

“Appearance Anxiety”

by **Dr. Rob Willson, PhD**

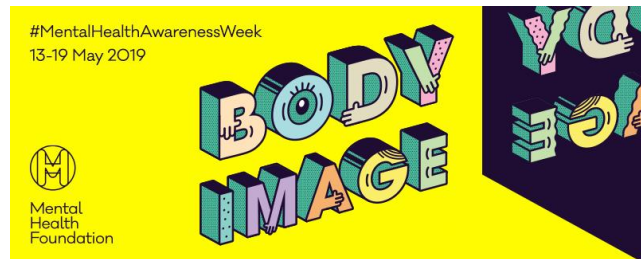
Mental Health Awareness Week 2019 starts on Monday 13th May. The theme this year is ‘Body Image – how we think and feel about our bodies’. While mental health problems are not normally the domain of coaching, body-image may be a very worthwhile focus as appearance anxiety and body-dissatisfaction are incredibly common.

When most people think of disordered body image, the picture that comes to mind is of an emaciated young girl who sees herself as fat. Coaches need to be aware of the range of body-image concerns that people can have that extend beyond weight, size and shape. Over the past 24 years I've had a special interest in body dysmorphic disorder (BDD)*. BDD is a distressing and disabling preoccupation with perceived flaws in appearance. Affecting around 2% of the population, despite it's ostensibly superficial focus, BDD has one the highest rates of suicide of any psychiatric disorder. It's the more extreme peak of a wide based pyramid of body-image concerns affecting a very large proportion of the population. Almost all of us will have some aspect of our appearance we dislike. Problems occur when people treat their body like an ‘aesthetic object’ - as an artist might approach their work. So beyond being too fat or ‘not toned enough’, individuals can develop specific complaints about ‘flaws’ in areas of their body such as: the face, nose, hair and skin.

In the workplace, appearance anxiety can be triggered when it's least helpful: a job interview, a date, an important meeting, a presentation. Preoccupation with ones appearance can be highly distracting and get in the way of mental focus upon important tasks. It can reduce confidence and increase self-consciousness, in turn impairing interpersonal effectiveness. I propose that the coach who has a more in-depth understanding of these issues will be more effective.

However, here are a few commonly held myths about body-image problems that both the public and healthcare professionals (and I'd expect therefore coaches) are prone to:

- appearance concerns are resolvable only through physical changes (surgery, fillers, Botox, weight loss, hitting the gym etc.);
- these physical changes are quick, easy, and produce reliable results;



- physical changes produce not only beneficial physical results, they yield emotional and psychological benefits.

It only takes a moment of consideration to realise that the above assumptions may not be wholly accurate.

In our society there is a tendency to blame the media, social media, 'selfie-culture', photo-shopped images in magazines, misogyny and so on. 'The good place' actress, Jameia Jamil, has recently been very vocal in interviews about the ills of photoshop and the fad diet products promoted by celebrities. She's right, of course, that these processes are not helpful, but focusing upon the media as a source of body-image dissatisfaction does not go deep enough. Blaming the media and wider society does not empower the individual to improve their body image. Jamil's 'I Weigh' campaign, in which people are encouraged to 'measure' and share numerous personal characteristics, not their bodyweight, is a step in the right direction but arguably still not deep enough.

Research suggests that only around 15% of our body-image is made up from what we see in the mirror. That leaves a very large space for psychological factors. Understanding this is relevant to us all, and great news for those of us who work with the mind to improve people's lives. The psychological factors affecting our body-image are not generally well-understood. We now know of several psychological mechanisms that contribute to the way we form our body-image: self-focused attention increases self-consciousness and promotes a greater sense of others thinking critically about us. Avoidance, concealing, camouflaging, seeking reassurance or verification all promote shame. Such 'safety-seeking behaviours'** also increase preoccupation and prevent fears from being tested. Criticising, scrutinising, and especially comparing (to others, or to an ideal in our minds-eye), drive greater body-dissatisfaction.

Many people are reluctant to come forward with their appearance anxiety for fear of being viewed as vain. This concern reflects a core fear that drives appearance concerns for many; the fear of being ridiculed, rejected or humiliated. One of the things that we've learned from our research on BDD is 'if you don't ask you don't get'. Asking the question 'Some people are very bothered by the way they feel about their appearance. Is this a problem for you?' can be very powerful in bringing appearance sessions out in a session.



The coach can help their coachee by helping them to understand the psychological components of appearance anxiety and to systematically tackle them: identifying the sorts of appearance-related thoughts they might have, and practicing detached observation from them when they arise; counteracting self-consciousness by redirecting ones attention toward the outside world and 'interrogating the environment'; encouraging coachees to dropping safety behaviours and especially to stop comparing. The aim is to reduce anxiety, shame and preoccupation so that the coachee has greater freedom to focus on valued pursuits.

Of course, our desires to look good, express our personality, dress according to a role or event, and to be found attractive are all perfectly natural. Taking an interest in one's appearance is part of self-care and can even be fun! However, taking care of your body-image: how you *feel* you look, how *you* see yourself in your mind's eye, is more complicated than what you see in the mirror.

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***Body Dysmorphic Disorder Foundation:** <https://bddfoundation.org/>. The BDD Foundation is the world's only charity exclusively devoted to body dysmorphic disorder.

****Safety behaviours** (also known as safety-seeking behaviours) are coping behaviours used to reduce anxiety and fear when the user feels threatened. ¹An example of a safety behaviour in social anxiety is to think of excuses to escape a potentially uncomfortable situation. ²

¹ Salkovskis, P. M. (1991). The importance of behaviour in the maintenance of anxiety and panic: A cognitive account. *Behavioural Psychotherapy*, 19(1), 6–19

² Cuming, S., Rapee, R. M., Kemp, N., Abbott, M. J., Peters, L., & Gaston, J. E. (2009). A self-report measure of subtle avoidance and safety behaviors relevant to social anxiety: Development and psychometric properties. *Journal of Anxiety Disorders*, 23(7), 879–883