



Brief research report

Appearance investment mediates the association between fear of negative evaluation and dietary restraint



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ABSTRACT

This study investigated whether appearance investment explains the association between fear of negative evaluation and dietary restraint. Data were collected from 305 undergraduate female participants in an online survey. Mediation analyses were conducted using Preacher and Hayes (2008) Indirect Mediation macro. Results showed that both components of appearance investment that is, holding appearance as central to self-definition and the tendency to engage in appearance management behaviours, mediate the association between fear of negative evaluation and dietary restraint. The Baron and Kenny (1986) method further showed that holding appearance as central to self-definition fully mediates this association but that engagement in appearance management behaviours only partially mediates it. These results suggest that appearance investment could prompt women to diet to try to lose weight to fend off feared negative evaluation from others.

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Introduction

Dietary restriction refers to the “tendency to restrict food intake consciously in order to maintain body weight or to promote weight loss” (Westenhoefer, 1991, p. 45). Approximately 25.9% of female undergraduate students report having engaged in dietary restriction (Luce, Crowther, & Pole, 2008). This is a concern, as initial self-reported dieting predicts increases in bulimic symptoms over time among female adolescents (Stice, 2001). This latter finding is supported by experimental studies showing that disruption of cognitive control leads to disinhibited eating, a proxy for bingeing, in chronic dieters (Polivy, Herman, & Deo, 2010). Therefore, understanding the factors associated with dietary restriction is of great importance.

Fear of negative evaluation recently has emerged as a contributor to chronic dieting. It refers to fearing the evaluations of others, experiencing distress over being negatively evaluated, and avoiding situations where one may be evaluated (Watson & Friend, 1969). In non-clinical samples, fear of negative evaluation is significantly correlated with self-reported dietary restraint and to weight, shape, and eating concerns (Levinson & Rodebaugh, 2012). Furthermore, fear of negative evaluation is associated with the pursuit of thinness, even after controlling for depression, body mass index (BMI), and self-esteem (Gilbert & Meyer, 2005).

Although the relation between fear of negative evaluation and dietary restraint has been established, the mechanism of this association remains unclear. One potential explanatory factor of this association may be appearance schematicity. Cash (2011) proposes that appearance schemas are cognitive generalisations about the importance and meaning of appearance in one's life. Appearance schematicity is expressed in the form of appearance investment, which encompasses the perceived importance, significance, and effects of appearance. According to Cash, Melnyk, & Hrabosky (2004), appearance investment consists of two components. Self-evaluative salience refers to the extent to which appearance is considered instrumental for self-definition and in life outcomes. Motivational salience refers to the engagement in behaviours designed to either maintain or enhance appearance, such as checking one's appearance in the mirror. Self-evaluative salience is considered more dysfunctional than is motivational salience. In contrast to motivational salience, it is associated with low self-esteem, body image negatively impacting important life domains such as social functioning (Cash et al., 2004), and with greater susceptibility to body dissatisfaction following exposure to the thin ideal (Ip & Jarry, 2008).

Appearance investment may explain the association between fear of negative evaluation and dietary restraint as follows. First, given the current cultural context in which women's appearance is routinely judged (Herbozo & Thompson, 2006), it makes sense that women who fear others' negative evaluation may fear negative appearance judgement, as documented by Lundgren, Anderson, & Thompson (2004). This fear may naturally increase their focus on the importance, centrality, and instrumentality of appearance,

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all of which are encompassed in self-evaluative salience. Thus far, one study documented a correlation between fear of negative appearance evaluation and self-evaluative salience (Boersma & Jarry, 2013), and one documented an association between fear of negative evaluation and self-evaluative salience in breast cancer patients (Moreira, Silva, & Canavaro, 2010). However, this latter association has not been demonstrated in other populations. In terms of motivational salience, fearing negative evaluation in the current cultural context may lead to increased engagement in appearance management behaviour, again with the goal of avoiding others' negative judgement.

Second, self-evaluative salience and motivational salience may be associated with dietary restraint as follows. Current cultural standards tend to equate women's beauty with thinness. Therefore, pursuing thinness through dietary restriction may be one expression of the importance of appearance to the self. Similarly, the tendency to attend to one's appearance for esthetic purposes may lead to dietary restraint as one of the many ways through which appearance can be managed and improved. These propositions are supported by the fact that both self-evaluative salience and motivation salience are associated with dietary restraint (Lamarche & Gammage, 2012).

Finally, processing interpersonal cues through appearance schemas and engaging in appearance corrective behaviours may translate women's general anxiety of being negatively evaluated into dietary restriction. That is, appearance schemas may direct women to believe that dietary restriction will help them become thinner and therefore more consistent with cultural expectations for women's appearance, pre-empting future negative evaluations by others.

The goal of this study was to explore this associative mechanism. Specifically, we hypothesized that fear of negative evaluation would have an indirect effect on dietary restraint through self-evaluative salience and motivational salience. We also expected self-evaluative salience to be a stronger mediator of this association than would be motivational salience because it is a more dysfunctional aspect of appearance investment (Cash et al., 2004). Thus, it is more likely to promote engagement in unhealthy behaviours such as dietary restraint. Furthermore, because BMI (Foster, Wadden, Swain, Stunkard, Platte, & Vogt, 1988), low self-esteem (Johnson & Wardle, 2005) and depressive symptoms (Spoon, Stice, Bekker, Van Strien, Croon, & Van Heck) are associated with dietary restraint, they were tested as covariates.

Method

Participants

The data used in the present study were originally collected from 393 male and female undergraduate students as part of another study. Male participants, women who did not complete all of the measures required for the present analyses, and women who did not indicate their weight and/or height were excluded from the analyses. Women who did not provide their weight and or height were not significantly different from those who did on any of the measures (all $ps > .297$). The final dataset included 305 female participants. Their age ranged from 17 to 48 years ($M = 21.10$, $SD = 4.61$), and their mean BMI was 23.68 ($SD = 4.64$). In terms of ethnicity, 67.5% of participants were Caucasian, 8.9% European, 4.9% East Asian, 5.2% South Asian, 3% African-Canadian, 1% Hispanic, 0.3% Native-Canadian, and 9.2% indicated "other."

Measures

Brief Fear of Negative Evaluation II (BFNE II). The BFNE II (Carleton, McCreary, Norton, & Asmundson, 2006) is a 12-item

measure assessing the fear of being negatively evaluated. Items are answered on a 5-point scale from 0 (*not at all characteristic of me*) to 4 (*extremely characteristic of me*), with higher scores reflecting higher fear of negative evaluation. Cronbach's alpha for the present study was .96.

Eating Disorder Examination Questionnaire (EDE-Q). The EDE-Q (Fairburn & Beglin, 1994) is a 36-item measure of the main behavioural features associated with eating disorders over the past 28 days. The Restraint Subscale was used in the present study. It includes five items rated on a scale ranging from 0 (*no days*) to 6 (*every day*). Higher scores reflect increased eating pathology. Cronbach's alpha for the Restraint Subscale in the present study was .85. An additional item asking participants for their weight and height was added after the EDE-Q and used to calculate their BMI.

Appearance Schemas Inventory-Revised (ASI-R). The ASI-R (Cash et al., 2004) is a 20-item measure of body image investment and consists of two subscales: Self-evaluative Salience (SES, 12 items) and Motivational Salience (MS, eight items). The SES subscale measures the importance of appearance for the self. The MS subscale measures motivation to enhance or maintain appearance. Items are answered using a scale from 1 (*strongly disagree*) to 5 (*strongly agree*) with higher scores meaning more body image investment. In this study, Cronbach's alphas for SES and MS were .85 and .84, respectively.

Rosenberg Self-Esteem Scale (RSES). The RSES (Rosenberg, 1965) is a 10-item measure of global trait self-esteem. Items are answered on a 4-point scale from 0 (*strongly agree*) to 3 (*strongly disagree*) with higher scores reflecting higher trait self-esteem. Cronbach's alpha for the present study was .92.

Beck Depression Inventory – Second edition (BDI II). The BDI II (Beck, Steer, & Brown, 1996) is a 21-item measure of the severity of depressive symptoms. Items such as "Sadness" are answered on a 4-point scale indicating the severity of the symptom over the past two weeks (e.g., 0-*I do not feel sad*, 3-*I am so sad or unhappy that I can't stand it.*). Higher scores indicate more depression. In the present study, Cronbach's alpha was .92.

Demographics questionnaire. This questionnaire enquired about age, gender, marital status, ethnicity, and family background.

Procedure

Participants completed all measures online as part of a larger study on childhood trauma and adult body image. The demographics questionnaire was presented first, followed by the remaining measures in randomized order. This study was approved by the University's Research of Ethics Board.

Results

Data Analysis

Of the total data points, 2.34% were missing. Little's MCAR test was not significant ($\chi^2(3396) = 3471.46$, $p = .180$), indicating that missing data were random. Missing data were replaced with that participant's mean on the subscale to which the missing item belonged, which is as effective as multiple imputation given the low percentage of missing values, the sample size, and the reliability of the scales (Parent, 2013). Means, standard deviations, and correlations between the variables are presented in Table 1. All variables were significantly correlated (all $ps < .05$) with the exception of motivational salience, which was not correlated with BMI, depression, or self-esteem.

The Kolmogorov–Smirnov test revealed that none of the variables were normally distributed except for self-evaluative salience, although skewness and kurtosis were within ± 3 and ± 10 ,

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