

## "BEYOND THE MIRROR: A SYSTEMATIC REVIEW OF THE MENTAL AND PHYSICAL TOLL OF BODY SHAMING"

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### **Abstract:**

This systematic review explores the effects of body shaming on mental health, emphasizing the role of emotional intelligence as a moderating factor. Through a comprehensive keyword search of PubMed and Google Scholar, studies published between 2010 and 2020 were examined. The findings reveal significant associations between body-related shame and depressive symptoms, highlighting the protective effects of self-compassion and social support. Adolescents and women are particularly susceptible, with body shaming linked to low self-esteem, anxiety, depression, and body dysmorphia. The review underscores the necessity for further research on perfectionism and the impact of social media, advocating for interventions that foster self-love and body positivity to improve psychological well-being.

**Keywords:** Body shaming, Wellness, Stigma, Depression, Adolescents.

### **I. Introduction**

In 2016, there were about 2 billion people and over 300 million children and adolescents who were overweight or obese, and the numbers are still rising. Adult obesity is defined by the WHO as a BMI of less than 30 kg/m<sup>2</sup>, whereas overweight is defined as a BMI of 25 to 30 kg/m<sup>2</sup>. Despite the widespread belief that stigma and discrimination pose a danger to the fundamental values of inclusion and equality in Western nations, weight stigma is frequently tolerated and reinforced. Weight stigma, often referred to as weightism, weight prejudice, or weight-based discrimination, is the

term used to describe how someone's weight dehumanizes them in society due to negative perceptions or notions about it. On the other hand, stigma and discrimination based on weight are unproven and do not help to promote weight loss programmes. Instead, the stigma associated with weight is connected to weight gain and other detrimental impacts on one's mental and physical health. For instance, a recent meta-analysis found that the relative risk of depression was 40% greater among teenagers who were clinically classified as fat. One of the primary hypotheses holds that children and teenagers who are overweight are subjected to social stigmatization, which exposes them to many forms of abuse and discrimination related to their weight (such rejection and teasing). These can appear as early as preschool. Social rejection and physical isolation in various ways can exacerbate feelings of worthlessness and psychological anguish, which can lead to increasing depression or social anxiety.<sup>1</sup>

Since social media is so extensively accessible to people of all ages in the twenty-first century, there is a significant emphasis on the idealized body, skin tone, and type. Body shaming is a major problem in our society and can be linked to a lot of beauty blogs and websites, which can be detrimental to mental health. Bullying that center on an individual's physical characteristics is referred to as "body shaming." Physical qualities include things like size, weight, form, hairdo, choice of clothes, cosmetics, and appearance.<sup>2</sup> Making negative comments regarding the appearance of someone else's body or criticizing your own appearance. A study conducted on adolescents revealed that those who experience body shame exhibit indications of sadness in addition to self-critical behaviour. Additionally, this tendency may lead to binge eating, which acts as a social comfort for the individual. In many countries, childhood and teenage obesity has become a public health concern because to its correlation with significant morbidities such as diabetes, coronary heart disease, and several cancers in later life. However, there are more immediate effects of adolescent obesity on mental health outcomes, such depression.<sup>3</sup>

Most individuals have moments of feeling sad, but when someone is depressed, those moments last longer than a few days. In addition, depressed individuals may have trouble focusing, feel a great deal of guilt and insignificance, and even harbor persistent thoughts of harming themselves. Younger people are more prone to developing depression when they have had unfavorable experiences, such as traumatic life events

and early adversity, along with depressed parents and unsupportive family members. Depression's causative structure is complex and multifaceted.<sup>4</sup> The research has found a wide range of threat and mitigating elements. In addition to gender and genetics, significant contributing variables to depression were inadequate parental warmth, severe maternal hostility, and developing adolescent-parent conflicts. According to Singh et al., teenagers' symptoms of depression may deepen if they feel rejected by their parents, teachers, or other close friends. While there is no doubt that women are more susceptible to and prone to depression due to biological causes, the social expectations of masculinity may be the only factor contributing to the huge disparity in the depression between men and women.

This systematic review examines many dimensions, such as systematic discrimination manifestations, gender-specific implications, developmental impact across age groups, individual coping strategies, the role of social support networks, and the importance of self-esteem in reducing the negative effects of weight stigma on overall well-being, in order to provide a comprehensive analysis of the multifaceted influences on weight stigma and its implications for health outcomes.

**Stigma** - The complex phenomenon of stigma encompasses both individual (microsocial) and institutional (macrosocial) forms of prejudice. The stigma constructs include public and self-stigma on the microsocial level of discrimination and structural stigma on the macrosocial level. Public stigma includes things like genuine weight discrimination and perceived stigma associated with weight. It is the most blatant and well-known kind of bias. Public stigma is defined as individual discrimination based on stereotypes and weight stigma, either explicit or implicit. In practically every important area of life, there is overt or covert discrimination and stigma related to weight. Six The media is mostly to blame for the majority of macrosocial incidents of stigma. Overweight people and characters are frequently stigmatized in a wide range of media, including children's media, newspapers, television series, and books.<sup>5</sup> Weight stigma is ubiquitous, even in health programmes dedicated to obesity. Moreover, there is weight stigma on social media (such as "fat shaming") as well as communities who promote it (like the "fat acceptance" movement). Being stigmatized for one's weight is a distressing experience that persists over time and in significant spheres of life. As a

result, stigma associated with weight is a major social predictor of health and a persistent source of stress for many people. Even though stigma is a distinct factor in poor health outcomes, preventative and intervention efforts for people who are overweight or obese seldom address stigma.<sup>6</sup>

**Gender** - According to recent studies, weight stigma increases the likelihood of a number of emotional and psychological issues for both boys and men as well as girls and women. Gender-related empirical results, however, are contradictory. While some research contend that males are just as susceptible to and frequently the targets of weight stigma as women, other studies document a greater number of instances of weight stigma among women than among men, particularly in heterosexual relationships, the workplace, and educational institutions. One contributing element may be the prevailing ideal of physical attractiveness, which elevates slenderness as a necessary component of feminine beauty.<sup>7</sup>

**Age** - The stigma associated with weight is very harmful to kids and teenagers. Adolescence is characterized by pressure to conform to appearance norms regarding body shape and size, as well as heightened awareness of one's physical appearance. Furthermore, children and adolescents' development of a stable body image, self-esteem, and self-identity—all crucial for wellbeing—can be significantly impacted by weight stigma. As people mature, they become more emotionally stable, psychologically resilient, and accepting of a wider variety of physical types. As one ages, one's tolerance for being overweight rises.<sup>8</sup>

**Coping strategy** - Reducing the harmful impact of weight stigma on one's health may be facilitated by coping strategies. There is now a dearth of evidence and synthesis on weight stigma in coping research. The Coping Response Inventory distinguishes between maladaptive coping tactics (such negative self-talk, weeping, and isolating oneself) and adaptive coping techniques (like positive self-talk, self-love, and self-acceptance) in order to address weight stigma. While adaptive coping strategies are associated with greater mental health and well-being, maladaptive coping strategies are associated with worse mental health and lower well-being. Crucially, it is yet unclear if

various adaptive coping strategies influence the relationship between weight stigma and mental health in different ways.<sup>9</sup>

**Social Assistance** - Additionally, social assistance may lower the detrimental effects of stigma associated with weight on one's health. The stress-buffering theory states that social support protects mental health from the damaging effects of stress. There are several functional features of social support that might act as a stress reliever. Comfort, sympathy, or other forms of empathy are referred to as emotional support. Assistance with resources is known as instrumental support, whereas decision-making support is represented by appraisal. Informational help might take the shape of guidance or facts.<sup>10</sup>

**Self - Esteem** - The mindset that believes one is capable of handling life's little setbacks and deserving of happiness is known as self-esteem." (Branden) This Nathaniel Branden quote defines self-esteem as an individual's evaluation of their overall value and ability to overcome challenges in life.<sup>11</sup> It is believing that one is capable and worthy of enjoyment. Self-esteem has several facets, including feelings, behaviours, and attitudes towards oneself and other people. Positivity is just one of these facets. In contrast, a person with low self-esteem may struggle with insecurities and self-doubt. A person with high self-esteem is more likely to feel competent and successful in many areas of life.<sup>12</sup>

## II. REVIEW OF LITERATURE

The article by Kamila Czepczor-Bernat et al (2022), evaluates the connection between bad feelings and body image, as well as the impact on life satisfaction. People experience humiliation and hopelessness when they confront society norms and find their bodies do not fit. Depression will result from this, and avoidance behaviour will follow. The author of this essay came to the conclusion that fat people needed treatment in order to enhance their quality of life and inspire them to control their negative emotions and body dissatisfaction.<sup>13</sup>

M.Manjunatha et al (2020), The media is a significant aspect of society, as the article discusses. In today's advertising, the model's physical qualities and beauty are

emphasised more than the product itself. This set ideal body standards for men and women alike. It promotes prejudice and raises the risk of eating problems. This discovery forms the basis of our investigation as we try to determine the degree and context of these advertisements' effect.<sup>14</sup>

Milla Evelianti et al (2020), The adolescent's therapy for body shaming served as the basis for this investigation. The results showed that most of the teenagers received therapy that was moderately designed to shame their bodies. The outcomes of several research projects have indicated that body shaming can be harmful to the victims. According to the poll, high school students in the Depok region who experienced moderate body shaming reported having positive body views, but those who encountered severe body shaming had adverse effects.<sup>15</sup>

Qingqing Sun et al's (2018) article's purpose was to look at the connections between consumerism and body dissatisfaction.<sup>16</sup> The findings showed that by increasing body shame and monitoring, higher materialism indirectly predicted higher levels of body dissatisfaction. This research contributes to the literature on body image by finding a link between the variables, materialism and body dissatisfaction. Our research showed that two important aspects that help to explain the connections between materialism and body are greater body surveillance and body shame.<sup>16</sup>

Khushi Mukherjee et al (2022), In the essay, it is discussed how body shaming occurs often among teenagers and the stress it causes, which in turn raises the suicide rate. It was observed that the total percentage of each concern is greater than in the global reports. The suicide rate will keep rising if the problems are not resolved swiftly.<sup>17</sup>

Constanze Schlüter et al's (2021), article looked at the categorization system for body shaming, its scientific definition, and its effects on mental health.<sup>18</sup> Brewis & Bruening (2018) undertook a longitudinal study to investigate if body shame's negative impacts on depression levels in first-year university students may be mitigated or reduced by being open to friendship from the start of the semester to the conclusion. 1143 pupils were chosen to represent the sample. However, the data was analysed using

regression and descriptive analysis. The study's findings indicate that students with larger bodies are more likely to feel depressed and ashamed of their bodies.<sup>19</sup>

Tiggemann and Kuirng (2004) examined how well the objectification theory applied to men and how to extend its testing into the realm of depression. The study used a self-report questionnaire with a sample size of 223 people (115 women and 115 males). It assessed body shame, depressed mood, disordered eating, and flow in addition to the indicated mediating elements of appearance anxiety, body shame, flow, and awareness of inner emotions.<sup>20</sup> It was shown that eating disorders and depressed mood were also associated with self-objectification and the corresponding practice of routine self-monitoring in women. Path analysis significantly aided a theoretical approach to meditational linkages. For men, the pattern of interactions was essentially the same; the main differences were in the role of self-objectification.<sup>21</sup>

Czepczor-Bernat et al., (2021) conducted a cross-sectional study on a sample of 130 individuals during COVID-19 with the aim of assessing the relationship between body satisfaction and negative emotions or depression linked to one's body image, which are mediated by one's status of life connected to one's body image.<sup>22</sup> Greater amounts of body dissatisfaction are associated with obese individuals' poor body-image-related satisfaction with life elements connected to body image. The only individuals with a medium quality of life who are obese and have higher degrees of body dissatisfaction are those who have more severe negative thoughts about their bodies.<sup>23</sup>

Sick et al., (2020) assessed self-comparison as a potential moderating factor to use a sample of 520 people to look at the link between body-related shame and depressive symptoms in men and women separately. A strong correlation between body-related guilt and the research feelings and worse depressive symptoms, thus it's critical to identify and understand any pertinent factors that may lessen this link. The results show a positive and significant correlation between body-related shame and sad symptoms.<sup>24</sup>



In their study, Carter et al. (2022) examined the connection between internalized criticism and mental health in a sample of 1695 individuals with varying body weights.<sup>25</sup> The study's findings demonstrated that people in bigger weight categories pay closer attention to their critical inner voice that is associated with self-hatred, which is a strong predictor of feelings of depression and anxiety. Furthermore, demonstrate how perceived body weight influences body shame in addition to actual body weight.

Andrew et al., (2002) Attempt to determine whether the results of earlier research employing interviews—like Andrews (1995)—that suggested a possible connection between psychopathology and shame could be verified with questionnaires. A comprehensive questionnaire survey comprising 163 college students was conducted. The relationship between shame and depressive symptoms was investigated using the Experience of Shame Scale, a questionnaire based on previous testing and known shame scales. At time 1, each measure made a significant, independent contribution to the symptoms of depression.<sup>26</sup>

Kim et al., (2011) designed to evaluate the relative contributions of guilt and shame to symptoms of sadness. This study provided a statistical summary of the extent to which depression symptoms and feelings of guilt and shame are related. 242 effect sizes were obtained from 108 trials with 22,411 people in total. Shame was significantly more correlated with a sad sign than guilt was. The connection between two maladaptive forms of guilt and the complaint of sadness and shame was statistically comparable.<sup>27</sup>

Sjöberg et al., (2005) investigated if there was a link between depression and teenage obesity in a nonclinical population and looked at potential causes that included interpersonal dynamics, financial situations, and guilt sentiments. Researchers first adjusted for variables including sex, guilt, parent employment, divorce, and economy before examining the associations between a person's self-reported BMI and depression.<sup>28</sup> 4703 teenagers in Vestmanland, Sweden, are surveyed to get information on their adolescent life. According to the study's findings, obesity was significantly linked to sadness, depressive symptoms, and guilt among young individuals between the ages of 15 and 17.<sup>29</sup>



In 2020, Wang and colleagues searched for proof of the moderating influence of self-compassion, the mediated impact of peer appearance pressure, and the extent to which body dissatisfaction on social media platforms was positively correlated. A total of 413 pupils answered the survey, which questioned on body dissatisfaction, self-care, body discourse, demographics, and the amount of time spent on social media. Nine pupils said no to answering the survey.<sup>30</sup>

### III. ADOLESCENTS AND BODY SHAMING

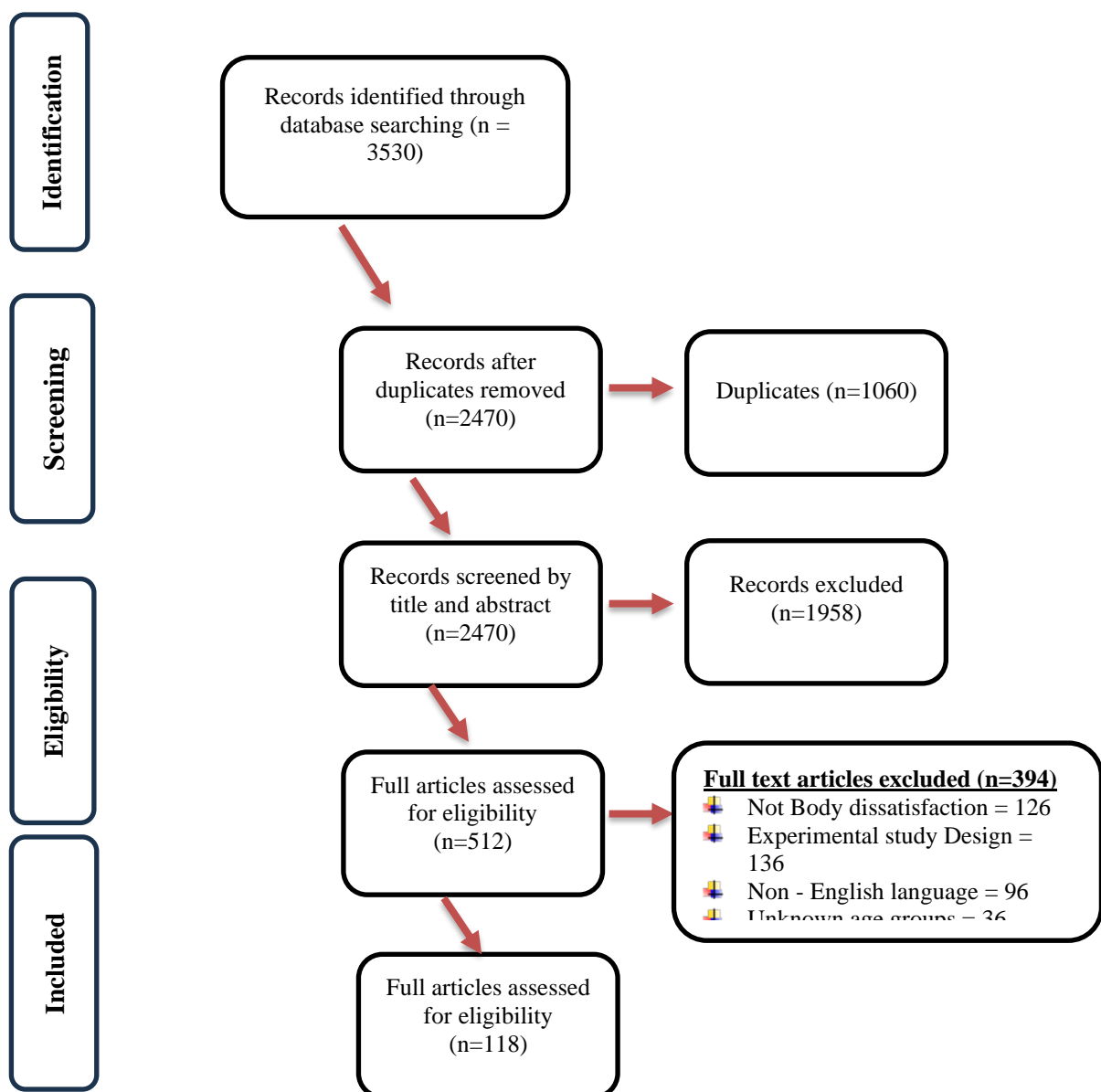
Body shaming is the act of disregarding someone's physical attractiveness. Either your body or someone else's might be the subject. A person's size, age, hair, clothing, diet, and level of perceived beauty are all possible discussion points. In addition to causing a person to despise their looks in general, body shaming can result in eating disorders, anxiety, depression, low self-esteem, and body dysmorphia. Adolescents who experience body shame are much more likely to experience depression. The outcome might result in

- 1) Body dissatisfaction brought on by physique shaming might result in low self-esteem.
  - 2) It influences the results of obese women who attempt to stop binge eating.
- Three mental health conditions are associated with body-shaming: sadness, anxiety, and body dysmorphic disorder.
- 4) A low standard of living as a result of body dissatisfaction.
  5. Discomfort on a psychological level.
  - 6) Increased risk of suicide or self-harm

### IV Methodology

The capacity of a systematic literature review to fill in knowledge gaps and offer fresh perspectives on previously published, peer-reviewed research made it the preferred method for this kind of analysis. A keyword search was used to explore databases for research that had been published between 2010 and 2020. We looked through the following databases: Pubmed and Google Scholar. Perfectionism, body shaming, teenagers, public shaming, mental health, and emotional intelligence were

among the search terms used. The sample populations used in most investigations comprised adults, college students, and teenagers. The Preferred Reporting Items for Systematic Reviews and Meta-Analyses for Protocols Checklist (PRISMA-P) is a frequently utilized analytical tool in systematic reviews. Since PRISMA is widely recognized as a potent tool for guaranteeing methodological quality, it was used in this inquiry to determine which studies to include.<sup>31</sup> Subsequently, a thematic analysis was conducted on the collected papers to determine their significance in addressing the research issues of the study.



## PRISMA FLOWCAHRT

SPIDER Criteria	Inclusions	Exclusions	Justifications
Sample	In a population that is otherwise healthy, the statistics are presented individually.	Every other group of people	Affected population is the main focus of the study topic and purpose.
Phenomenon of Interest	Body Shaming and its components	No Body Shaming	The research aim or research question focuses on body shaming.
Design	Evaluation of the relationship or correlation between the variables	Intervention in conjunction with any evaluation	Because interventional trials alter men's responses, there may be a greater chance of reporting bias.
Evaluation	Self-reported on Anxiety and/or Depression	No self-reported Anxiety and Depression	Anxiety and depression are the main subjects of the research question.
Research Type	Quantitative, including mixed-methods research type	Qualitative type	Determining the presence and strength of the quantifiable relationship between the variables was the main goal.

## V Results

For this review, the previously outlined search approach produced (n = 118) peer-reviewed research publications. A thematic analysis was carried out and is provided below, in place of a description of each individual paper listed in the review.

Studies on perfectionism constantly demonstrate the intricate interactions between a person's genetic predispositions and environment. Additionally, it aligns with the theoretical foundation of the study, which is Albert Bandura's social cognitive theory (SCT). Social learning theory (SLT), which addresses the detrimental effects of bad modelling and the potential for children to mimic their parents' behaviour, is the foundation for social cognitive theory.<sup>32</sup> The fundamental idea of SCT is that one's actions, surroundings, and identity are all interconnected and have an effect on each other. Human experience involves knowledge and education, which molds conduct in certain contexts and situations. SLT serves as the cornerstone of SCT, which prioritizes learning above all else while placing a strong emphasis on self-efficacy. It is most frequently used to comprehend how people deal with and overcome problems relating to their health.<sup>33</sup>

Three categories of perfectionism are identified by Hewitt and Flett's (1991) multi-dimensional theory of perfectionism: self-oriented, other-oriented, and socially prescribed thought patterns. Each of these components is examined separately in the literature as well as as interdependent processes. Perfectionism that is self-oriented refers to a person's tendency to create and adhere to high standards for themselves. Holding others to unreasonable standards psychologically is known as other-oriented perfectionism.<sup>34</sup> Perfectionism that is socially mandated is the conviction that standards set by society and cultural influences are unreasonable and cannot be constantly fulfilled. This review found that the majority of peer-reviewed research on perfectionism largely accepts the usefulness of this paradigm.<sup>35</sup>

The media is a tool that the society uses for a number of objectives. Men and women alike place more emphasis on their appearance. Advertisements tend to focus

more on the model's physical qualities and attractiveness than the actual product. This is concerning because not everyone is born with beautiful complexion, a trim build, or healthy hair.<sup>36</sup> The fact that these ads present idealized images of male and female bodies is one of its negative aspects. It encourages eating disorders and racism. In a recent Chennai-based survey, 42% of women reported feeling under pressure to appear "beautiful," and 76% said they would prefer a smaller body size than their present one. Young girls are big fans of Barbie dolls. Teenage females who have been exposed to dolls may have low body esteem and a strong desire for a smaller body type.<sup>37</sup>

According to a Pune survey, 42% of boys and 34% of girls receive criticism for being overweight or obese, and 18% of girls receive criticism for having acne. But 15% of males get criticism because of their diminutive stature. Suicidal ideation stemming from depression is quite common in both sexes, albeit females are more likely than boys to experience the inclination. Many abusers may permanently change their victim partners' appearance as a means of control. Eventually, the survivor might begin to feel self-conscious and unattractive.<sup>38</sup> Restricting food intake, losing weight, and increasing exercise is a common strategy employed by abusers to weaken their spouses both emotionally and physically. It can be difficult in our society to value your body without exerting yourself, and it could take years of effort to get there. There are many challenges to conquer before one may feel empathy, acceptance, and ultimately love for their body.<sup>39</sup>

Visuals, text, movies, blogs, and vlogs all constantly give us cues about how we should present ourselves. Since many of the kids were overweight, underweight, or out of proportion, they were given explicit instructions to change their appearance. Individuals who experienced bullying and harassment during their childhood may have lifelong peer wounds that require medical attention. Youngsters have an intense desire to fit in and feel at ease with their classmates.<sup>40</sup> When a youngster experiences rejection due to their appearance, their belief that they are not acceptable, worthy of love, or good enough starts to take shape. The feeling of worthlessness is much more pervasive than just striving to change one's physical look for the rest of one's life.<sup>41</sup>

The overall prevalence of body shaming was found to be 44.9 percent in the study conducted in India by Gam RT et al. This is higher than the findings of Bucchianeri et al. and Eisenberg et al., who found that the prevalence of appearance-based harassment was 38.2 percent and 30 percent, respectively. According to gender, there was little difference in the total reports, which is consistent with Lind et al.'s findings. But the majority of the victims stated that they were only seldom victimised.<sup>42</sup> Additionally, it was shown that having a wider network of close friends provided a buffer against body shaming. Comparable research by Brewis et al. demonstrates that early participation in making and sustaining peer friendships on campus is a buffer against the depressive impacts of body shaming. Being overweight or having a BMI higher than average increased the likelihood of body shaming.<sup>43</sup> It is consistent with research by Brewis et al., which found that students who were labelled as overweight or obese reported experiencing body shaming more frequently. The majority of the victims expressed a hatred of school, which may highlight body shaming as a significant contributing factor to teenage absence.<sup>43</sup> In order to create an environment that is generally supportive of teenagers' growth, group activities and social skills development programmes should be integrated into the regular school curriculum. This is because it has been shown that having a larger buddy circle protects against this type of harassing behaviour. Finally, bringing up the overall prevalence once more, it is important to note that the current study's prevalence was significantly higher than reports from around the world. Additionally, since this is one of the first studies on the subject in the Indian subcontinent, it is hoped that future research on body shaming and appearance-based harassment will be conducted.

## VI. Conclusion

While this review was designed to include all relevant contemporary research on the topic of body shaming and its impact on mental health. Body shaming drives stigma and discrimination, undermining physical and mental health in many ways. The results of this study revealed a significant positive relationship between the body image satisfaction and psychological well-being in patients with morbid obesity; our hypothesis was confirmed. This finding implies that the more satisfied one is with his/her body image, the more likely it is that he/she will experience higher or better

psychological well-being. It means that body image defects caused by obesity could be related to negative psychological well-being.

Lastly, not the least the study found the existence of a link between body shaming and depression. We all live in a society where people have a tendency commenting on one physical appearance intentionally or unintentionally. By hearing such kind of criticism one can take lightly and someone can take it to their heart which can results in developing self-doubt, creating or developing avoidance and irrational thoughts based on the obsessed feelings about their physical appearance. There are high chances of causing misinterpretation about their body image and misunderstandings about people's comments due to wrong perception and irrational cognition, eventually leading to depression which can also develop anxiety. It can be conclude that it's important for one to cultivate self-love by taking care and knowing the value of self without focusing on things that can effect negatively on their mental health and shouldn't be ashamed of who they are. Usually those who have overweight body of both sexes have inclined to make or keep friends, which further increased their depressive symptoms.

## **Research Gaps**

This systematic review highlighted the importance of several future directions for researching the psychological impact of body shaming. A common theme in the literature was the necessity for more research in all facets of mental health. Additional awareness of body shaming and assessment measures for perfectionism in clinical settings was underexplored. Socially prescribed perfectionism is a particularly new and therefore understudied area. The confluence of social and economic pressures, which are heightened by social media and increased parental demands, is an area that could benefit from focused research on the moderating and mediating variables, which in turn can inform new and improved forms of treatment.

## **Limitations:**

There was a higher chance of researcher bias because a secondary reviewer did not conduct the systematic review. Additional constraints encompassed the choices to exclusively utilize English and peer-reviewed material, so diminishing the range of



available literature to provide context for the systematic review. The PRISMA flowchart did, however, verify that few research were disqualified for being non-English, indicating a low likelihood of language bias.

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