

**BODY IMAGE CONCERNS IN THE 21<sup>st</sup>  
CENTURY: WHO IS MOST AT RISK AND  
WHEN DO WE INTERVENE**

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# GROUPS THAT WE KNOW ARE AT RISK

- Preschool
- Primary School
- Adolescents
- Males
- Different vulnerabilities at different times for different groups
- New groups at risk



# PRESCHOOL CHILDREN

- ❑ Establishment of healthy eating and physical activity behaviors
- ❑ Importance of messages that parents transmit to their children
- ❑ Modelling from parents as well as gendered comments play a major role on children's body image



# PRIMARY SCHOOL CHILDREN

- ❑ Children as young as seven years are aware of the ideal body for their gender
- ❑ Up to 50% of girls and one third of boys diet to lose weight
- ❑ About 50% of boys and 25% of girls engage in strategies to increase muscles
- ❑ Even at this young age, the media and also mothers have been shown to be important in predicting body image and body change strategies



# ADOLESCENTS

- ❑ Girls have higher body image dissatisfaction than boys; early maturing girls and late maturing boys are most at risk of body dissatisfaction
- ❑ Negative affect predicts eating disorders for girls, not boys
- ❑ Focus on sport is a strong predictor of food supplements and steroids for boys and girls
- ❑ Positive internal dialogue about the body is stronger for boys than girls



# ADOLESCENTS

- ❑ Negative internal dialogue for girls is focused on appearance and weight; for boys focused on muscle
- ❑ Girls frequently engaged in social comparisons with their female friends; if this occurs for boys it is focused on sport, fitness and size
- ❑ Girls are focused on appearance; boys are focused on functionality



# ADOLESCENTS

- ❑ BMI predicts weight loss among boys not girls
- ❑ Parents are still strong sociocultural agents, particularly for boys
- ❑ Body dissatisfaction predicts weight loss for all girls, but only for overweight boys
- ❑ Media messages predict weight loss for overweight girls, but not overweight boys



# ADOLESCENTS

- ❑ Media and negative affect are less important predictors of body change strategies for boys compared to girls
- ❑ Self-esteem moderates the impact of sociocultural messages for both losing weight and increasing muscles among boys
- ❑ Females are more likely to adopt extreme weight loss behaviors; no differences between males and females in the prevalence of binge eating



# MALES

- ❑ Body dissatisfaction higher among late maturing adolescent boys; however, early maturing boys are more likely to use food supplements and demonstrate exercise dependence (McCabe & Ricciardelli, 2004)
- ❑ Over time, involvement in competitive sport predicts use of food supplements, steroids and disordered eating among early maturing boys (McCabe & Ricciardelli, 2004)



# MALES

- ❑ For on-time boys, strategies to increase muscle predict steroid use and exercise dependence, which predict disordered eating (McCabe & Ricciardelli, 2004)
- ❑ For late maturing boys, strategies to increase muscles predict exercise dependence. Use of food supplements predict disordered eating (McCabe & Ricciardelli, 2004)



# MALES

- ❑ For boys who desire a thinner body, negative affect fully mediates the relationship between body dissatisfaction and bulimic behavior (Ricciardelli & McCabe, 2000)
- ❑ For boys who desire a bigger body, dietary restraint partially mediates the relationship between body dissatisfaction and bulimic behavior (Ricciardelli & McCabe, 2000)
- ❑ Dieting restraint in combination with binge eating may be a successful technique for increasing body bulk



# MALES

- ❑ Pressure to lose weight, increase weight and increase muscles is associated over time with increased use of food supplements (McCabe & Ricciardelli, 2003)
- ❑ Appears that many of the health risk behaviors occur together: exercise dependence, bulimia, food supplements (McCabe & Ricciardelli, 2006)
- ❑ Men who attend fitness centres at particularly high risk for health risk behaviors (McCabe et al., 2007)



# MALES

- ❑ Males focused on function of body rather than appearance, and so focus on athletic achievement leads to excessive exercise and muscle dysmorphia (Ricciardelli et al., 2006; Strother et al, 2010)
- ❑ Similar pathways to muscle dysmorphia and AN, in terms of weight concerns and sociocultural pressures (Murray et al., 2012)



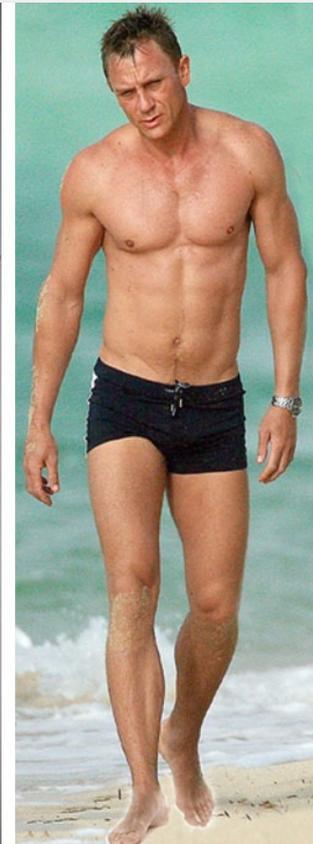
# MALES

- ❑ Boys who use food supplements or steroids to build muscles demonstrated higher levels of pressure from parents, peers and media; also higher levels of social comparison (Smolak et al., 2005)
- ❑ Fathers play an important role in the development of ED in adolescent boys (Vincent & McCabe, 2000)
- ❑ Boys and men with AN from single parent homes (absent fathers) (Wooldridge & Lytle, 2012)



# MALES

- ❑ Appears that problem behaviors occur later for males than females (e.g., Gueguen et al., 2012)
- ❑ Most likely to occur among males who are premorbidly overweight
- ❑ Greater tolerance of a larger body size among males compared to females (White et al., 2011)



# MALES

- ❑ Larger bodies are more accepted among middle-aged men (McCabe & McGreevy, 2011)
- ❑ Body image importance and messages from peers very important for middle-aged men (McCabe & McGreevy, 2010)



# MALES

- ❑ EDs and other problem behaviors are a major concern for males
- ❑ The prevalence of these behaviors is likely to be underreported due to assessment problems
- ❑ Males need to be given permission to be vulnerable (not part of masculine script); this will increase detection rates as well as provide an opportunity for treatment



# CULTURAL DIFFERENCES

- ❑ Males more satisfied across cultures than females (except Greece where males are more focussed on their bodies)
- ❑ Sociocultural pressures may be higher on Greek males than females
- ❑ Greek and Malaysian males are more likely than females to think that females should be slim; in China, females were more likely to hold this view



# CULTURAL DIFFERENCES

- ❑ Higher levels of body satisfaction in Chile, Fiji and Tongans in NZ: countries where large body size is associated with high status
- ❑ Those females who most strongly adhere to a thin ideal for females demonstrate the highest levels of body dissatisfaction



# OLDER PEOPLE

- ❑ Sociocultural pressure and stereotypes exist regarding the acceptability of aging bodies
- ❑ Findings are mixed: some studies indicate an increase in body dissatisfaction with age, other research shows the inverse or no change
- ❑ Older adults may reconceptualise the role of appearance and place greater emphasis on identity, health and social status (Jankowski et al., 2016)



# HOMOSEXUAL MALES AND FEMALES

## ☐ Homosexual males:

- Particularly vulnerable to body dissatisfaction
- Homosexual subculture places greater emphasis on appearance and the muscular body ideal (Ricciardelli & McCabe, 2004)

## ☐ Homosexual females:

- Findings are mixed. Some studies indicate less concern with body shape and weight than heterosexual women
- Other studies indicate greater likelihood of engaging in unhealthy weight control behaviours (Laska et al., 2015)



# TRANSGENDER PEOPLE

- ❑ Transgender people particularly vulnerable to body dissatisfaction
- ❑ Dissatisfaction caused by incongruence between biological sex and gender identity
- ❑ Susceptible to beauty ideals. Yet, achieving ideal of thinness for trans-women and muscularity for trans-men, may be very unrealistic (Jones et al., 2016)
- ❑ Lack of research in this area



# QUESTIONS TO CONSIDER

- ❑ What are the variables that make a difference for males and females, at different ages and what types of mediating/moderating relationships occur?
- ❑ When do we intervene? High levels of body dissatisfaction? Dieting? Excessive exercise? Or do we wait until problem behaviors occur?
- ❑ Who is most at risk for which problem behaviors? Does it relate to weight? Psychological adjustment? Pubertal timing/age?



# QUESTIONS TO CONSIDER

- What role does culture play? Are there protective factors we can learn from different cultural groups?
- How do peer influences interact with other sociocultural influences (ie., parents, media)?

