Approximately 50-70% of adolescent girls report feeling dissatisfied with their body. This dissatisfaction has been associated with a number of negative consequences including increased negative affect, decreased physical activity, and eating disorders. Exposure to media portraying the thin ideal of beauty has emerged as a cause of body dissatisfaction.

Cognitive dissonance (CD) interventions have shown promising results in treating body dissatisfaction in adolescents and women over age 14. However, despite evidence that internalization of the thin ideal and body dissatisfaction occurs in girls 7-11 years old, no previous research has examined the effectiveness of CD interventions in early adolescence.

It will be useful for us to have an understanding of cognitive dissonance in order to fully understand the intervention used in this research. Cognitive dissonance is a theory originally developed by Leon Festinger in 1957 that posits that when an individual holds a belief and acts in a way that is inconsistent with that belief, they will experience mental stress and discomfort. Humans strive for internal consistency and will attempt to resolve the dissonance by changing either their belief or behavior.

CD interventions for body image involve engaging participants in counter-attitudinal activities that require them to speak out against the thin ideal of beauty. This creates dissonance because the individual is acting in a manner inconsistent with their belief. The hope is that participants will change their beliefs about the thin ideal to correspond to their actions. Halliwell & Diedrichs (2014) examined whether a CD intervention would increase resilience to thin ideal media and reduce dietary restraint, thin ideal internalization, and body dissatisfaction amongst young girls in the UK.

Participants in the study were 104 girls aged 12-13 years old. The sample was predominantly white (70%) and had an average body mass index (BMI) of 20. Half of the participants were assigned to the intervention and the other half was assigned to the control condition, in which they attended their regular classes. The intervention consisted of 4 weekly 20-minute sessions, which included 6 activities from the Body Project (Stice & Presnell, 2007) and 2 additional activities focused on critiquing the thin ideal. Five weeks after the intervention/control, participants were exposed to advertisements featuring either models (thin ideal) or control images (product with no model).

Results of the study indicate that the girls reported lower levels of body dissatisfaction and internalization after participating in the CD intervention, when compared to the control group. These girls who participated in the intervention were also protected from negative media exposure effects after the intervention, suggesting that the intervention may provide resilience from thin ideal media, which in turn may serve as protection from the development of eating disorders. Contrary to the authors’ hypothesis, the CD intervention did not impact self-reported restraint. The effect sizes in this study were less robust than in other studies examining CD interventions. This may be related to a shorter intervention used in this study or that the CD effect may be less powerful for younger girls.
While not as effective as previous studies examining older adolescents, the CD intervention seems like a promising treatment for adolescents aged 12-13 years old. The authors emphasize that the study needs to be replicated and future research should examine other measures of body satisfaction, restraint, and the long-term impact of the intervention.

Reference: