) reported having very high or high levels of understanding of the BPM, 30/113 (27%) sufficient and only 6% reported having low, very low (7/113) or no understanding of the movement (1/113). In turn, 92% (104/113) of respondents learned about the BPM through social networks, of which Instagram stands out with 84% (87/104) of the responses, Tik-Tok with 8% (8/104) and YouTube with 5% (5/104). The remaining 8% of the total respondents report having known about the movement through a friend (3/113, 3%) or by other means (5%) (Figure 1B-C). Likewise, most participants (88/113, 78%) think that the social network that most promotes the movement is Instagram, followed by Tik-Tok (18/113, 16%) and YouTube (2/113, 2%); 4% (5/113) of respondents do not refer to any social network as a promoter of the BPM or do not know the answer (Figure 1D). Of the total, most participants refer that they would recommend the BPM to a friend or family member (99/113, 87%), 12/113 (11%) would not and the remaining 2% (2/113) do not refer a position (Figure 1E). Among the main reasons why the followers would recommend the BPM, the category inclusion stands out, as they consider that the BPM favors the acceptance of body diversity (29.1%), the category self-esteem, emphasizing that the BPM produces an increase in self-esteem (23.1%) and the category Mental Health, as they report greater psychological well-being (10.3%) and a healthier relationship with food (7.7%). On the other hand, the most frequent motivation for not recommending the BPM is found in the category Toxic Positivism. It shows feelings of guilt for not accepting one's own body (13.3%), emphasizes that it is unnecessary to love all physical imperfections (13.3%) and emphasizes that the BPM rules out the possibility of improving body aesthetics (13.3%). The second most frequent motivation for not recommending BPM is that the subjectivity of the individual should be taken into consideration. The followers of the BPM consider that it is a personal decision (20%) and others would even recommend another movement (6.7%).

### Influence of BPM on eating behavior, habits, and social participation

The description of the eating behavior, habits, and social participation of the respondents is summarized in Table 1. In relation to eating behavior, most of the participants report skipping meals in order to modify their body image rarely (29%) or never (37%); of having restricted or modified their eating based on calories or the amount of food for fear that it would change their body image sometimes (27%), rarely (28%), or never (28%); of seeking information related to food (food calories, fat burning, diuretics, etc.), in order to modify their body image rarely (27%) or never (42%); and to show interest in seeking body-related

information (exercises, slimming creams, ideal measurements, etc.), sometimes (27%), rarely (24%), or never (23%).

In relation to habits, most of the participants report that they never (34%) or rarely (28%) pay excessive attention to the labels and nutritional value of foods (low calorie, light, whole grain, etc.) when shopping at the supermarket; that they always (27%) or sometimes (44%) avoid wearing certain items of clothing due to dissatisfaction with their own body image; and that sometimes (34%) or rarely (19%) the main motivation is to maintain or improve their own physical appearance when doing physical activity. On the other hand, to the question "when I take a shower, get dressed or pass in front of a mirror, I avoid looking at myself to avoid seeing parts of my body that I do not like and/or I focus excessively on them" the respondents answered always/almost always (34%), sometimes (23%), rarely (18%) and never (25%).

In relation to social participation, most respondents never (63%) or rarely (18%) avoided participating in social events to avoid food intake or out of embarrassment for others to see their body; never (69%) or rarely (17%) avoided participating in family events to avoid food intake or out of embarrassment for others to see their body; and never (63%) or rarely (19%) avoided participating in hobbies that are of their own interest to avoid food intake or out of embarrassment for others to see it.

The association of the influence exerted by the BPM on the behaviors is described in Table 2. Specifically, 66% of participants purposely skip meals in order to modify body image rarely or never, and of these 55% (33/74) perceive that BPM has exerted a high influence on such behavior and 20% (15/74) perceive a moderate influence (p = 0.015). The remaining 35% (26/74) do not associate such behavior with movement. Similarly, 57% of participants report restricting or modifying their eating based on calories for fear that their image will rarely or never change, and of these, 53% (34/64) perceive that the BPM has exerted a high influence on such behavior, 13/64 (20%) perceive a moderate influence, while 17/64 (30%) do not perceive such behavior to have been influenced by the movement (p = 0.022). This is also the case with coping with one's own body, where most of them (20%) indicate that they never or rarely avoid looking at their own body in front of a mirror and relate this behavior to BPM (p = 0.003). On the other hand, 47% (33/70) of participants who report not paying excessive attention to food labels and nutritional value when shopping at the supermarket attributes their behavior to BPM (p = 0.026).

In relation to clothing and physical activity habits, 54% (27/50) report that they sometimes avoid wearing certain items of clothing due to dissatisfaction with their own body image, and associate this behavior with the influence of movement (p = 0.030); also more than half of the respondents (20/38 or 52%) who sometimes have as their main motivation the maintenance or improvement of their appearance when performing physical activity, consider that this behavior is influenced by the BPM (p = 0.030).

While 40% (36/90) of respondents rarely or never avoid participating in social events to avoid food intake or out of embarrassment to be seen, there is no influence of BPM on this behavior. This same trend is also observed for 37% (35/95) of respondents who rarely or never avoid participating in family events to avoid food intake or out of embarrassment to be seen; as well as for 39% (36/92) of respondents who rarely or never avoid participating in hobbies to avoid food intake or out of embarrassment to be seen; as well as for 39% (36/92) of respondents who rarely or never avoid participating in hobbies to avoid food intake or out of embarrassment to be seen.

### DISCUSSION

The results obtained from this study on the Body-positive Movement (BPM) in Chile provide a detailed view of the movement's influence on the eating behavior, habits, and social participation of respondents.

These results could generate diverse scientific and social interpretations and discussions, but, in general, they provide a solid basis for further research on the relationship between BPM and mental health, eating behavior, and social participation. Furthermore, they could serve as a starting point for future research and for developing interventions to promote positive body image in a healthy way.

Regarding the reach and awareness of the BPM, it stands out that most of the participants are aware of the BPM through social networks, especially Instagram. This raises questions about the role of digital platforms in promoting movements related to body image and self-acceptance.

The preference of Instagram as the most influential social network may raise debates about the visual nature of this platform and its impact on the perception of body image. While most studies relate social networks with body dissatisfaction (Souza and Alvarenga, 2016; Meier and Gray, 2014), there are studies that evidence that the presence of images linked to compassion and acceptance of appearance, have a positive impact on self-perception and body satisfaction (Slater et al. 2017). Thus, the impact of Instagram on body image depends on the content viewed by the user.

Regarding motivations for recommending the BPM, the high proportion of participants who would recommend the BPM to friends or family suggests that the movement has significant support. Coincident with the literature, respondents refer to recommending the movement for its positive impact on self-esteem, mental health, and self-perception (Chiat, 2021; Cohen et al. 2021). In addition to personal motivations, social motivations for recommending movement emerge, such as the eradication of beauty stereotypes, greater inclusion in body diversity, and changes in health care.

In relation to the influence of the BPM on eating behavior and habits, the results indicate that a significant portion of respondents adjust their eating behavior and habits according to the BPM. This is consistent with Santarossa and Woodruff (2017), who suggest that exposure to content linked to beauty ideals in social networks influences the eating behavior of the audience. In this sense, the BPM would have a significant influence on the eating behavior and occupational patterns or habits of its followers, so it can be an effective tool to promote body acceptance and improve people's relationship with food and physical activity; however, no other studies were found that show the influence of the BPM in everyday life.

Regarding social participation and event avoidance, it is important to note that the BPM does not seem to have a significant impact on its followers. This may be because body acceptance and promotion of healthy habits are more personal and private issues, whereas social participation is influenced by more complex social constructs, at the individual, structural, local and global levels (Fudge, 2014). Most respondents do not avoid social events due to BPM, which could be a subject of discussion about limiting the influence of movement on certain aspects of people's lives. However, the fact that some participants associate certain social behaviors with BPM also raises questions about how movement impacts social

interactions and personal acceptance. It also raises questions about the ethical responsibility of the movement for the mental and physical health of its followers, in that the association between mirror avoidance and BPM may open a debate about how the movement may affect self-image and the relationship with one's own body.

Another relevant finding is that BPM followers have a high level of understanding of BPM and would recommend it to others, highlighting the importance of considering the Human Occupation perspective when evaluating the effects of BPM on people's daily lives. Overall, the results of the study suggest that the BPM can be a valuable tool for improving people's health and well-being, but it is important to continue research to better understand its impact on different aspects of daily life. Among the methodological limitations of the study, the selected sample was restricted to BPM followers in the national territory, mostly women, so the influence of BPM on the male gender is unknown. At the same time, the scarce literature from occupational therapy makes it difficult to deepen the influence of BPM in people's daily lives, so this study opens a line of research for the profession.

### CONCLUSION

The objective of this research was to determine the effect that the BPM has on certain types of behaviors considering a Human Occupation perspective in the national population and followers of the Body-Positive Movement. The results show that unlike what happens with social participation, the BPM exerts a significant influence both on eating behavior and on the occupational patterns or habits of its followers, promoting the acquisition of healthy eating behaviors and habits.

On the other hand, BPM followers have a high level of understanding of the movement and would recommend it to others, which highlights the importance of considering the Human Occupation perspective when evaluating its effects on people's daily lives. The results suggest that BPM can be a valuable tool for improving people's health and well-being, but more research is needed to better understand its impact on different aspects of daily life.

Prospectively, it would be interesting to carry out participatory action research to extract tools from the BPM in order to formulate new intervention proposals that enrich the praxis of occupational therapy in users with occupational problems of daily life related to body image and eating behavior.

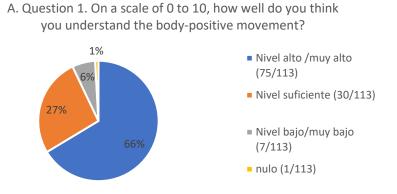
#### Financing

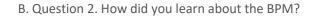
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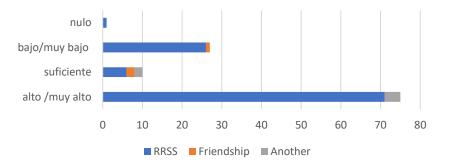
#### **TABLES AND FIGURES**

**Figure 1. Stratification of participants according to relative knowledge of the BPM.** The results of the first five questions of the survey are reported below. (A) Pie chart according to assigned categories. On a scale of 0-10, fluctuating scores between 7-10 were interpreted as a high or very high level of understanding, 5-6 a sufficient level, 1-4 a low or very low level, and zero was used to describe a lack of understanding

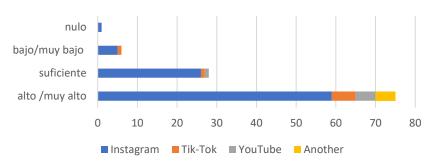
about the BPM. **(B-D)** Stacked bar graphs represent the total number of responses obtained according to the level of understanding of the BPM.



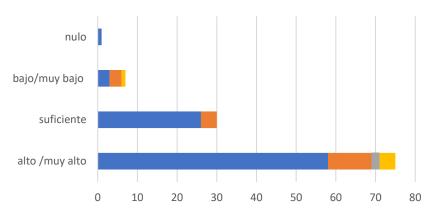




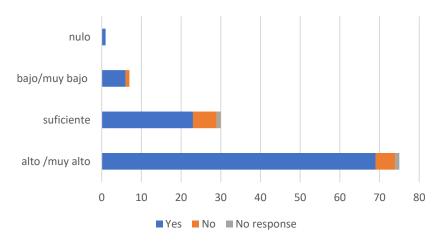
C. Question 3. If you learned about the BPM through social networks, please indicate which of the following:



D. Question 4. I consider that the social network that most promotes the BPM is:



E. Question 5. Would you recommend the BPM to a friend and/or family member?



Questions associated with eating behavior, habits, and social participation.	nr. responses by category (%)	Questions related to the influence of the BPM	nr. of responses according to degree o influence (%)
1. I skip meals on purpose, in order to modify my body image.	always: 2 (2%) almost always: 8 (7%) sometimes: 28 (25%) rarely: 33 (29%) never: 42 (37%) n = 113 (100%)	1A. In relation to question 1 How much do you consider that the BPM has influenced the decrease of the mentioned behavior?	high: 46 (41%) moderate: 32 (29%) low: 13 (12%) null: 21 (19%) n = 112 (100%)
<ol> <li>I restrict or modify my eating based on calories or the amount of food for fear that it will change my body image.</li> </ol>	always: 7 (6%) almost always: 11 (10%) sometimes: 31 (27%) rarely: 32 (28%) never: 32 (28%) n = 113 (100%)	2A. In relation to question 2 How much do you consider that the BPM has influenced the decrease of the mentioned behavior?	high: 51(46%) moderate: 30 (27%) low: 12 (11%) null: 19 ( 17%) n = 112 (100%)
3. I am interested in seeking information related to food (), in order to modify my body image.	always: 9 (8%) almost always: 8 (7%) sometimes: 18 (16%) rarely: 31 (27%) never: 47 (42%) n = 113 (100%)	3A. In relation to question 3 How much do you consider that the BPM has influenced the decrease of the mentioned behavior?	high: 51(46%) moderate: 32 (29%) low: 10 (9%) null: 19 (17%) n = 112 (100%)
4. I have an interest in seeking information related to the body.	always: 8 (7%) almost always: 22 (19%) sometimes: 30 (27%) rarely: 27 (24%) never: 26 (23%) n = 113 (100%)	4A. In relation to question 4 How much do you consider that the BPM has influenced the decrease of the mentioned behavior?	high: 49 (44%) moderate: 30 (27%) low: 18 (16%) null: 15 (13%) n = 112 (100%)
5. When I go shopping at the supermarket I pay excessive attention to the labels and nutritional value of the food ()	always: 8 (7%) almost always: 11 (10%) sometimes: 24 (21%) rarely: 32 (28%) never: 38 (34%) n = 113 (100%)	5A. In relation to question 5 How much do you consider that the BPM has influenced the decrease of the mentioned behavior?	high: 41 (37%) moderate: 42 (38%) low: 8 (7%) null: 21 (19%) <i>n</i> = 112 (100%)
6. When I shower, get dressed or pass in front of a mirror, I avoid looking at myself to avoid seeing parts of my body that I don't like and/or focus excessively on them.	always: 19 (17%) almost always: 19 (17%) sometimes: 26 (23%) rarely: 20 (18%) never: 29 (25%) n = 113 (100%)	6A. In relation to question 6 How much do you consider that the BPM has influenced the decrease of the mentioned behavior?	high: 49 (37%) moderate: 32 (38%) low: 16 (7%) null: 15 (19%) n = 112 (100%)
7. I avoid wearing certain items of clothing due to dissatisfaction with my body image.	always: 30 (27%) almost always: 16 (14%) sometimes: 50 (44%) rarely: 13 (12%) never: 4 (4%) n = 113 (100%)	7A. In relation to question 7 How much do you consider that the BPM has influenced the decrease of the mentioned behavior?	high: 46 (41%) moderate: 36 (32%) low: 18 (16%) null: 12 (11%) n = 112 (100%)
8. When I engage in physical activity, my main motivation is to maintain or improve my physical appearance.	always: 19 (17%) almost always: 17 (15%) sometimes: 38 (34%) rarely: 22 (19%) never: 17 (15%) n = 113 (100%)	8A. In relation to question 8 How much do you consider that the BPM has influenced the decrease of the mentioned behavior?	high: 47 (42%) moderate: 39 (35%) low: 12 (11%) null: 14 (13%) n = 112 (100%)
9. I avoid participating in social events to avoid food intake or out of embarrassment for others to see my body.	always: 2 (2%) almost always: 4 (4%) sometimes: 16 (14%) rarely: 20 (18%)	9A. In relation to question 9 How much do you consider that the BPM has influenced the decrease of the mentioned behavior?	high: 42 (38%) moderate: 25 (22%) low: 17 (15%) null: 28 (25%)

## Table 1. Description of behavioral patterns and degree of influence of the BPM.

	never: 71 (63%) n = 113 (100%)		n = 112 (100%)
10. I avoid participating in family events to avoid food intake or out of embarrassment for others to see my body.	always: 5 (4%) almost always: 2 (2%) sometimes: 9 (8%) rarely: 19 (17%) never: 77 (69%) n = 112 (100%)	10A. In relation to question 10 How much do you consider that the BPM has influenced the decrease of the mentioned behavior?	high: 40 (36%) moderate: 21 (19%) low: 18 (16%) null: 32 (29%) n = 111 (100%)
11. I avoid participating in hobbies that are of interest to me to avoid food intake or out of embarrassment for others to see me.	always: 2 (2%) almost always: 5 (4%) sometimes: 13 (12%) rarely: 22 (19%) never: 71 (63%) n = 113 (100%)	11A. In relation to question 11 How much do you consider that the BPM has influenced the decrease of the mentioned behavior?	high: 40 (36%) moderate: 24 (21%) low: 21 (19%) null: 27 (24%) n = 112 (100%)

### Table 2. Association of eating behavior patterns, habits, and social participation with the BPM.

I. I skip meals on purpose, in order to modify my body image.Elevatedalways/almost always1 (1%) 12 (11%)sometimes33 (29%)Total46 (41%) $p = 0.015$ (**)46 (41%)2. I restrict or modify my eating based on calories or the amount of food for fear that it will change my body image.3 (3%) 14 (13%)always/almost always3 (3%) 14 (13%)34 (30%)Total51 (46%) $p = 0.022$ (**)51 (46%)3. I am interested in seeking information related to food (), in order to modify my body image.4 (4%) 6 (5%)	Degree of influence BPM			
always/almost always1 (1%) 12 (11%)sometimes33 (29%)rarely/never46 (41%) $\overline{Dtal}$ 46 (41%) $p = 0.015$ (**)32. I restrict or modify my eating based on calories or the amount of food for fear that it will change my body image.3 (3%) 14 (13%)always/almost always3 (3%) 14 (13%)3 4 (30%) 51 (46%) $\overline{Dtal}$ $\overline{51}$ (46%) $\overline{p} = 0.022$ (**)3. I am interested in seeking information related to food (), in order to modify my body image.4 (4%) 6	Moderate	Low / Nil	Total	
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sometimes(11%)rarely/never33 (29%)Total46 (41%) $p = 0.015 (**)$ 46 (41%)2. I restrict or modify my eating based on calories or the amount of food for fear that it will change my body image.3 (3%) 14 (13%)always/almost always3 (3%) 14 (13%)34 (30%) 51 (46%)rarely/never51 (46%) $p = 0.022 (**)$ 4 (4%)3. I am interested in seeking information related to food (), in order to modify my body image.4 (4%) 6	(4%)	(4%) 4	(9%) 28	
rarely/never       33 (29%)         Total       46 (41%) $p = 0.015$ (**)       2. I restrict or modify my eating based on calories or the amount of food for fear that it will change my body image.         always/almost always       3 (3%) 14 (13%)         sometimes       34 (30%)         rarely/never       34 (30%)         Total       51 (46%) $p = 0.022$ (**)       4 (4%)         3. I am interested in seeking information related to food (), in order to modify my body image.       4 (4%)         always/almost always       4 (4%)	12 (11%)	4 (4%)	(25%)	
Total       46 (41%) $p = 0.015$ (**)       46 (41%)         2. I restrict or modify my eating based on calories or the amount of food for fear that it will change my body image.       3         always/almost always       (3%)         sometimes       (13%)         rarely/never       34 (30%)         Total       51 (46%) $p = 0.022$ (**)       4         3. I am interested in seeking information related to food (), in order to modify my body image.       4         always/almost always       4         always/almost always       4		26	(23%)	
Total       46 (41%) $p = 0.015$ (**)          2. I restrict or modify my eating based on calories or the amount of food for fear that it will change my body image.       3         always/almost always          sometimes          rarely/never          Total $p = 0.022$ (**)          3. I am interested in seeking information related to food (), in order to modify my body image.          always/almost always          4          4	15 (13%)	(23%)	(66%)	
1011       1       4 $p = 0.015$ (**)       1         2. I restrict or modify my eating based on calories or the amount of food for fear that it will change my body image.       3         always/almost always       3         sometimes       3         rarely/never       34 (30%)         Total       51 (46%) $p = 0.022$ (**)       4         3. I am interested in seeking information related to food (), in order to modify my body image.       4         always/almost always       4 $(4\%)$ 6		34	112	
2. I restrict or modify my eating based on calories or the amount of food for         fear that it will change my body image.         always/almost always         sometimes         rarely/never         Total $p = 0.022$ (**)         3. I am interested in seeking information related to food (), in order to modify my body image.         always/almost always	32 (29%)	(30%)	(100%)	
fear that it will change my body image.3 (3%) 14 (13%) 34 (30%) 51 (46%)always/almost always3 (3%) 14 (13%) 34 (30%) 				
always/almost always $(3\%)$ 14 $(13\%)$ rarely/neverTotal $34$ (30%) $51$ (46%) $p = 0.022$ (**) $51$ (46%)3. I am interested in seeking information related to food (), in order to modify my body image. $4$ (4%) 6				
always/almost always $(3\%)$ 14 $(13\%)$ 34 $(30\%)$ rarely/never $34$ $(30\%)$ $51$ $(46\%)$ Total $51$ $(46\%)$ $p = 0.022$ (**) $51$ 3. I am interested in seeking information related to food (), in order to modify my body image. $4$ $(4\%)$ $6$	6	9	18	
14 (13%)rarely/never $34 (30\%)$ Total $51 (46\%)$ $p = 0.022 (**)$ $51$ (46%)3. I am interested in seeking information related to food (), in order to modify my body image. $4$ (4%) 6	(5%)	(8%)	(16%)	
rarely/never $34 (30\%)$ Total $51 (46\%)$ $p = 0.022 (**)$ $51$ (46%)3. I am interested in seeking information related to food (), in order to modify my body image. $4$ (4%) 6	11	5	30	
rarely/never $51 (46\%)$ Total $51 (46\%)$ $p = 0.022 (**)$ $3.$ I am interested in seeking information related to food (), in order to modify my body image.         always/almost always $4 (4\%) = 6$	(10%)	(4%)	(27%)	
Total $51 (46\%)$ $p = 0.022 (**)$ $3.$ I am interested in seeking information related to food (), in order to modify my body image.         always/almost always $4$ $(4\%)$ $6$	13 (12%)	17 (15%)	64 (57%)	
p = 0.022 (**)         3. I am interested in seeking information related to food (), in order to modify my body image.         always/almost always         4         (4%)         6	30 (27%)	31 (28%)	112 (100%	
modify my body image. always/almost always 6	(_,,,,)	(_ = , , , )	(	
always/almost always (4%) 6				
	5 (4%)	8 (7%)	17 (15%)	
sometimes (5%)	6	6	18	
	(5%) 21	(5%) 15	(16%) 77	
rarely/never 41 (37%)	(19%)	(13%)	(69%)	

Bianca Puntareli/ Afr.J.Bio.Sc.	6(10)	(2024)
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Total	51 (46%)	32 (29%)	29 (26%)	112 (100%)
$p = 0.81 \ (ns)$				
4. I have an interest in seeking information related to the body.				
always/almost always	7 (6%)	10 (9%)	13 (12%)	30 (27%)
sometimes	14 (13%)	8 (7%)	8 (7%)	30 (27%)
rarely/never	28 (25%)	12 (11%)	12 (11%)	52 (46%)
Total	49 (44%)	30 (27%)	33 (29%)	112 (100%)
p = 0.097 (ns)				
5. When I go shopping at the supermarket I pay excessive attention to the labels and nutritional value of the food ()				
always/almost always	2 (2%) 6	9 (8%) 12	7 (6%) 6	18 (16%) 24
sometimes	(5%)	(11%) 21	(5%) 16	(21%) 70
rarely/never	33 (29%) 41	(19%) 42	(14%) 29	(63%) 112
Total	(37%)	(38%)	(26%)	(100%)
$p = 0.026 \;(**)$				
6. When I shower, get dressed or pass in front of a mirror, I avoid looking at myself to avoid seeing parts of my body that I don't like and/or focus excessively on them.				
always/almost always	11 (10%)	14 (13%)	13 (12%)	38 (34%)
sometimes	16 (14%)	9 (8%)	1 (1%)	26 (23%)
rarely/never	22 (20%)	9 (8%)	17 (15%)	48 (43%)
Total	49 (44%)	32 (29%)	31 (28%)	112 (100%)
p = 0.003 (**)				
7. I avoid wearing certain items of clothing due to dissatisfaction with my body image.				
always/almost always	11 (10%)	17 (15%)	17 (15%)	45 (40%)
sometimes	27 (24%)	15 (13%)	8 (7%)	50 (45%)
rarely/never	8 (7%)	4 (4%)	5 (4%)	17 (15%)
Total	46 (41%)	36 (32%)	30 (27%)	112 (100%)
p = 0.030 (**)	-			

8. When I engage in physical activity, my main motivation is to maintain or improve my physical appearance.

always/almost always	8 (7%)	18 (16%)	10 (9%)	36 (32%)
aiways/amost aiways		12	6	38
sometimes	20 (18%)	(11%)	(5%)	(34%)
rarely/never	19 (17%)	9 (8%)	10 (9%)	38 (34%)
	47 (42%)	39	26	112
Total	(	(35%)	(23%)	(100%)
p = 0.033 (**)				
9. I avoid participating in social events to avoid food intake or out of embarrassment for others to see my body.				
	1	2	3	6
always/almost always	(1%)	(2%)	(3%)	(5%)
sometimes	5 (4%)	7 (6%)	4 (4%)	16 (14%)
	36 (32%)	16	38	90
rarely/never	55 (5270)	(14%) 25	(34%) 45	(80%) 112
Total	42 (38%)	(22%)	43 (40%)	(100%)
p = 0.147 (ns)				
10. I avoid participating in family events to avoid food intake or out of embarrassment for others to see my body.				
always/almost always	3 (3%)	1 (1%)	3 (3%)	7 (6%)
aiways/ainost aiways	(3%)	5	2	9
sometimes	(2%)	(5%)	(2%)	(8%)
rarely/never	35 (32%)	15 (14%)	45 (41%)	95 (86%)
	10 (260/)	21	50	111
Total	40 (36%)	(19%)	(45%)	(100%)
$p = 0.108 \ (ns)$	[			
11. I avoid participating in hobbies that are of interest to me to avoid food intake or out of embarrassment for others to see me.				
	0	2	5	7
always/almost always	(0%)	(2%)	(4%)	(6%)
sometimes	4 (4%)	5 (4%)	4 (4%)	13 (12%)
	36 (32%)	17	39	92
rarely/never	50 (52%)	(15%)	(35%)	(82%)
Total	40 (36%)	24 (21%)	48 (43%)	112 (100%
p = 0.999 (ns)	1	. /	. ,	

Contingency tables and Fisher's exact test to determine the association between the degree of influence of the BPM and behavioral patterns of the participants. On a scale of 0 to 10, the degree of influence was categorized as: high (from 7 to 10 points), moderate (from 4 to 6 points), low or none (from 0 to 3 points).

(\*\*) Significance of the test is reported with 95% confidence interval, p<0.05.

(ns) Not significant

# ANNEXES

# Table 1A. Body-Positive Movement survey applied to movement followers.

Item I. Informed Consent and Participant Data 1.Do you agree to participate in this survey voluntarily, considering the protection and confidentiality of your personal data?	o Yes o No
If a second part of the research is eventually carried out: Do you agree to be contacted to participate?	o Yes o No
Instructions for the application of the survey:	<i>To answer this instrument, you should consider the following:</i>
	1. The survey must be answered individually.
	2. It has no time limit and will not take more than 20 minutes.
	3. There are no right or wrong answers.
	4. Some questions should be answered on a scale of 0 to 10, where zero is no influence on behavior and 10 is maximum influence on behavior.
	5. To answer, you can follow the example below: 1. I weigh myself for fear of gaining weight o Always o Almost always o Sometimes o Rarely or Never o Never
	2. Regarding question 1, how much do you consider that body-positive has influenced the decrease of the mentioned behavior? Scale from 0 to 10, where zero is no influence on the behavior and 10 is maximum influence on the behavior.
Participant's full name	
4.Contact Information	Cellular:
	Mail:
Sex	1. Female
	2. Male
	3. Other (specify)

5. Residence

#### 6. Age

### Part II: Knowledge about the Body-Positive movement

1.From 0 to 10, how much do you consider that	Scale of 0-10. Score:
you understand the body-positive movement?	0: No comprehension

0: No comprehension 1-4: Low/very low level of comprehension

5-6: Sufficient level of comprehension

Female
 Male

Commune: Region:

3. Other (specify)

7-10: High/very high level of comprehension

2.- Regarding the body-positive movement, how

did you get to know it?

o A friendship

o A relative

o Social networks

o Television

o Other media, which one?

3.- If you learned about the body-positive

movement through social networks, please indicate which of the following:

or Instagram o Tik tok

or YouTube

or Twitter

o Other, which one?

4.- I consider that the social network that most

promotes body-positive is:

or Instagram

o Tik tok

or YouTube

or Twitter

o Other, which one?

5.- Would you recommend the body-positive

movement to a friend and/or family member?

o Yes

o No

6.- With respect to question 5, please indicate why

Part III: Influence of the body-positive movement on behavioral patterns.

1. I skip meals on purpose, in order to modify my body image. o Always o Almost always o Sometimes o Rarely o Never 2. In relation to question 1, how much do you Scale of 0-10 consider that body-positive has influenced the decrease of the mentioned behavior? 3. I restrict or modify my eating based on calories or the amount of food for fear that it will change my body image. o Always o Almost always o Sometimes o Rarely o Never 4. In relation to question 3, how much do you Scale of 0-10 consider that body-positive has influenced the decrease of the mentioned behavior? 5. I am interested in seeking information related to food (food calories, fat burning, diuretics, etc.) in order to modify my body image. o Always o Almost always o Sometimes o Rarely o Never 6. In relation to question 5, how much do you Scale of 0-10 consider that body-positive has influenced the decrease of the mentioned behavior? 7. I am interested in looking for information related to the body (exercises, slimming creams, ideal measurements, etc). o Always o Almost always o Sometimes o Rarely o Never

<ul> <li>8. In relation to question 7, how much do you consider that body-positive has influenced the decrease of the mentioned behavior?</li> <li>9. When I go shopping at the supermarket I pay excessive attention to the labels and nutritional value of foods (low calorie, light, whole grain, etc.).</li> <li>o Always</li> <li>o Almost always</li> <li>o Sometimes</li> <li>o Rarely</li> </ul>	Scale of 0-10
<ul> <li>o Never</li> <li>10. In relation to question 9, how much do you consider that body-positive has influenced the decrease of the mentioned behavior?</li> <li>11. When I shower, get dressed or pass in front of a mirror, I avoid looking at myself to avoid seeing parts of my body that I don't like and/or focus excessively on them.</li> <li>o Always</li> <li>o Almost always</li> <li>o Sometimes</li> <li>o Rarely</li> <li>o Never</li> </ul>	Scale of 0-10
<ul> <li>12. In relation to question 11, how much do you consider that body-positive has influenced the decrease of the mentioned behavior?</li> <li>13. I avoid wearing certain items of clothing because of dissatisfaction with my body image.</li> <li>o Always</li> <li>o Almost always</li> <li>o Sometimes</li> <li>o Rarely</li> </ul>	Scale of 0-10
<ul> <li>o Never</li> <li>14. In relation to question 13, how much do you consider that body-positive has influenced the decrease of the mentioned behavior?</li> <li>15. When I am physically active, my main motivation is to maintain or improve my physical appearance.</li> <li>o Always</li> <li>o Almost always</li> </ul>	Scale of 0-10

o Somotimos	
o Sometimes	
o Rarely o Never	
16. In relation to question 15, how much do you consider that body-positive has influenced the decrease of the mentioned behavior?	Scale of 0-10
17. I avoid participating in social events to avoid	
food intake or out of embarrassment for others to	
see my body.	
o Always	
o Almost always	
o Sometimes	
o Rarely	
o Never	
18. In relation to question 17, how much do you consider that body-positive has influenced the decrease of the mentioned behavior?	Scale of 0-10
19. I avoid participating in family events to avoid	
food intake or out of embarrassment for others to	
see my body.	
o Always	
o Almost always	
o Sometimes	
o Rarely	
o Never	~
20. In relation to question 19, how much do you consider that body-positive has influenced the decrease of the mentioned behavior?	Scale of 0-10
21. I avoid participating in hobbies that are of	
interest to me in order to avoid food intake or out	
of embarrassment for others to see me.	
o Always	
o Almost always	
o Sometimes	
o Rarely	
o Never	
22. In relation to question 21, how much do you	Scale of 0-10
consider that body-positive has influenced the	
decrease of the mentioned behavior?	
Scale of 0 to 10 for Item 3:	Categorization
from 7 to 10 points	Elevated
from 4 to 6 points	Moderate
from 1 to 3 points	Under

0 points

# Null

**TABLE 2A. Categorization of motivations for and against the BPM recommendation.** The responses of the 113 respondents were quantified by thematic content analysis. The frequency and percentage of each category is reported in the table. The unit of analysis corresponds to each sentence with significant content.

	Category	Subcategory	Frequency	(%)
	Self-esteem			
		Self-image empowerment	2	1,7%
		Self-esteem	27	23,1%
		Improving physical insecurities	1	0,9%
	Mental health			
		Healing the relationship with the body	9	7,7%
e		Psychological well-being	12	10,3%
atio		Emotional well-being	4	3,4%
spus		Social welfare	2	1,7%
nme		Increased self-care	1	0,9%
con	Self-perception			
reasons in favor of the recommendation	_	Better self-image	4	3,4%
f th	Inclusion	-		
or o		Acceptance of body diversity	34	29,1%
fav		Decrease in fatphobia	2	1,7%
s in		Cultural change	4	3,4%
son	Beauty	C C		
rea	stereotypes			
		Modification of the concept of beauty	8	6,8%
		Decreased importance of physical appearance	4	3,4%
	Health care			
		Non-weight-focused health care	1	0,9%
	Physical health	C		,
	U	Physical health care	2	1,7%
u	Toxic positivism	•		
atio	-	Feelings of guilt for not accepting one's own		10.00/
ne recommendation		body	2	13,3%
		Loving all imperfections is unnecessary	2	13,3%
		Disregards the possibility of improving body aesthetics	2	13,3%
st tŀ	Lack of body			
gain	inclusion			
reasons against the		Lack of representation of all bodies	1	6,7%
son	<b>BPM</b> internal	1		, -

	Changes in the message delivered by the movement	1	6,7%
Disinformation			
	Lack of knowledge of BPM	2	13,3%
Lack of a comprehensive approach to the social problem	Does not consider the social context	1	6.7%
Subjectivity of the individual		-	0,170
	It is a personal decision	3	20,0%
	I would recommend another move	1	6,7%

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