



Government
Equalities Office

Body image: evidence, policy, action

Report of a multidisciplinary academic seminar

September 2013

Foreword

In September 2013 I hosted a fascinating academic seminar on body image. My co-chair was Dr Phillippa Diedrichs from the University of the West of England, and the participants were distinguished academics from psychology, public health, culture and business. They came from across the UK but also from as far afield as the US, Canada and Australia.

We came together to discuss the current state of evidence on body image – what we know, what we don't know, and where knowledge is contested or controversial. Since the Government started its work programme on body image in 2011, I have been struck by the immense public interest in this issue – particularly from parents and young people. But I want to be sure that we have a sound evidence base for our work, and that our efforts are informed and underpinned by the best and most up-to-date research available.

I was deeply impressed by the expertise, knowledge and generosity of all the participants, and my sincere thanks go to them for their contributions. Of particular note was their absolute conviction that the social, physiological, psychological and economic consequences of low body image are serious enough to justify government action.

The papers presented at the seminar can be read online at <http://bit.ly/18Eld64>.

This document summarises what we have learned from the evidence presented and discussed on the day, and I hope you will find it as interesting, informative and thought-provoking as I did.



A handwritten signature in blue ink that reads "Jo Swinson".

Jo Swinson MP
Minister for Women and Equalities

1. What is body image and how does it work?

We use the term body confidence to describe how positive and comfortable a person feels about their body, their integrated sense of body and self, and the extent to which their personal value is tied up with their physical appearance. Someone with poor body confidence is likely to be dissatisfied with the way they look, overestimate the importance of matching current cultural beauty ideals, and spend excessive time and energy being self-conscious and invested in their appearance.

Body image is not just something that goes on inside someone's head. Neither is it a simple message that is beamed from our TV screens into the minds of the nation's youth. It is best understood as a continuing conversation between the individual, their family and friends, and the wider society around them¹. The strength of someone's body confidence is influenced by biological facts, individual psychology, and social/environmental pressures².

The main biological factor is living with a body shape that is not valued or approved of. This is closely associated with BMI, although high BMI in itself is not always a factor. Individual psychological factors include overall mental resilience, predisposition to depression, perfectionism and internalisation of cultural ideals of physical appearance which are difficult, if not impossible, for most of us to achieve. Social environmental pressures include pressure from the media, friends and family to change one's appearance, and the overwhelming volume of images of idealised (young, white, thin) bodies in the media³. Add to this the strong social messages that people can and should exert rational control over their weight, and that keeping control of your body is a mark of someone's personality and value, and you have a perfect storm of factors almost designed to create body shame⁴.

Both men and women are affected, but women and girls are particularly prone to poor body confidence and "self-objectification", a state of constant watching themselves as if from a third person perspective⁵.

One in five primary school age girls say they have been on a diet⁶

One in three adolescent boys has been on a diet to change their body shape or lose weight⁷

87% of girls aged 11-21 think that women are judged more on their appearance than on their ability⁸

Over half of adults feel ashamed of the way they look⁹

Psychological Factors:

- 📌 Low Self-esteem
- 📌 Depression
- 📌 Perfectionism
- 📌 Seeking approval from others
- 📌 Comparing your body with others
- 📌 Internalising body ideals
- 📌 Objectifying your body

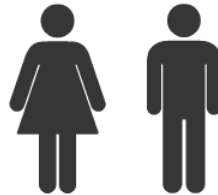
Social and Cultural Factors:

- 📌 Ideal images of beauty
 - 📌 Importance of meeting beauty ideals
- These come from:
- Media
 - Peers
 - Parents
 - Professionals

Biological Factors:

- 📌 Genetic:
 - Your natural body shape and size
 - The rate your body develops
 - Having a distorted perception of your body
- 📌 Changes at puberty:
 - Differences between genders
 - Rate of body development

Body Dissatisfaction



2. A problem for public health

Obesity is a significant problem in the UK; so too is the rate of eating disorders. They tend to be thought of and tackled separately – indeed, many people think that as poor body image is associated with efforts to lose weight, shaming people for their weight probably helps them to lose it. But the opposite is true. There is a strong relationship between poor body image, disordered eating and weight problems.¹⁰ People with low levels of body satisfaction are **more** likely to gain weight over time (regardless of starting BMI); whereas those who have higher levels of body satisfaction are less likely to put on weight.¹¹

Why is this? We know that adolescents who are dissatisfied with their bodies are less likely to be physically active, less likely to eat fruit and vegetables, and more likely to use unhealthy weight control behaviours (like laxatives and vomiting).¹² We know that body image is strongly linked with depression and low self-esteem, and that being bullied for being overweight is very common and can really affect people's emotional functioning.¹³ It may be that people who do not feel good about their bodies are less likely to look after them. It is important to help them care about themselves and value themselves enough that they can then start taking care of their bodies through living healthily.

Public health campaigns that tackle obesity are perceived as most positive and motivating when they focus on health behaviour change rather than body size, like Public Health England's Change4Life campaign.¹⁴

Obesity is estimated to cost the UK £16bn per year, with the cost to the NHS alone around £5.1bn¹⁵

Around four and a half thousand teenage girls develop a new eating disorder in the UK every year¹⁶

Almost one quarter of girls aged 7-21 do not participate in exercise because they are unhappy with their body image¹⁷

The cost of eating disorders in England alone is £1.26bn per year¹⁸

3. Risky behaviours

People with poor body image are more likely to lack self-esteem, making them vulnerable to peer and partner pressure. They are also more likely to be depressed and may turn to risky coping strategies and self-soothing behaviours.¹⁹ These can include:

- *Not taking care of themselves during sex*²⁰
- *Vomiting or purging*²²
- *Alcohol and drug abuse*²⁴
- *Crash dieting*²¹
- *Smoking to control appetite*²³
- *Self-harm*²⁵

We think rushed or ill-considered aesthetic cosmetic surgery is also a risky behaviour, and rising numbers of women and men are having surgery and invasive procedures in order to improve their appearance. All surgery carries risks, and the numbers of women seeking invasive cosmetic treatments from unqualified practitioners, or cut-price cosmetic surgery holidays to other countries, was worrying enough for the government to set up the Keogh Review, published in April 2013.³⁰ Parts of this industry are endlessly inventive in creating new procedures and marketing them to new potential customers – for example, labiaplasty is a procedure that was almost unheard of a decade ago, and is becoming increasingly popular.

The number of cosmetic procedures performed in the UK has quadrupled over the last decade²⁶

The UK cosmetic surgery market now has an estimated value of £2.3bn²⁷

The most popular cosmetic procedure is breast augmentation²⁸

The number of labiaplasties has risen fivefold in the NHS over the past 10 years, with over 2000 operations performed in 2010²⁹

4. What is lost: the opportunity cost to the economy

Women may be multi-taskers but their chronic self-watching comes at a price. It results in more body shame and less energy and attention for other things, including mental performance, confidence and aspiration.

Research has demonstrated that heightened self-objectification leads to women speaking less,³² getting less involved with social activism,³³ even doing worse at maths.³⁴

The girls who are keeping their hands down in class today will be the women not daring to ask for a pay rise tomorrow. The girls who bunk off sports because they don't want to be seen in kit will be the women who are putting their health at risk by doing almost no exercise at all. And the girls who are being told their value is tied up in their physical appearance are the girls who won't feel that anything else they could achieve is worth bothering with.

By equalising the labour force participation rates of men and women, the UK could further increase GDP per capita growth by 0.5 percentage points per year, with potential gains of 10% of GDP by 2030.³⁵ We cannot afford to ignore the part played by poor body image in blocking women's contribution for the UK to optimise its economic potential.

16% of 15 - 17 year olds have avoided going to school because they felt bad about their appearance³⁶

One fifth of 15-17 year olds have avoided giving an opinion in public because they felt bad about their appearance³⁷

Almost a quarter of girls aged 7 – 21 do not participate in exercise because they are unhappy with their body image³⁸

A quarter of girls say that unhappiness about their appearance has stopped them from putting their hand up in class³⁹

4. What is lost: the opportunity cost to the economy

Equally, industry – most obviously the media, fashion, retail and advertising sectors – need to understand how today's and tomorrow's consumers respond to body shaming images. Girls and women are sceptical of the thin ideal, digital manipulation, tokenistic diversity and stereotypical messages about age, race and gender. They trust advertising that depicts healthy body shapes, realistic signs of age and size and positive representation of diversity. Increased trust leads to positive brand outcomes⁴⁰.

People who see themselves reflected in fashion advertising are more likely to feel positive about the brand – this is particularly true of racial minority men and women (though racial minority models do not put off racial majority consumers). Women who are plus sized get particularly frustrated by the poor choice of fashion available to them, and also by bad fitting and size variation. Young plus sized women are embarrassed by retail environments that are organised to separate them from other women, and older plus sized women are often forced to spend their money in what they see as frumpy retail environments. This lowers their body confidence and their brand loyalty. Fashion bloggers are becoming increasingly influential, including plus sized bloggers who are being involved in product development and marketing activities to allow retailers to benefit from their expertise and influence.⁴¹

Women increase their purchase intentions by 200% when models in advertisements are their size⁴²

Women increase their purchase intentions by over 175% when they see models who reflect their age⁴³

Women over size 10 increase their purchase intentions by 300% when they see curvier models⁴⁴

Black women are 1.5 times more likely to purchase a product advertised by a black model⁴⁵

Around four and a half thousand teenage girls develop an eating disorder in the UK every year



The consequences of low Body Image



1 in 6 GCSE age students has avoided going to school because they felt bad about their appearance



Health problems such as:

- 🔊 Eating disorders
- 🔊 Depression
- 🔊 Low self-esteem
- 🔊 Reduced physical activity
- 🔊 Weight gain

The number of cosmetic procedures performed in the UK has quadrupled over the last decade



Engaging in risky behaviour such as:

- 🔊 Unsafe sex
- 🔊 Self-harm
- 🔊 Substance abuse
- 🔊 Steroid use
- 🔊 Cosmetic surgery

Impact on aspirations

- 🔊 Reduced social participation
- 🔊 Decreased academic performance
- 🔊 Reduced participation at school

Afterword: shared problem, shared solution

Too often, public policy and academia progress their work on twin tracks, acknowledging the other but rarely pausing to exchange expertise and perspectives. This seminar was a valuable exercise in doing that, and the generously contributed knowledge and understanding of the participants is already being used to guide and inform government action in this area. There was overwhelming agreement that we should do this more often. Many suggestions were made for ways forward, including:

- Government should fully realise and embrace its potential to act as a thought leader in this area
- Health promotion efforts should aim to minimise the potential for weight-related bias, discrimination and shaming
- Initiatives that address obesity should explicitly tackle body image
- Schools-based health curricula should include evidence-based content aimed at promoting a positive body image to prevent both eating disorders and obesity
- Efforts to help young people improve their body image need to affirm that this problem is not just in their heads, but a wider social issue – and give them tools to help them 'reframe' or prepare for difficult social interactions
- More research is needed on how older women and men of all ages are affected by body image and by representations of them in media
- Policy should foster business educational initiatives and business-creative entrepreneurial collaborations that promote body confidence
- Research is needed to further illuminate the business case for promoting positive body image
- Public policy should encourage young entrepreneurs to develop organisations with missions, core offerings and market messages that champion body confidence

Some government actions since the seminar:

- Ministerial roundtable with high street retailers on body image
- Supported Advertising Association research on advertising representation and diversity
- Ministerial roundtable with experts on body image and risky behaviour
- Hosted Dr Sarah Riley within the Government Equalities Office for a knowledge exchange on body image, funded by the Welsh Government
- Established a working group with leading midwives, health visitors, health psychologists and Dr Susie Orbach to promote awareness of the impacts of body image on maternal and infant wellbeing
- Commissioned literature review on body image and girls aspirations
- Supported the launch of Debenhams Size 16 mannequins
- Worked with the Department of Health to ensure work programmes on obesity, eating disorders and body image are mutually supportive
- Contained our work to ensure body image issues are adequately addressed following the Keogh Review into cosmetic interventions

Participants

Chairs:

Jo Swinson, Minister for Women and Equalities
Dr Philippa Diedrichs, Centre for Appearance Research,
University of the West of England

Participants:

- Professor Feona Attwood, Media Department, Middlesex University
- Dr Ben Barry, School of Fashion, Ryerson University Toronto
- Dr Rachel Calogero, School of Psychology, University of Kent
- Professor Helga Dittmar, School of Psychology, University of Sussex
- Dr Emma Halliwell, Centre for Appearance Research, University of the West of England
- Professor Dianne Neumark-Sztaine, School of Public Health, University of Minnesota
- Susie Orbach, psychotherapist, psychoanalyst, London
- Professor Susan Paxton, Department of Psychology, La Trobe University, Australia
- Dr Sarah Riley, Department of Psychology, University of Aberystwyth
- Dr Ulrike Schmidt, Institute of Psychiatry, King's College London
- Dr Helen Sharpe, Institute of Psychiatry, King's College London
- Professor Janet Treasure, Institute of Psychiatry, King's College London

Observers:

- Matt Buttery, Chief Executive, Triple P
- Chris Muwanguzi, Family Matters Institute

Officials:

- Rachel Clark, Director
- Helene Reardon-Bond, Deputy Director, Gender Policy
- Tara Kaufmann, Head of Women's Engagement
- Thea Willis, Senior Policy Adviser on Body Image
- Rachel Richards, Policy Officer on Women and Sport
- Professor Shamit Saggar, ESRC Knowledge Exchange Fellow

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