A pilot controlled trial of a cognitive dissonance-based body dissatisfaction intervention with young British men

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This pilot study evaluated a body image intervention for men, Body Project M. Seventy-four British undergraduate men took part in two 90-min intervention sessions, and completed standardised assessments of body image, bulimic pathology, and related outcomes at baseline, post-intervention, and 3-month follow-up. Fifty-three other men completed the questionnaires as an assessment-only control group. Per-protocol analysis showed that Body Project M improved men’s dissatisfaction with body fat and muscularity, body appreciation, muscularity enhancing behaviours, appearance comparisons, and internalization (d = 0.46–0.80) at post-intervention. All except dissatisfaction with muscularity and internalization were sustained at 3-month follow-up. No effects were found for bulimic pathology. Post-intervention effects for dissatisfaction with muscularity and internalization only were retained under intention-to-treat analysis. Participants were favourable towards the intervention. This study provides preliminary evidence for the acceptability and post-intervention efficacy of Body Project M. Further development of the intervention is required to improve and sustain effects.

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1. Introduction

Recent research in the U.S., UK, and Australia suggests that a substantial proportion of men experience body dissatisfaction, including dissatisfaction with body fat, muscularity, hair, and height (e.g., Kruger, Lee, Ainsworth, & Macera, 2008; Silva, Nahas, de Sousa, Del Duca, & Péres, 2011; Tiggemann, Martins, & Churchett, 2008). Body dissatisfaction, in particular weight and shape concerns, is the most potent modifiable risk factor for the development of some eating disorders among men and women (Jacobi & Fittig, 2010). Body dissatisfaction is also correlated with depression and muscle dysmophria among men (Griffiths et al., 2016; Kanayama, Barry, Hudson, & Pope, 2006), and it can negatively impact on their day-to-day life. For example, this can include the avoidance of social situations where the body is undressed (e.g., swimming), avoiding sex, and not participating in school or work activities so as not to draw further attention to their appearances (Adams, Turner, & Bucks, 2005). It is therefore important that support and interventions are available for men experiencing body dissatisfaction.

1.1. Current evidence for body image interventions among men

Systematic and meta-analytic reviews of psychosocial interventions designed to reduce body dissatisfaction indicate that, relative to women, few interventions have been evaluated among men. For example, Jary and Ip (2005) conducted a meta-analysis of 19 studies that evaluated stand-alone cognitive-behaviour therapy interventions designed to reduce body dissatisfaction among non-clinical and clinical mixed-sex samples. It was unclear if these interventions were effective among men due to small male sample sizes. Specifically, only four studies in the meta-analysis included men, with a total of only 22 men recruited across all studies prohibiting moderator analyses by gender.

Similarly, Stice, Shaw, and Marti (2007) conducted a meta-analysis of studies evaluating 38 eating disorder prevention programmes published between 1980 and 2003. They found eight of these interventions were delivered to mixed-sex samples, seven of which included adolescent boys and one that included college men. Three out of these eight interventions improved male participants’ body dissatisfaction at immediate post-intervention, but there were no sustained effects at follow-up (O’Dea & Abraham, 2000; Richman, 1993, 1997). More recently, Yager and O’Dea (2008) systematically reviewed 27 body image interventions delivered to...
university students, a common target population for body image and eating disorder prevention interventions, and identified only one study that included men. In this study, 44 women and 16 men from a U.S. university took part in four weekly 90-min sessions of psychoeducational and media literacy content (Rabak-Wagener, Eichhoff-Shemek, & Kelly-Vance, 1998). There were no improvements in body image among men who received the intervention relative to controls, with Rabak-Wagener et al. suggesting that this was likely due to the intervention being designed specifically for women. Collectively, these reviews indicate that few body image interventions have been evaluated among men, and even fewer have been found to significantly improve men’s body dissatisfaction.

1.2. Cognitive dissonance body image interventions

A cognitive dissonance-based body image intervention known as ‘The Body Project’ has received the most consistent and substantial empirical support for improving body image and reducing disordered eating pathology among adolescent girls and young adult women (Stice, Marti, Spoon, Presnell, & Shaw, 2008), and may provide a fruitful avenue for future research with men. The Body Project has been researched extensively since 2000 under various labels, including ‘Reflections: Body Image Program’ when disseminated among sororities in the U.S., and ‘The Succeed Body Image Programme’ when disseminated among universities in the UK. The Body Project is based on cognitive dissonance theory (Festinger, 1957), and aims to induce cognitive dissonance among girls and young women by engaging them in counter-attitudinal written and behavioural exercises (e.g., role plays, group discussion, letter writing) that challenge the dominant thin-ideal standard of female beauty. Dissonance induction putatively reduces internalization of the thin-ideal, and subsequently reduces body dissatisfaction and eating pathology (Stice et al., 2008). Typically, The Body Project is delivered via two 2-h sessions or four to six 45-min sessions. The Body Project has been shown to be effective when delivered by psychologists, researchers, college health professionals, and university student peer-leaders primarily among selective samples of girls and women, although there are some studies with samples of both high- and low-risk participants (Stice, Becker, & Yokum, 2013).

To date, at least six independent research teams have provided empirical evidence for the efficacy and effectiveness of The Body Project in improving body image and reducing eating pathology among adolescent girls and young adult women. Studies have spanned clinical samples of U.S. women with eating disorders (Stice et al., 2008), U.S. female athlete students (Becker, McDaniel, Bull, Powell, & McIntyre, 2012), non-clinical samples of U.S. women and adolescent girls (Stice et al., 2008), Australian female university students (Cruwys, Haslam, Fox, & McMahon, 2015), and UK adolescent girls (Halliwell & Diedrichs, 2014; Halliwell, Jarman, McMamara, Risdon, & Jankowski, 2015). Body image improvements are typically sustained at follow-up, including 6-8 months (Stice et al., 2008), one, two, and three years (Stice et al., 2008; Stice, Robide, Butryn, Shaw, & Marti, 2015).

Based upon the success of The Body Project, and the utility of dissonance-based interventions for other health issues among men (e.g., safe sex; Stone, Aronson, Crain, Winslow, & Fried, 1994), the potential for cognitive dissonance body image interventions among men appears promising. Some researchers have recently used cognitive dissonance body image interventions among samples of men, although few have collected appropriate outcome data to assess intervention efficacy among men specifically (e.g., Feldman, Torino, & Swift, 2011; Ramirez, Perez, & Taylor, 2012).

Recently however, Brown and Keel (2015) conducted a pilot controlled trial to evaluate a version of The Body Project specifically designed for U.S. gay male undergraduate students. In PRIDE: Body Image Program, participants critiqued the mesomorphic appearance ideal for men, used different pronouns, and focused on LGBT specific appearance pressures in a two 2-h session format. Forty-seven gay men took part in the intervention condition and 40 in the wait-list control condition. Intervention participants reported post-intervention reductions in appearance-ideal internalization, body dissatisfaction, self-objectification, romantic partner-objectification, dietary restraint, and bulimic symptoms compared to the control group. With the exception of ideal internalization, these improvements were maintained at 1-month follow-up. In addition, participants rated the intervention as highly acceptable and attrition was low. This study provided the first preliminary evidence to suggest that cognitive dissonance-based body image interventions may also be effective in improving body dissatisfaction among men.

Most recently U.S. undergraduate men (sexuality not reported) completed two sessions of ‘Body Project 4 All’ in mixed-sex groups with undergraduate women (Kilpela et al., 2016). The two session 2-h intervention was piloted among men in focus groups to adjust the format and content for relevance among men (e.g., reference was made not only to the thin ideal as the intervention does traditionally, but also to the mesomorphic ideal). The researchers measured eight outcomes among men in a pilot randomised controlled trial: negative affect, ideal internalization, eating disorder symptomatology, and dissatisfaction with body parts, masculinity, height, body fat, and global appearance. They found improvements in five of the eight outcomes among men: negative affect, dissatisfaction with body parts, masculinity, body fat, and global appearance compared to a wait-list control condition immediately post-intervention. Maintained improvements at 2-month follow-up were observed on dissatisfaction with body parts, masculinity, body fat, and global appearance. Finally, these improvements were maintained at 6-month follow-up for dissatisfaction with body parts and body fat. This study provides further preliminary evidence to support the potential benefits of The Body Project among men, albeit in a mixed-sex delivery format.

1.3. Current study

The aim of the current study was to further advance the evidence-base for body image interventions among men by conducting a pilot controlled evaluation of an adapted version of The Body Project (i.e., Body Project M) among a sample of British undergraduate men, recruited irrespective of their sexuality. Specifically, this study sought to assess the preliminary efficacy and acceptability of the intervention at immediate post-intervention and at 3-month follow-up on body image, bulimic pathology, and related psychosocial outcomes. Based on the prior pilot studies with men (Brown & Keel, 2015; Kilpela et al., 2016), we hypothesised that men who received Body Project M would report significant improvements on body image, disordered eating, and psychosocial outcomes compared to an assessment only control group at post-intervention and 3-month follow-up.

2. Method

2.1. Design and participants

We conducted a pilot controlled trial with undergraduate men recruited from two universities in the UK. Due to timetabling constraints, random allocation to conditions was not possible. Men who were enrolled in psychology single major undergraduate degrees were allocated to the intervention condition, and men who were enrolled in psychology dual major degrees (e.g., psychology and criminology) were assigned to an assessment-only control
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