



Predictors of Body Dissatisfaction among Young Female Adults: The Roles of Appearance Comparison and Interoceptive Sensibility

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Abstract

This is a frequent psychological issue that young women face and is associated with some harmful mental health and body image consequences. The current research tested appearance comparison and interoceptive sensibility as predictors of body dissatisfaction in young female adults. The correlational research design was cross-sectional, and data were collected on 287 female participants aged between 18 and 30 years. The participants were given standardized self-report measures: the Physical Appearance Comparison Scale-Revised, the Multidimensional Assessment of Interoceptive Awareness, and the Body Shape Questionnaire. Correlation analysis (Pearson correlation analysis) revealed that the appearance comparison was significantly and positively correlated with body dissatisfaction, and interoceptive sensibility showed a small positive relationship with body dissatisfaction. The hierarchical multiple regression was further conducted following the control of age, BMI, socioeconomic status, social media use, history of dieting, and physical activity. The last model accounted 38.1% of the variance in body dissatisfaction. Appearance comparison was found to be the best predictor of body dissatisfaction, $\beta = .546$, $p = .001$; however, interoceptive sensibility did not significantly predict body dissatisfaction, $p = .955$. The dieting history also continued to be a major predictor in the final model. The results have indicated that appearance-based comparison is a key element in body dissatisfaction in young female adults. Though interoceptive sensibility was found to be weakly related to body dissatisfaction at the correlational level, it did not significantly predict body dissatisfaction after appearance comparison and demographic/lifestyle factors were taken into consideration. These results indicate the need to target maladaptive appearance comparison and dieting-related issues in body image interventions with young women.

Keywords: Appearance Comparison, Body Image Dissatisfaction, Interoceptive Sensibility, Young Women

Introduction

Body dissatisfaction has been an enduring issue of research on body image, and it is especially relevant in the case of young women. It is defined as negative judgments towards the body shape, weight, or overall appearance (Naraindas et al., 2025). Though female populations often consider dissatisfaction with appearance normal, it has significant psychological implications and has been associated with eating pathology, depressive symptoms, and a decrease in psychological well-being (Bijsterbosch et al., 2023). This stage of development may be particularly susceptible to young women because this developmental phase is characterized by

the increased level of self-evaluation, peer comparison, and exposure to the sociocultural appearance ideals. Appearance-based social comparison is one of the most reliable sociocognitive correlates of the body dissatisfaction. Based on the social comparison theory, appearance comparison involves a comparison of one own physical appearance with others especially when objective standards of self-assessment are not clear. Nowadays, these kinds of comparisons are quite common with respect to peers, media celebrities, and the perfect online images, and are often unrealistic. It has been repeatedly demonstrated that the increased appearance comparison is correlated with increased body dissatisfaction, negative affect, and eating-related concerns (Barbierik et al., 2023; Coelho et al., 2023). The evidence provided by Pakistani young women also demonstrates that the social comparison is positively related to body dissatisfaction implying that the issue of body image concerns that are rooted in social comparison is also relevant when considered in the context of local culture (Khan et al., 2023). In conjunction with these external evaluative processes, recent work has created an interest in internal bodily awareness as a factor of relevance in body image disturbance. Interoceptive sensibility is the subjective awareness and interpretation of internal body signals, including hunger, fullness, heartbeat, breathing and bodily discomfort. Theoretically, a lack of reliance on the body in the form of internal body cues may lead to an increase in dependence on external appearance standards in the process of body evaluation. The empirical evidence suggests the applicability of interoceptive mechanisms in body image studies. Indicatively, Naraindas and Cooney (2023) reported that female adulthood was associated with lower body listening, self-regulation, and body trusting among women with a higher body dissatisfaction. Naraindas et al. (2025) found that women with a higher body dissatisfaction were associated with lower body listening, self-regulation, and body trusting. In the same manner, Bijsterbosch et al. (2023) reported that the lower levels of the specific aspects of interoceptive awareness were linked to the higher level of body dissatisfaction among adolescent girls.

Objectification theory offers us a good rubric to help incorporate these external and internal processes. In this view, the sociocultural pressures motivate women to take the observer role to their bodies which results to self-objectification and body surveillance. These external body assessments can elevate the level of body dissatisfaction and undermine the concern about internal body conditions. There is meta-analytic evidence of positive relationships between self-objectification, body shame, and body dissatisfaction, and the importance of external monitoring of body in women with body image issues (Saunders et al., 2024). According to this framework, the way women compare their appearance with that of other people may not be the only factor that might contribute to the development of body dissatisfaction in women. Although increasing evidence has now been provided to link appearance comparison with interoceptive sensibility to body dissatisfaction, these constructs have been frequently studied individually. Consequently, there is less known about their relative contribution in consideration of the two. This difference is significant since the appearance comparison is an externally oriented evaluative process whereas interoceptive sensibility is internally oriented body awareness. A comparison of both variables in the same model might provide an insight into whether the body dissatisfaction among young women is more strongly connected to external appearance comparison, internal bodily awareness, or both. The current research thus tested appearance comparison and interoceptive sensibility as the predictors of body dissatisfaction in young female adults. It was anticipated based on the previous literature that both appearance comparison and interoceptive sensibility would be positively related to body dissatisfaction. It was also anticipated that an appearance comparison and interoceptive sensibility would have predictive value on body dissatisfaction with appearance comparison being expected to have a stronger predictive role.

Method

Research Design

The quantitative and cross-sectional correlational research design was used in this study to determine the relationship between appearance comparison and interoceptive sensibility and body dissatisfaction among young adult women. The quantitative design was suitable since the study was supposed to measure quantifiable psychological variables through the use of standardized self-report scales and statistical analysis. The correlational design is typically employed when the researchers want to study associations and prediction relationships among variables that occur naturally without manipulating the events of the study (Creswell and Creswell, 2018). It was cross-sectional in nature since the data were obtained at a single time point among the participants. Appearance comparison and interoceptive sensibility were considered as predictor variables, whereas body dissatisfaction was regarded as the outcome variable.

Participants and Sampling

The participants of the study were young adult women aged between 18 and 30 years. A convenience sampling method was employed to recruit participants using online platforms. In research in the fields of psychology and social sciences, convenience sampling is often used when selecting participants based on their availability and readiness to participate (Etikan et al., 2016). This sampling technique was deemed to be suitable since the target population was composed of young adult women, who could be reached through university networks and social media. The last sample was composed of 287 female members. All the participants were females. The majority of the participants were aged 18-21 years, then there were 22-30 years and 26-30 years. The respondents comprised of university/college students and employed women. The inclusion criteria were that the participants had to be female, aged between 18 and 30 years and had to be willing to participate voluntarily. Those who failed these requirements would be excluded out of the study. It was felt that the sample size was sufficient to carry out planned correlational and regression analyses. In the case of regression-based research, it is recommended to use larger samples to obtain stable estimates and reduce sampling error (Tabachnick and Fidell, 2019). Suggested general rules of thumb to determine the minimum sample size in regression analysis include: $N > 50 + 8m$ to test multiple correlations, where m is the number of predictors. The current sample of 287 participants was more than this minimum number and was hence deemed to be adequate to investigate the predictive relationships among the research variables.

Measures

Standardized self-report questionnaires were used to gather data on appearance comparison, interoceptive sensibility and body dissatisfaction. The greater the score in each scale, the greater the levels of the respective construct.

Demographic Information Sheet

The information about the participants' age, gender, body mass index category, education level, socioeconomic status, area of residence, physical activity level, dieting history, relationship status, social media usage, and mental health history was collected with the help of a demographic information sheet.

Physical Appearance Comparison Scale-Revised

Appearance comparison was measured using the Physical Appearance Comparison Scale-Revised (PACS-R). The PACS-R was developed by Schaefer and Thompson (2014) to assess the tendency to compare one's physical appearance with others across different contexts. Appearance comparison is considered an important psychological process in body image disturbance because individuals who frequently compare their appearance with others may be more vulnerable to dissatisfaction with their own body (Schaefer & Thompson, 2014). In the present study, the scale consisted of 11 items. Participants responded using a 5-point Likert scale, ranging from 1 = Never to 5 = Always. Possible total scores ranged from 11 to 55, with higher scores indicating greater appearance comparison. In the present sample, the scale demonstrated excellent internal consistency, with Cronbach's alpha of $\alpha = .923$.

Brief Multidimensional Assessment of Interoceptive Awareness-2

Interoceptive sensibility was measured using the Brief Multidimensional Assessment of Interoceptive Awareness-2 (Brief MAIA-2). The original MAIA was developed to assess multiple dimensions of interoceptive awareness, including awareness of internal bodily sensations and self-regulation of bodily attention (Mehling et al., 2012). The revised MAIA-2 was later developed to improve measurement properties, and the 24-item Brief MAIA-2 was validated as a shorter measure of multidimensional interoceptive sensibility (Mehling et al., 2018; Rogowska et al., 2023). The Brief MAIA-2 has been reported as a reliable and valid tool for measuring interoceptive sensibility in non-clinical populations. In the present study, the scale consisted of 24 items. Participants responded using a 5-point Likert scale, ranging from 1 = Never to 5 = Always. Possible total scores ranged from 24 to 120, with higher scores indicating greater interoceptive sensibility. The original total score was retained for analysis based on the reliability results in the present sample. The scale demonstrated excellent internal consistency, with Cronbach's alpha of $\alpha = .916$.

Body Shape Questionnaire-16B

Body dissatisfaction was measured using the Body Shape Questionnaire-16B (BSQ-16B). The original Body Shape Questionnaire was developed by Cooper et al. (1987) to assess concerns about body shape, particularly concerns commonly associated with body image disturbance and eating-related difficulties. The BSQ short forms, including the 16-item versions, were later derived by Evans and Dolan (1993) and demonstrated excellent internal consistency. In the present study, the scale consisted of 16 items. Participants responded using a 6-point Likert scale, ranging from 1 = Never to 6 = Always. Possible total scores ranged from 16 to 96, with higher scores indicating greater body dissatisfaction. The scale demonstrated excellent internal consistency in the present sample, with Cronbach's alpha of $\alpha = .942$.

Reliability of Study Measures

Internal consistency was examined using Cronbach's alpha. Cronbach's alpha is widely used to assess the internal consistency of multi-item scales, with higher values indicating greater consistency among scale items (Cronbach, 1951; Tavakol & Dennick, 2011). All three measures demonstrated excellent reliability in the present sample.

Procedure

The questionnaire was designed with the help of Google Forms after the research supervisor approved the questionnaire. The online survey featured an informed consent section, demographic questions, the standard measures of appearance comparison, interoceptive

sensibility, and body dissatisfaction. The survey link was distributed among potential participants via WhatsApp, Instagram and personal academic networks. Female young adults aged 18–30 years were invited to participate. The respondents were requested to read the instructions attentively prior to filling out the questionnaire. They were told that their participation was not compulsory, their responses would be kept confidential and that they could pull out of participation at any time before they submitted the form. The questionnaire took about 8-10 minutes to fill it in. Once the data was collected, downloading of responses through Google forms and inputting into IBM SPSS statistics to screen and analyze the data.

Ethical Considerations

The research process was conducted following the ethical principles. Before participation, participants were aware of the aim of the study. All participants were informed and gave informed consent. The participation was optional, and the participants were free to withdraw before they could fill in their answers. No personal and identifiable data was obtained. Anonymity and confidentiality were ensured, and the data could only be used in terms of academic research. Data were kept in a safe place and could only be accessed by the researcher and supervisor.

Data Analysis

IBM SPSS Statistics was used to analyze the data. Descriptive statistics such as frequencies, percentages, means, standard deviations, skewness, and kurtosis have been calculated to provide a summary of demographic and key study variables. The internal consistency of the study measures was tested using the alpha of Cronbach. Pearson correlation analysis was conducted to examine the relationships among appearance comparison, interoceptive sensibility, and body dissatisfaction. Multiple regression analysis was used to examine whether appearance comparison and interoceptive sensibility predicted body dissatisfaction. Statistical significance was evaluated at $p < .05$. The assumptions of regression analysis were also examined. Normality was assessed through skewness, kurtosis, histogram, and normal P–P plot of standardized residuals. Linearity and homoscedasticity were examined using the scatterplot of standardized residuals against standardized predicted values. Multicollinearity was assessed using tolerance and variance inflation factor values, as recommended in regression analysis guidelines (Field, 2018; Tabachnick & Fidell, 2019).

Results

Table 1 Demographic Characteristic of Participants

Characteristic	Category	<i>n</i>	%
Gender	Female	287	100.0
Age group	18–21 years	150	52.3
	22–25 years	111	38.7
	26–30 years	26	9.1
Body mass index	Less than 16	30	10.5
	16–18.5	98	34.1
	18.5–25	88	30.7
	Other	71	24.7

Characteristic	Category	<i>n</i>	%
Education level	Undergraduate	209	72.8
	Postgraduate	52	18.1
	Other	26	9.1
Socioeconomic status	Low	9	3.1
	Middle	259	90.2
	High/Upper	19	6.6
Area of residence	Urban	160	55.7
	Semi-urban	73	25.4
	Rural	54	18.8
Physical activity level	Low/rare or no exercise	111	38.7
	Moderate, 1–3 times/week	153	53.3
	High, 4–6 times/week	23	8.0
Dieting history	Never dieted	214	74.6
	Previously dieted	51	17.8
	Currently dieting	22	7.7
Relationship status	Single	226	78.7
	In a relationship	30	10.5
	Married	31	10.8
Social media usage frequency	Less than 2 hours	46	16.0
	2–4 hours	90	31.4
	More than 4 hours	151	52.6
Mental health history	No diagnosed mental health condition	220	76.7
	History of diagnosed mental health condition	24	8.4
	Prefer not to disclose	43	15.0

Note. *N* = 287. Percentages are valid percentages.

The sample consisted of 287 young female adults. Most participants were aged 18–21 years (*n* = 150, 52.3%), followed by 22–25 years (*n* = 111, 38.7%) and 26–30 years (*n* = 26, 9.1%). Regarding BMI, 34.1% of participants were in the 16–18.5 category, 30.7% were in the 18.5–25 category, 10.5% were below 16, and 24.7% were classified in the “other” category. Most participants were undergraduate students (*n* = 209, 72.8%) and belonged to the middle socioeconomic group (*n* = 259, 90.2%). Over half of the sample (*n* = 160, 55.7%), lived in urban areas, and 25.4% lived in semi-urban areas, and 18.8% in rural areas. The majority of the participants engaged in moderate physical activity (*n* = 153, 53.3%), and most of the participants had never dieted (*n* = 214, 74.6%). Most participants were single (*n* = 226, 78.7%). The use of social media was high with 52.6% indicating over 4 hours of daily social media use. The majority of respondents (*n* = 220, 76.7%), claimed to have no history of a diagnosed mental health condition.

Table 2 Descriptive Statistics for Main Study Variables

Variable	<i>N</i>	Minimum	Maximum	<i>M</i>	<i>SD</i>	Skewness	Kurtosis
Appearance comparison	287	11.00	55.00	21.03	9.36	1.06	1.00
Interoceptive sensibility	287	25.00	120.00	78.41	17.86	-0.37	0.18
Body dissatisfaction	287	16.00	96.00	36.92	17.51	0.97	0.63

Note. *N* = 287. Interoceptive sensibility was represented by the original total score retained for the main analyses.

Table 2 shows descriptive statistics of the key variables of the study. The participants have reported a mean appearance comparison score of 21.03 (*SD* = 9.36) with the scores ranging between 11 and 55. The interoceptive sensibility score had a mean of 78.41 (*SD* = 17.86) and a range of 25 to 120. The average body dissatisfaction was 36.92 (*SD* = 17.51) with a range of 16-96. The values of skew and kurtosis were within the generally accepted ranges and the values did not show any severe deviation of normality of the main variables.

Table 3 Pearson Correlations among Main Study Variables

Variable	1	2	3
1. Appearance comparison	—		
2. Interoceptive sensibility	.247**	—	
3. Body dissatisfaction	.584**	.158**	—

Note. *N* = 287. *p* < .01, two-tailed.

The analysis of the relationships between appearance comparison, interoceptive sensibility, and body dissatisfaction was carried out by Pearson correlation analysis. Interoceptive sensibility was positively and significantly associated with appearance comparison, $r(285) = .247$, $p < .001$, which indicated that the higher the appearance comparison the higher the interoceptive sensibility. Appearance comparison was also positively and strongly associated with body dissatisfaction, $r(285) = .584$, $p < .001$, suggesting that participants with higher appearance comparison reported greater body dissatisfaction. Interoceptive sensibility was positively and significantly associated with body dissatisfaction, $r(285) = .158$, $p = .007$, although the magnitude of this association was small. These findings provided preliminary support for examining appearance comparison and interoceptive sensibility as predictors of body dissatisfaction in the regression model.

Table 4 Hierarchical Multiple Regression Predicting Body Dissatisfaction

Predictor	<i>B</i>	<i>SE B</i>	β	<i>t</i>	<i>p</i>	95% <i>CI</i> for <i>B</i>	<i>VIF</i>
Step 1: Control variables							
Age	.663	1.559	.025	.425	.671	[-2.406, 3.732]	1.060
BMI	1.568	1.060	.086	1.480	.140	[-.518, 3.655]	1.051
Socioeconomic status	-.685	3.189	-.012	-.215	.830	[-6.962, 5.593]	1.001
Social media usage	4.043	1.342	.172	3.013	.003	[1.402, 6.685]	1.017
Dieting history	6.513	1.654	.228	3.938	< .001	[3.257, 9.768]	1.047
Physical activity	1.418	1.643	.050	.863	.389	[-1.816, 4.651]	1.028

Predictor	<i>B</i>	<i>SE B</i>	β	<i>t</i>	<i>p</i>	95% <i>CI for B</i>	<i>VIF</i>
Step 2: Main predictors							
Age	.466	1.303	.017	.358	.721	[-2.099, 3.031]	1.065
BMI	.909	.892	.050	1.018	.309	[-.848, 2.666]	1.071
Socioeconomic status	-2.873	2.669	-.051	-1.076	.283	[-8.127, 2.381]	1.009
Social media usage	1.418	1.143	.060	1.240	.216	[-.833, 3.669]	1.062
Dieting history	4.769	1.390	.167	3.432	.001	[2.033, 7.504]	1.064
Physical activity	.509	1.372	.018	.371	.711	[-2.192, 3.211]	1.032
Appearance comparison	1.022	.094	.546	10.868	< .001	[.837, 1.207]	1.135
Interoceptive sensibility	.003	.048	.003	.056	.955	[-.092, .098]	1.091

Note. $N = 287$. Outcome variable = body dissatisfaction. Step 1 included age, BMI, socioeconomic status, social media usage, dieting history, and physical activity. Step 1: $R^2 = .103$, adjusted $R^2 = .084$, $F(6, 280) = 5.358$, $p < .001$. Step 2 added appearance comparison and interoceptive sensibility. Step 2: $R^2 = .381$, adjusted $R^2 = .363$, $F(8, 278) = 21.384$, $p < .001$. $\Delta R^2 = .278$, $\Delta F(2, 278) = 62.411$, $p < .001$. VIF = variance inflation factor.

Prior to conducting the hierarchical multiple regression analysis, assumptions were examined. Visual inspection of the scatterplot of standardized residuals against standardized predicted values showed no clear pattern, suggesting that the assumptions of linearity and homoscedasticity were met. The histogram and normal P-P plot of standardized residuals indicated that residuals were approximately normally distributed. Multicollinearity was not a concern, as all VIF values were below 1.14. A hierarchical multiple regression analysis was conducted to examine whether appearance comparison and interoceptive sensibility predicted body dissatisfaction after controlling for age, BMI, socioeconomic status, social media usage, dieting history, and physical activity. In Step 1, the control variables significantly predicted body dissatisfaction, $R = .321$, $R^2 = .103$, adjusted $R^2 = .084$, $F(6, 280) = 5.358$, $p < .001$, explaining 10.3% of the variance. In this step, social media usage ($B = 4.043$, $SE = 1.342$, $\beta = .172$, $p = .003$) and dieting history ($B = 6.513$, $SE = 1.654$, $\beta = .228$, $p < .001$) were significant positive predictors of body dissatisfaction. In Step 2, appearance comparison and interoceptive sensibility were added to the model. The final model was significant, $R = .617$, $R^2 = .381$, adjusted $R^2 = .363$, $F(8, 278) = 21.384$, $p < .001$, explaining 38.1% of the variance in body dissatisfaction. The addition of appearance comparison and interoceptive sensibility accounted for a significant increase in explained variance, $\Delta R^2 = .278$, $\Delta F(2, 278) = 62.411$, $p < .001$. In the final model, appearance comparison emerged as the strongest predictor of body dissatisfaction, $B = 1.022$, $SE = .094$, $\beta = .546$, $t = 10.868$, $p < .001$, 95% CI [.837, 1.207]. Dieting history also remained a significant positive predictor, $B = 4.769$, $SE = 1.390$, $\beta = .167$, $t = 3.432$, $p = .001$, 95% CI [2.033, 7.504]. Interoceptive sensibility was not a significant predictor of body dissatisfaction, $B = .003$, $SE = .048$, $\beta = .003$, $t = .056$, $p = .955$, 95% CI [-.092, .098].

Discussion

The current research study has compared appearance and interoceptive sensibility as predictors of body dissatisfaction among young female adults but has taken into consideration the relevant demographic and lifestyle factors. The results indicated that appearance comparison was a significant and positive predictor of body dissatisfaction and it was found to be the strongest predictor in the regression model. Interoceptive sensibility had bivariate positive small

association with body dissatisfaction, but did not predict body dissatisfaction independently after appearance comparison and other covariates were taken into account. History of dieting was also a big predictor in the final model. The results in general indicate that external appearance-based comparison could be more strongly related to the body dissatisfaction in this sample than general interoceptive sensibility. The high predictive validity of appearance comparison is in line with a significant body of research that appearance comparison-based processes are dominant in causing body dissatisfaction. An example is Coelho et al. (2023), who found that appearance comparisons among female university students were related to a higher body dissatisfaction, negative affect, and eating pathology. In a similar fashion, it was reported that social appearance comparison aided in explaining the relationship between internalization of appearance ideals and body dissatisfaction (Barbierik et al., 2023). The current results are also in line with evidence on Pakistani young females that revealed that social comparison has a positive relation with body dissatisfaction and can moderate the relationship between body surveillance and dissatisfaction (Khan et al., 2023). By demonstrating that appearance comparison is not just correlated with body dissatisfaction on a simple correlational level but has a strong independent relationship, the current study contributes to the evidence that appearance comparison is not just correlated with body dissatisfaction on a simple correlational level but has a strong independent relationship.

This observation can be explained using the social comparison theory. When people compare their own bodies to the perceived ideal body, they may feel more aware of the perceived differences between their own bodies and the ideal body. Such comparisons can be particularly destructive to young women since appearance is frequently socially stressed and inextricably linked to self-esteem. Compared to the traditional social settings, the source of comparison in modern social environments is not only limited to direct peer or close acquaintances but also includes the idealized images that are propagated via media and social networking sites. These circumstances can raise the rate and severity of upward appearance comparisons, which, in turn, can enhance dissatisfaction with oneself and body image. The results also coincide with the objectification theory, which states that women are generally socialized to perceive their bodies as seen by an external observer. This externalized orientation may augment the body surveillance, body shame, and dissatisfaction. Recent meta-analytic findings support positive relationships between self-objectification, body shame and body dissatisfaction (Saunders et al., 2024). The appearance comparison in this context might be viewed as a single behavioral and cognitive expression of self-objectification: the body is judged not so much in terms of comfort, functionality or experience but in terms of its appearance against that of other people. The current results thus support the role of external evaluative processes to the comprehension of body dissatisfaction among young women. Conversely, interoceptive sensibility was not the predictor of body dissatisfaction in the regression analysis. The interpretation of this result is to be cautious. At the bivariate level, interoceptive sensibility was positively related to body dissatisfaction, although this relationship disappeared when appearance comparison and covariates were added. This indicates that interoceptive sensibility could be somewhat related to body dissatisfaction, although it does not clarify special variance on top of the influential role of appearance comparison. Practically, the dissatisfaction of young women with their bodies in this sample seemed to be related more to their comparison of their appearance with others than to general awareness of internal bodily conditions.

This observation somewhat contrasts with past research which has focused on the associations between interoceptive mechanisms and body image disturbance. Naraindas et al. (2025) reported that women with high body dissatisfaction were characterized by lower body listening, self-

regulation, and body trusting. Naraindas et al. (2023) reported that body image disturbance was associated with interoceptive sensibility across female adulthood. Similar findings were reported by Bijsterbosch et al. (2023), who also found that the lower the levels of certain facets of interoceptive awareness, the higher the body dissatisfaction in adolescent girls. Among the possible reasons why these findings and the current study are different is the fact that interoceptive sensibility is multidimensional. The overall score can mask the impact of certain elements like body trust, emotional awareness, self-regulation, or body listening. Some aspects can be protective, as the other aspects can have weaker or more complex relationships with body dissatisfaction. Future research should thus consider interoceptive subscales individually as opposed to using only a total score. The other likely reason is that interoceptive sensibility might not be a direct predictor of body dissatisfaction. Rather, it can indirectly affect body image, by influencing how individuals react to external appearance pressures. Indicatively, those who harbor less trust in external body signals could be increasingly reliant on external norms when assessing their bodies. Appearance comparison can also be the more immediate predictor in such cases and interoceptive difficulties can serve as background vulnerability. This meaning is aligned to the objectification-based approaches, which indicate that external monitoring of body can result in less focus on internally perceived bodily experiences. Nonetheless, this potential needs to be further tested with the use of mediation, moderation, or longitudinal designs.

The history of diet was also a large predictor of body dissatisfaction in the final model. This observation has a theoretical meaning in that dieting is not only a reaction to body dissatisfaction but may also serve to perpetuate dissatisfaction. People who have a history of dieting might be more prone to checking their weight and shape, comparing their bodies with those of others and comparing themselves against restrictive body ideals. Dieting can thus serve to uphold body dissatisfaction by maintaining the focus on the perceived flaws and discrepancies between the current and ideal body. The importance of the history of dieting in the ultimate model implies that the body dissatisfaction, in the case of young women, could be directly linked not only to comparison-related thinking but also to the experience of weight control. The rest of the demographic and lifestyle factors, such as age, BMI, socioeconomic status, social media use, and physical activity were not important predictors in the final model. Usage of social media was high prior to the addition of appearance comparison but lost its significance in the last phase. This trend indicates that the impact of using social media may not be the amount of time they spend browsing the internet but the processes of comparison that people engage in when they are exposed to social media. That is, the use of social media can provide an opportunity to compare appearance but the more psychologically relevant variable may be comparison. This meaning is in line with literature indicating that exposure to idealized appearance material is most detrimental when it promotes upward comparison and self-judging. The results have a number of theoretical implications. First, they substantiate the main role of social comparison processes in body dissatisfaction. Appearance comparison was also a powerful predictor even in a model that incorporated demographic, behavioral and interoceptive variables. Second, the results indicate that the role of interoceptive sensibility might be more subtle than a direct relationship to dissatisfaction. Instead of relying on the assumption that greater or lesser interoceptive sensibility is directly predictive of body dissatisfaction, future models should take into consideration specific aspects of interoceptive senses and how these aspects may interact with other external evaluative processes. In the last, the findings support an integrated notion of body dissatisfaction whereby external appearance evaluation seems to have a more influential role whereas internal bodily awareness may have a more conditional or indirect role.

There are also practical implications of the study. Direct comparison of appearance can be targeted by interventions delivered to young women. The cognitive-behavioral and psycho-educational interventions may assist individuals to recognize the triggers of comparison, to challenge unrealistic appearance standards and to minimize habitual upward comparisons. Media literacy interventions can also prove effective as they will assist young women to critically assess idealized and edited body images. Considering the important role of the history of dieting, prevention interventions should also focus on restrictive dieting, weight-focused self-evaluation, and how dieting may support body dissatisfaction. In the current study, interoceptive sensibility alone did not significantly predict body dissatisfaction; however, body-awareness approaches could still be useful as an adjunctary measure, especially when they are geared towards functionality of the body, level of trust in the body, and emotional control as opposed to evaluations of appearance.

There are a number of limitations that ought to be taken into account. First, the cross-sectional design does not allow any causal inferences. The appearance comparison appeared to have significant statistical predictive validity in relation to the body dissatisfaction, nevertheless, it can not be concluded that appearance comparison is one of the main causes of body dissatisfaction. Also, perhaps, dissatisfied individuals with their bodies compare their looks more frequently. Longitudinal studies are required to help determine the course of these relationships. Second, the research was based on self-report measures, which could be influenced by the response bias or social desirability. Third, the condition of interoceptive sensibility was investigated with the help of a total score, which could have concealed the role of particular interoceptive dimensions. Further studies are needed to consider the subscales like body listening, self-regulation, emotional awareness, and body trust as independent entities. Fourth, the sample was limited to young female adults and this limits the generalizability to men, adolescents, older women, and clinical populations. Lastly, a few demographic and lifestyle factors such as BMI, and use of social media were measured at the nominal level, which could have compromised the accuracy of these predictors.

To sum up, the current research study has established appearance comparison as a very powerful predictor of body dissatisfaction in young female adults. Though interoceptive sensibility had weak correlational associations with body dissatisfaction, it did not significantly predict body dissatisfaction when appearance comparison and other factors were taken into consideration. Another important predictor was the dieting history. These results indicate that appearance-related outward comparison could be a more central focus to body dissatisfaction among young women than in general interoceptive sensibility. Interventions targeted to diminish body dissatisfaction should thus pay specific attention to maladaptive comparison processes, dieting-related concerns, and the sociocultural pressures that prompt women to evaluate their bodies by external standards.

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