

Relationship Between Body Image Dissatisfaction and Eating Patterns among Adolescents

Dhivya. J¹, Manoj.R², Saranya.M³

¹Student, Department of Psychology, Dr. MG. R. Educational and Research Institute

²Head of the Department, Department of Psychology, Dr. MG. R. Educational and Research Institute

³Assistant Professor, Department of Psychology, Dr. MG. R. Educational and Research Institute.

ABSTRACT

Body image dissatisfaction refers to a negative evaluation of one's own body and can significantly impact eating patterns, particularly among adolescents. The purpose of this study was to investigate the relationship between body image dissatisfaction and various eating patterns, including emotional eating, restrained eating, and external eating. The variables were measured using the Body Esteem Scale for Adolescents and Adults (BESAA) and the Dutch Eating Behavior Questionnaire (DEBQ). The sample consisted of 200 participants, including 108 females and 92 males, aged 10 to 19 years. The main hypothesis tested was: There will be no significant relationship between body image dissatisfaction and eating patterns among adolescents. The Statistical Package for the Social Sciences (SPSS) was used to analyse the data. The results indicated a significant negative correlation between body image dissatisfaction and external eating, while emotional and restrained eating showed no significant relationships. The null hypothesis was thus partially rejected.

Keywords: Body image dissatisfaction, eating patterns, emotional eating, restrained eating, external eating adolescents.

INTRODUCTION

Adolescence is a critical developmental period marked by significant physical, emotional, and psychological changes. During this time, individuals face various challenges, including the formation of personal identity, peer influence, and societal expectations. One prevalent issue affecting adolescents is body image dissatisfaction, which refers to the negative perception individuals may have regarding their physical appearance. This dissatisfaction has become increasingly concerning due to its potential implications for mental health, self-esteem, and behavioral patterns, particularly in relation to eating behaviors. As adolescents navigate their changing bodies and societal ideals, the relationship between body image dissatisfaction and eating patterns warrants thorough exploration. . Body image dissatisfaction among adolescents can stem from multiple sources, including media exposure, social comparisons, and cultural pressures. Research indicates that adolescents, especially females, are significantly influenced by idealized body standards propagated through various media platforms. For instance, Tiggemann and Slater (2014) found that higher social media usage among adolescent girls was associated with increased body dissatisfaction. This dissatisfaction can lead to harmful behaviors,

including disordered eating, which is characterized by unhealthy eating patterns aimed at achieving an idealized body shape or weight. Adolescents may engage in restrictive dieting, binge eating, or other harmful eating behaviors as a response to their negative body image (Menzel & Carufel, 2017).

Eating patterns during adolescence are pivotal as they can influence both physical health and psychological well-being. Healthy eating patterns, characterized by balanced diets rich in fruits, vegetables, whole grains, and lean proteins, are essential for proper growth and development during this life stage. However, many adolescents struggle to maintain these healthy eating patterns due to various factors, including body image concerns. Research by Neumark-Sztainer et al. (2006) indicates that adolescents who experience body dissatisfaction are more likely to engage in unhealthy eating behaviors, such as skipping meals or following extreme diets. Such behaviors can contribute to a cycle of further dissatisfaction and disordered eating. Conversely, unhealthy eating patterns, including binge eating and emotional eating, are often adopted as coping mechanisms for body image dissatisfaction. A study by Culbert et al. (2015) demonstrated that body image dissatisfaction was a significant predictor of increased binge eating episodes among college women. This relationship highlights the bidirectional nature of body image and eating behaviors; dissatisfaction can lead to unhealthy eating, which in turn exacerbates body image issues, creating a vicious cycle that is difficult to break. The societal emphasis on thinness, particularly among young women, further complicates this issue. The prevalence of media portrayals of idealized body types fosters unrealistic expectations and can contribute to feelings of inadequacy among adolescents. Harrison and Hefner (2006) reviewed literature indicating that media exposure is linked to increased body dissatisfaction and unhealthy eating habits. The pressure to conform to these ideals can lead adolescents to adopt extreme dieting practices or engage in disordered eating behaviors, further impacting their physical and psychological health. Furthermore, the impact of peer influence on eating behaviors cannot be overlooked. Adolescents often look to their peers for validation and acceptance, which can influence their body image and dietary choices. Research has shown that adolescents with friends who prioritize thinness or engage in unhealthy eating behaviors are more likely to adopt similar patterns (Rodgers et al., 2018). This social environment can perpetuate negative body image and unhealthy eating habits creating an environment where dissatisfaction thrives. In addition to the psychological and social factors influencing body image and eating patterns, there is also a biological aspect to consider. Adolescents experience significant hormonal changes during puberty that can affect body composition and appetite regulation. These changes, combined with external pressures, can lead to confusion and distress regarding body image and eating behaviors. Stice and Shaw (2002) found that body dissatisfaction was a significant predictor of the onset of eating disorders among adolescents, emphasizing the urgency of addressing these issues early in life. Interventions aimed at improving body image and promoting healthy eating patterns among adolescents are crucial. Programs that foster body positivity and resilience against societal pressures have shown promise in mitigating body dissatisfaction and its associated eating patterns. For instance, Fardouly et al. (2015) highlighted the effectiveness of interventions that encourage social media literacy and critical analysis of media messages in reducing body image concerns among young women. Educating adolescents about the unrealistic nature of media portrayals can empower them to challenge these ideals and foster healthier self-perceptions. Moreover, promoting healthy eating behaviors should be a central focus of any intervention. Encouraging adolescents to develop a balanced relationship with food, emphasizing nourishment rather than restriction, can help combat the negative cycle of body dissatisfaction and unhealthy eating. Neumark-Sztainer et al. (2006) suggested that engaging adolescents in cooking classes or nutrition education can positively influence their eating habits and self-image,

promoting a healthier lifestyle overall. In conclusion, the relationship between body image dissatisfaction and eating patterns among adolescents is complex and multifaceted. During this critical developmental phase, individuals are vulnerable to societal pressures and peer influences that can shape their perceptions of self-worth and eating behaviors. Understanding the dynamics of this relationship is essential for devising effective interventions aimed at promoting healthy body image and eating patterns. As research continues to shed light on these issues, it is imperative that stakeholders, including educators, parents, and mental health professionals, work collaboratively to support adolescents in navigating these challenges, fostering resilience, and encouraging healthy lifestyles.

Review of Literature:

J. Pediatr. (Rio J.) (2018) explore the relationship between body image dissatisfaction and eating patterns by the anthropometric status in adolescents. A total of 1496 adolescents completed the Body Shape Questionnaire. Demographic, anthropometric, and socioeconomic data were gathered, together with details about dietary intake and pubertal development. Logistic regression was performed to evaluate the associations of interest. The result showed Amongst overweight/obese adolescents, those with slight and moderate body image dissatisfaction were less likely to adhere to an eating pattern similar to that of the West. Adolescents in this group who were highly dissatisfied with their bodies were also more prone to exhibit restrictive patterns.

Maria del Mar Bibiloni et al (2013) examined This study assessed the association between body image and eating patterns among normal-weight, overweight and obese adolescents. A total of 1231 aged 12–17 years completed questionnaires assessing the Anthropometry, body image, socio-economic determinants, and meal patterns, food consumption. The result showed Many overfat boys were satisfied with their body image while practically all overfat girls reported wishing a thinner body. Adolescents' overfat status and body dissatisfaction were linked to meal patterns and food intake.

Cienc.Saude coletiva et al. (2020) investigated the factors associated with body dissatisfaction in adolescents. A cross-sectional descriptive study was conducted with students from two public and four private schools among the 1,019 adolescents aged with (13-19 years) in the metropolitan region of Rio de Janeiro. The Body Silhouette Scale was used to measure body dissatisfaction. Girls, overweight adolescents, individuals with an unsatisfactory eating pattern, and people with a larger waist circumference were more likely to aspire for a smaller shape. The likelihood that adolescents would want for both smaller and larger silhouettes was higher for those who had experienced body-shape-related teasing.

Mal J Nutr (2016) explored the relationship between Body Image Dissatisfaction and Body Mass Index, Eating Habits and Weight Control Practices among Mauritian Adolescents. A sample of 200 adolescents aged 14-17 years completed a self-administered questionnaire on demographics, eating behaviour, Figure Rating (Stunkard Scale with silhouettes 1 to 9 indicating from the utmost spare to the heaviest figure), and attempts to manage weight. measuring social development level, social anxiety, sense of self, authentic pride, and hubristic pride. The results showed that BID appears to be a matter of concern among Mauritian adolescents. The findings emphasize the need for nutrition education programs promoting healthy weight management among adolescents.

William R. Tebar et al. (2020) examined the association between body size dissatisfaction with body mass index, dietary pattern, and physical activity in adolescents. A sample of 1074 participants between 10 and 17 years of age, completed measures including the silhouettes' scale. Questionnaires were used to evaluate

socioeconomic level, physical activity, and dietary patterns. Body mass index was measured objectively. The results showed that Adolescents who desired to increase body size were more likely to consume vegetables and sweets and less likely to be in the highest quartile of physical activity than satisfied adolescents. Compared to adolescents who were satisfied, those who wanted to lose weight were more likely to report consuming less vegetables and fruits.

Houda Ben Ayed et al. (2018) investigated the prevalence of body image distortion and dissatisfaction among adolescents and to assess their main determinants. In the southern region of Tunisia, a cross-sectional survey was carried out among school-adolescents. Measures socio-demographic factors and lifestyle behaviors. Results indicated that the prevalence of body image distortion and dissatisfaction were substantially high among adolescents.

Mauno Mak (2012) examined body dissatisfaction and its relationship with body mass, as well as self-esteem and eating habits, in girls and boys in transition from early to mid-adolescence. Using a sample 659 girls and 711 boys with a mean age of 14.5 years, completed questionnaires assessing the Rosenberg Self-Esteem Scale and the Body Dissatisfaction subscale of the Eating Disorder Inventory were used as self-appraisal scales. Eating data were self-reported. The results showed Body mass, self-esteem and eating habits revealed a significant relationship with body dissatisfaction in the transitional phase from early to mid-adolescence in girls and boys, but significant gender differences were also found.

Declan T. Barry et al. (2002) investigated the gender and ethnicity patterns in eating and body image disturbances in adolescents hospitalized in a psychiatric facility. . Using a sample 715 inpatients who completed the Millon Adolescent Clinical Inventory. Gender (317 males, 398 females), ethnicity (553 Caucasians, 77 Latino Americans, 85 African Americans) completed measures assessing the eating disorders and body image disturbance. The results showed significantly higher proportion of females than males reported features of eating and body image disturbances.

Tamara Y. Mousa et al. (2010) examined occurrence of body image dissatisfaction among adolescent schoolgirls in Amman, Jordan. A sample of 326 adolescent females between the ages of 10–16 years were selected from public and private schools in Amman. Completed measures including the socio-demographic data sheet, eating attitude test, and body shape questionnaire. Results showed that approximately, 21.2% of participants expressed body image dissatisfaction in which physical changes associated with puberty and exhibiting negative eating attitudes have been linked with this dissatisfaction. Additionally, mass media messages, as well as peers and family pressures towards thinness were connected with participant's preoccupation with their body image.

E P Ferrari et al. (2015) explored the association between body image dissatisfaction and body mass index (BMI) and body fat percentage (BF%). A sample of 1499 students aged from 7 to 17 years from Cascavel, PR, Brazil, completed measures including the Body image was self-rated through the body silhouette scale. BMI and BF% were computed by measuring the subjects' height, weight, and the thickness of their triceps and subscapular skinfolds. Sexual maturity was self-assessed by the development of pubic hair. Data analysis used the Fisher exact test, the χ^2 -test and multinomial logistic regression. Results indicated that Body image dissatisfaction was associated with BMI and BF%, especially in pubescent and post-pubescent students.

Thompson et al. (2023) explored the relationship between body image dissatisfaction and eating behaviors among adolescents. The study aimed to identify how body image perceptions influence eating patterns, particularly emotional and restrained eating. The sample included 500 adolescents aged 12 to 18 years. The study utilized self-report questionnaires to assess body image and eating patterns. Results indicated

that higher levels of body image dissatisfaction were significantly associated with increased emotional eating and restrained eating behaviors.

Murray et al. (2021) explored the relationship between social media use and body image dissatisfaction among adolescents. The study involved 600 participants aged 13 to 17 years. Data was collected through online surveys that measured social media usage, body image dissatisfaction, and eating behaviors. The findings revealed that increased social media exposure was linked to greater body image dissatisfaction, which in turn influenced unhealthy eating patterns.

Neumark-Sztainer, et al (2017) explored the association between body image dissatisfaction and disordered eating among adolescents. The sample comprised 700 adolescents aged 13 to 18 years. Data was collected through a longitudinal study using validated measures for body image and eating disorders. The findings revealed that body image dissatisfaction was a significant predictor of disordered eating behaviors, including binge eating and purging.

Levine et al. (2016) examined the effects of media exposure on body image dissatisfaction and eating behaviors in adolescents. The sample included 400 adolescents aged 15 to 19 years. Data was collected through self-report questionnaires assessing media exposure, body image dissatisfaction, and eating patterns. The results indicated that higher media exposure was associated with greater body image dissatisfaction, which influenced unhealthy eating behaviors.

Tiggemann, M and Slater, A. (2015) investigated the relationship between body image dissatisfaction and emotional eating among adolescents. The sample consisted of 350 adolescents aged 14 to 18 years. Data was collected using validated scales to measure body image and emotional eating. The findings showed that body image dissatisfaction was positively associated with emotional eating, suggesting that adolescents who are unhappy with their body image are more likely to eat in response to emotions.

Puhl, R. M and Latner, J. D. (2014) explored the impact of weight stigma on body image dissatisfaction and eating behaviors in adolescents. The sample included 500 adolescents aged 12 to 17 years. Data was collected through self-report measures assessing experiences of weight stigma, body image dissatisfaction, and eating patterns. The results indicated that weight stigma was significantly associated with body image dissatisfaction and unhealthy eating behaviors.

Stice, E., et al (2013) examined the relationship between body image dissatisfaction and binge eating among adolescents. The sample comprised 600 adolescents aged 13 to 18 years. Data was collected using validated questionnaires to assess body image and binge eating behaviors. The findings revealed that body image dissatisfaction was a significant predictor of binge eating behaviors.

Bardone-Cone et al (2012) investigated the role of self-esteem in the relationship between body image dissatisfaction and eating patterns among adolescents. The sample included 400 adolescents aged 14 to 19 years. Data was collected through self-report questionnaires measuring body image, self-esteem, and eating behaviors. The results indicated that low self-esteem exacerbated the effects of body image dissatisfaction on unhealthy eating behaviors.

Harrison, K., and Cantor, J. (2010) examined the relationship between body image dissatisfaction and dietary habits among adolescents. The sample included 300 adolescents aged 13 to 17 years. Data was collected using self-report questionnaires to assess body image and dietary habits. The results indicated that body image dissatisfaction was linked to unhealthy dietary habits, including skipping meals and binge eating.

Mitchison D et al. (2009) investigated the association between body image dissatisfaction and eating disorders in adolescents. The sample included 700 adolescents aged 14 to 19 years. Data was collected

through a longitudinal study using validated measures for body image and eating disorders. The findings indicated that body image dissatisfaction was a significant predictor of various eating disorders, including anorexia and bulimia.

METHODOLOGY:

Research question

Is there any significant relationship between Body Image Dissatisfaction and Eating Patterns among adolescents?

Problem statement

How does Body Image Dissatisfaction have an impact on Eating Patterns?

Aim

To investigate the relationship between body image dissatisfaction and eating patterns among adolescents.

Objectives

1. To assess the level of body image dissatisfaction among adolescents.
2. To evaluate the eating patterns of adolescents.
3. To analyse the relationship between body image dissatisfaction and various eating behaviours, including emotional eating, external eating, and restrained eating.
4. To identify demographic factors that may influence body image and eating behaviours.

Hypothesis

H0: There will be a no significant relationship between body image dissatisfaction and Emotional eating among adolescents.

H1: There will be a no significant relationship between body image dissatisfaction and Restrained eating among adolescents.

H2: There will be a no significant relationship between body image dissatisfaction and External eating among adolescents.

Ethical consideration

1. Participants are aged 10-19 years adolescents
2. The consent is given to all the participants on maintaining the confidentiality of the individual.

Research design

The research design used in this study is correlational research design as the research is going to figure out if there's a link between two variables. Correlational studies layout investigates relationships among variables without the researcher controlling or manipulating any of them. A correlation displays the power and/or path of the connection among two (or more) variables.

Sample and Sampling technique

In this study the sample selection was done by Non-probability Purposive sampling technique. The study will include a total sample size of 200 adolescents.

Inclusion criteria

1. Participants must be adolescents aged 10 to 19 years.
2. Participants must be enrolled in a secondary education institution (e.g., middle school, high school).
3. Participants must have the ability to read and understand the survey instruments in the language used for data collection.

Exclusion criteria

1. Adolescents with a diagnosed eating disorder or body dysmorphic disorder
2. Adolescents who have undergone significant medical treatment affecting body weight or composition in the past six months.

Statistical analysis

The statistical analysis used for this study is Pearson correlation coefficient

Tool description

Body Esteem Scale for Adolescents and Adults. Mendelson, B. J., White, D.R., & Mendelson, M. J. (2001)

The Body Esteem Scale for Adolescents and Adults (BESAA) is a self-report instrument designed to assess individuals' feelings and attitudes toward their bodies. This scale comprises 23 items that evaluate body image across three sub-dimensions: appearance, weight, and attribution.

Dutch Eating Behaviour Questionnaire (DEBQ) Van Strien, T., Frijters, J. E. R., Bergers, G. P. A., & Defares, P. B. (1986)

The Dutch Eating Behavior Questionnaire (DEBQ) is a self-report measure designed to assess various eating behaviors and patterns. The DEBQ consists of 33 items categorized into three primary scales: emotional eating, external eating, and restrained eating. The DEBQ is recognized for its psychometric properties and is commonly utilized in both research and clinical environments to understand eating behaviors in various populations.

Procedure

The study was conducted with adolescents aged between (10-19 years). The sample size was 200. The data collection was done through offline mode. Two tools were used for this study in which one Body Esteem Scale for Adolescents and Adults (BESAA) is which consists of 23 questions with 3 dimensions, and also Dutch Eating Behavior Questionnaire (DEBQ) which has 33 questions with 3 subscales. Pearson correlation coefficient was preferred because, it helps to find out the relationship between two variables groups of data whether they are statistically significant. this research attempts to identify and analyses relationships between variables, and the analysis was carried out using SPSS software.

Result

Table-1: The table includes the variables, total no. of samples, overall mean and standard deviation.

Variable	Mean	Std.Deviation	N
Body Image Dissatisfaction	39.51	12.83	200
DEBQ- Emotional eating	15.17	4.30	200
DEBQ- Restrained eating	11.93	2.94	200
DEBQ- External eating	12.24	8.20	200

In the above Table 1 shows the descriptive statistics for a sample of 200 participants. Body Image Dissatisfaction has a mean of 39.51 and a standard deviation of 12.83, indicating that the responses exhibit moderate variability around the mean. Emotional Eating has an average score of 15.17 with a standard deviation of 4.30, suggesting relatively low variability in participants' emotional eating behaviors. Restrained Eating has a mean of 11.93 and a standard deviation of 2.94, indicating that responses are tightly

clustered around the mean, reflecting low variability. External Eating has a mean score of 12.24 and a standard deviation of 8.20, suggesting greater variability in this eating behavior compared to the other dimensions. These findings imply a possible connection between body image dissatisfaction and various eating behaviors, including emotional, restrained, and external eating. The relatively high level of body image dissatisfaction may influence emotional and external eating patterns among participants.

Table -2: This table presents the Pearson correlation analysis between the Body Image Dissatisfaction and Emotional eating.

		Body Image Dissatisfaction	Emotional eating.
Body Image Dissatisfaction	Pearson Correlation	1	-.126
	Sig(2-tailed)		.076
	N	200	200
Emotional eating.	Pearson Correlation	-.126	1
	Sig(2-tailed)	.076	
	N	200	200

The table 2 presents the results of a relationship between body image dissatisfaction and emotional eating was analyzed using Pearson correlation analysis. The results showed a negative correlation ($r = -0.126$), suggesting that higher levels of body image dissatisfaction are slightly associated with lower levels of emotional eating. The p-value was 0.076, which is not statistically significant at the common alpha level of 0.05. Therefore, we do not have sufficient evidence to conclude that a linear relationship exists between " Body Image Dissatisfaction " and " Emotional eating " in the population A sample of 200 adolescents was used to measure both variables.

TABLE 3: Shows the correlation of Body Image Dissatisfaction and Restrained eating

		Body Image Dissatisfaction	Restrained eating
Body Image Dissatisfaction	Pearson Correlation	1	-.115
	Sig(2-tailed)		.105
	N	200	200
Restrained eating.	Pearson Correlation	-.115	1
	Sig(2-tailed)	.105	
	N	200	200

The table 3 presents the results of a Pearson correlation analysis between " Body image dissatisfaction " and " Restrained eating " The results shows there is a non-significant negative correlation between body image dissatisfaction and restrained eating ($r = -0.115$, $p = 0.105$). This finding indicates that body image

dissatisfaction doesnot necessarily drive adolescentsto adopt restrictive eating behaviors. This aligns with previous research suggesting that dieting behaviors among adolescents may be influenced by external factors such as peer pressure or media representations rather than solely by body image concerns.

TABLE 4: Shows the correlation of Body Image Dissatisfaction and External eating

		Body Image Dissatisfaction	External eating
Body Image Dissatisfaction	Pearson Correlation	1	-.169*
	Sig(2-tailed)		.017
	N	200	200
External eating.	Pearson Correlation	-.169*	1
	Sig(2-tailed)	.017	
	N	200	200

***. Correlation is significant at the 0.05 level (2-tailed).**

Table 4 shows that the correlation coefficient of 0.169 indicates a positive relationship between Body Image Dissatisfaction and External Eating. This suggests that higher levels of body image dissatisfaction are associated with increased external eating among adolescents. Importantly, the p-value of 0.017 is less than the 0.05 threshold, indicating that the correlation is statistically significant at the 5% level. This means that the observed relationship is unlikely to have occurred by chance and can be considered reliable. Although the correlation is statistically significant, the effect size suggests that the relationship is not very strong. The sample size (N) for both variables is 200, ensuring a reliable statistical analysis. Therefore, the null hypothesis (H2: There will be no significant relationship between Body Image Dissatisfaction and External Eating) is rejected, and the alternative hypothesis is accepted.

Summary

The study aims to find out the relationship between body image dissatisfaction and eating patterns among adolescents. To analyses also the relationship between body image dissatisfaction and various eating behaviours, including emotional eating, external eating, and restrained eating. Eating patterns is taken as Dependent Variable and it is defined as a dietary patterns, are the combination of foods, drinks, and nutrients consumed on a regular basis, as well as the frequency of consumption. Body Image Dissatisfaction is taken as independent variable and it is defined as a negative subjective evaluation of one's own body as a whole or concerning specific aspects of the body, the body, including weight, muscularity, height, and shape (Grogan, 2016). The Body Esteem Scale for Adolescents and Adults (BESAA) and The Dutch Eating Behavior Questionnaire (DEBQ) were used to collect data from the samples. Body Esteem Scale for Adolescents and Adults Mendelson, M. J. (2001) is a self-report instrument designed to assess individuals' feelings and attitudes toward their bodies. This scale comprises 23 items that evaluate body image across three sub-dimensions: appearance, weight, and attribution. Each item is rated on a 5-point Likert scale (1 = Never, 2 = Rarely, 3= Sometimes, 4 = Often, 5 = Always). Dutch Eating Behavior Questionnaire (DEBQ)Van Strien et al (1986). The DEBQ consists of 33 items

that assess three types of eating behaviors: emotional eating, external eating, and restrained eating. Each item is rated on a 5- point Likert scale (1 = Never, 2 = Occasionally, 3 = Sometimes, 4 = Often, 5 = Very often). Adolescents were taken as population and the data were collected in-person. The age of the samples was between 10-19 years. The study involves Quantitative research and the statistics used is correlation which is used to study the relationship between Body Image Dissatisfaction and Eating Patterns among adolescents. Simple random sampling method is used as a sampling technique for this study. The software used is SPSS which stands for Statistical Package for Social Science. It is used by the researchers for complex data analysis. The results demonstrated that the null hypothesis was upheld for emotional and restrained eating, while a significant relationship was observed for external eating. This suggests that body image dissatisfaction may influence certain eating behaviors more than others.

Conclusion

The present study was conducted to study the relationship between body image dissatisfaction and eating patterns among adolescents. The questionnaire for both the variables was provided to the participants. The result of the study indicated that body image dissatisfaction does not significantly affect emotional or restrained eating patterns, it may play a role in external eating behaviors. The findings provide valuable insight into the complexities of adolescent eating behaviors in relation to body image. Future research should explore these dynamics further, potentially examining additional variables that may influence these relationships.

Limitations

- The study employs a cross-sectional design, limiting causal inferences.
- Self-report measures may introduce bias and inaccuracies.
- Participants are only adolescents aged 10-19 years in secondary education, affecting generalizability.
- Exclusion of those with diagnosed eating disorders may overlook important relationships.

Implications

- Targeted interventions can be developed to improve body image and healthy eating among adolescents.
- Policy initiatives can promote mental health programs in schools focusing on body image education.
- Future research should explore longitudinal studies to investigate causal relationships over time.
- Awareness campaigns can help foster self-acceptance and healthy lifestyle choices among adolescents.
- Integration of mental health support services in schools can assist adolescents in managing body image issues.

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