Appearance-Related Social Media Consciousness and Body Dysmorphic Disorder Symptoms among Filipino Adolescents

Pumihic, Lester G., Franco, Dejannes Marie S., Bulatao, Jyrus Alain M., Mendoza, Renna Iana R., and Divina, Leslie Doris M., MAEd, RPh, RGC

ABSTRACT

In today's digital age, where social media significantly influences self-image, concerns about body appearance have become increasingly prominent, particularly among adolescents. This study aimed to explore the psychological implications of negative self-perception, focusing on Body Dysmorphic Disorder (BDD) symptoms as a clinically relevant aspect of body image disturbance. Specifically, it examined the correlation between Appearance-related Social Media Consciousness (ASMC) and BDD symptoms in terms of Total Appearance Anxiety (AAI) and its subscales—threat monitoring, camouflaging, and avoidance—among Filipino adolescents at Saint Mary's University Senior High School, and the Junior High School and Science High School. Using a quantitative research design, data were collected via self-administered questionnaires distributed to the target participants. Results revealed a high positive correlation between ASMC and BDD symptoms. Age and sex significantly influenced these concerns, with females and older adolescents reporting higher levels of ASMC and BDD symptoms. Conversely, socioeconomic status had no impact, highlighting the universal nature of these issues across economic backgrounds. Findings suggest that while Filipino adolescents exhibit moderate levels of ASMC and mild BDD symptoms, the upward trend among females and older age groups indicates a growing vulnerability to heightened body image concerns exacerbated by social media influence and the potential development of more severe BDD symptoms.

Keywords: body image concerns, internet, photo-based social media, psychological well-being, teenagers

INTRODUCTION

In contemporary global society, issues regarding body image have attained significant prominence, affecting individuals across diverse demographics. These concerns mainly emanate from societal norms dictating adherence to unattainable beauty standards, thereby prompting individuals to carry persistent anxieties regarding their appearance, weight, and bodily proportions. This preoccupation extends beyond mere physical attributes and encompasses multifaceted dimensions of the human form (Rodgers et al., 2023).

Body image dissatisfaction, although not classified as a mental health disorder itself, poses a considerable risk factor for mental health issues, including Body Dysmorphic Disorder (BDD) (*Body Image Report: Introduction*, 2019). While body image disturbance is relatively common and can vary in severity, BDD represents a more extreme manifestation of these issues. Hence, this study seeks to contribute to a deeper understanding of the psychological consequences of a negative self-perception by shifting focus from general body image concerns to the more specific and clinically significant domain of BDD.

BDD is a psychological condition characterized by significant distress caused by perceived imperfections in one's physical appearance (Craythorne et al., 2023). It is characterized by three common symptom clusters. The first cluster, threat monitoring, involves heightened awareness and vigilance toward appearance-related threats, such as frequent mirror-checking or scrutinizing one's appearance. The second cluster, camouflaging, encompasses strategies aimed at concealing perceived flaws, including the use of specific clothing or heavy makeup. The third cluster, avoidance, pertains to efforts to evade situations or activities that trigger appearance-related anxiety, often resulting in social withdrawal or

avoiding mirrors. Together, these clusters provide a structured framework for understanding the behavioral and cognitive patterns associated with BDD (Appearance Anxiety Inventory, 2021).

The *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition* (DSM-5) identifies adolescence as the typical period when BDD begins, with the mean age of onset around 16-17 years and the most prevalent onset occurring between 12-13 years. Adolescents with onset before age 18 are more likely to attempt suicide, exhibit higher comorbidity with major depressive disorder, and experience a gradual onset of symptoms compared to adults (American Psychiatric Association, 2013). These findings emphasize the importance of examining adolescence as a critical stage for the development of BDD.

The pervasive influence of social media amplifies the prevalence of BDD among adolescents even more. Haddad (2022) indicates a connection between body dysmorphic disorder and its primary symptom, body dissatisfaction, with the use of social media. Consequently, nowadays, people are altering their physical appearances and online personas to align with technological advancements and attract more followers. But then the edited, manipulated, and meticulously crafted photos have raised beauty standards to an unrealistic level, rendering such perfection unattainable for anyone. This behavior leads to psychological issues such as BDD (Agnihotri, 2022).

The rise of BDD coincides with the widespread use of communication technology. Existing data suggests that frequent utilization of social media platforms represent a notable risk factor in the development of BDD symptoms (Ateq, 2024). Reyes et al. (2024) explored this phenomenon in a study on the relationships between BDD symptoms, body acceptance, and selfie behavior among Filipinos. Their findings reveal that individuals with BDD symptoms are more likely to engage in compulsive photo-related behaviors, such as frequent selfie-taking and photo manipulation, due to their preoccupation with achieving a socially acceptable appearance.

Given the prevalence of these concerns among adolescents, it becomes imperative to investigate the specific impact of social media on BDD within this demographic. This research seeks to deepen understanding of how social media may exacerbate BDD symptoms, contributing to early detection and intervention strategies. By exploring the connections between social media and BDD, the study aims to raise awareness about the disorder's complexities and support the development of more effective treatment approaches. Ultimately, this study provides valuable insights for improving interventions, promoting positive body image, and advancing mental health support systems for adolescents.

To achieve these goals, the study first determined the profile of the respondents in terms of age, sex, and socioeconomic status. Next, the level of Appearance-related Social Media Consciousness (ASMC) among the participants was determined. Additionally, the extent of body dysmorphic disorder symptoms among the participants in terms of Total Appearance Anxiety Inventory (AAI), threat monitoring, camouflaging, and avoidance was investigated as well the existence of significant difference in the level of ASMC among the participants when grouped according to their profile variables, significant difference in the extent of body dysmorphic disorder symptoms in terms of Total AAI among the participants when grouped according to their profile variables, and significant relationship between ASMC and body dysmorphic disorder symptoms in terms of Total AAI among Filipino adolescents.

METHODOLOGY

This study employed a quantitative approach, utilizing descriptive-comparative-correlational analysis. This design was used considering that the main purpose of the study is to determine the level of appearance-related social media consciousness and the extent of body dysmorphic symptoms among the respondents, as well as to investigate

their relationship. Meanwhile, comparative analysis typically involves describing and explaining the similarities and differences in outcomes (Iranifard & Roudsari, 2022).

This study was conducted at Saint Mary's University (SMU) Senior High School (SHS), and Junior High School (JHS) and Science High School in Bayombong, Nueva Vizcaya. The sample consisted of 324 students, with an equal distribution of 162 students from Saint Mary's University (SMU) Senior High School (SHS), and Junior High School (JHS) and Science High School. The researchers established the sample size to represent the current academic year's population, comprising 949 students from the SHS and 749 students from the JHS and Science High School, totaling 1,698 students. The sample size was computed using Slovin's Formula with a 5% margin of error.

The researchers employed multi-stage stratified random sampling to ensure a representative sample from both SMU SHS, and JHS and Science High School. This method is multi-stage as it incorporates several layers of stratification.

The questionnaire is composed of three sections. The first section gathered demographic data, including age (early, middle, and late adolescent), sex (male or female), and socioeconomic status (income is little, sometimes not enough for my family; income is sufficient only for my family needs, can hardly save; income is very sufficient for my family needs, can save; have much money and properties that we need, can buy whatever we like). The second section contained the Appearance-Related Social Media Consciousness (ASMC) Scale, developed by Choukas-Bradley et al. (2020). This scale measured the extent to which individuals are aware of how attractive they might appear to a social media audience. It includes 13 items on a Likert scale ranging from 1 (Never) to 7 (Always), demonstrating high internal consistency (Cronbach's $\alpha = .92$), making it a suitable tool for assessing ASMC in adolescents. The third section included the Appearance Anxiety Inventory (AAI), developed by Veale et al. (2014), which measures body dysmorphic symptoms. The AAI is a 10-item self-report scale assessing both cognitive and behavioral aspects of body image anxiety and body dysmorphic disorder (BDD). It includes three subscales: threat monitoring (items 1, 2, 4, 6, 8) for vigilance toward appearance-related threats, camouflaging (items 5, 9) for strategies to conceal perceived flaws, and avoidance (items 3, 7, 10) for avoidance of activities due to appearance concerns. The AAI demonstrated high internal validity with a Cronbach's Alpha of 0.86 (Buchanan, 2024).

The gathered data were analyzed using the Statistical Package for Social Sciences (SPSS Inc, 2012, Chicago, IL). Descriptive statistics were used to summarize the sample characteristics, including means, standard deviations, and frequencies, providing an overview of the main variables (Appearance-related Social Media Consciousness (ASMC) and body dysmorphic symptoms in terms of Total Appearance Anxiety Inventory (AAI)). For inferential statistics, a One-way Analysis of Variance (ANOVA) was used to test significant differences among the variables. Additionally, a two-sample t-test was performed to compare the mean differences between sexes. Correlation analysis was also conducted to explore relationships between ASMC and body dysmorphic disorder symptoms in terms of Total AAI.

RESULTS AND DISCUSSION

Section 1. Profile of the Respondents

Table 1

Profile of the Respondents in Terms of Age, Sex, and Socioeconomic Status

Variables	Groups	f (n=324)	%
Age	Early Adolescent	121	37.35
	Middle Adolescent	133	41.05

	Late Adolescent	70	21.60
Sex	Male	116	35.80
	Female	208	64.20
Socioeconomic Status	Income is little, sometimes not enough for my family	17	5.25
	Income is sufficient only for my family needs, can hardly save	76	23.46
	Income is very sufficient for my family needs, can save	209	64.51
	Have much money and properties that we need, can buy whatever we like	22	6.79

Table 1 presents the demographic profile of the respondents, highlighting their age, sex, and socioeconomic status. The age distribution shows that the most of respondents belong to the "middle adolescent" category, with 133 participants representing 41.05% of the sample. This is followed by the "early adolescent" group, comprising 121 respondents or 37.35%. The "late adolescent" group has the smallest representation, with 70 respondents accounting for 21.60%. The sex distribution of the respondents indicates a predominantly female sample. Out of the 324 participants, 116 are male, comprising 35.80% of the total, while 208 are female, making up 64.20%. Regarding socioeconomic status, most respondents (64.51%) reported that their family income is sufficient to meet their needs and allows for savings. Another 23.46% indicated that their income is sufficient only for basic needs but does not permit savings. A smaller portion of respondents reported financial extremes, with 5.25% stating that their income is sometimes insufficient for their family's needs and 6.79% indicating that their families have significant financial resources, enabling them to acquire properties and luxuries.

Section 2. Level of Appearance-related Social Media Consciousness (ASMC) Among Filipino Adolescents

Table 2

Descriptive Statistics of the Level of ASMC

Statement	Mean	SD	QD
1. When people take pictures of me, I think about how I will look if the pictures are posted on social media.	5.44	1.61	High
0. I think about how specific parts of my body will look when people see my pictures on social media.	5.13	1.76	High
0. Even when I'm alone, I imagine how my body would look in a social media picture.	4.25	1.93	Moderate
0. During the day, I spend time thinking about how attractive I might look when people see pictures of me on social media.	4.21	1.87	Moderate
0. I try to guess how people on social media will react to my physical appearance in my pictures.	4.74	1.90	High
0. My attractiveness in pictures is more important than anything else I do on social media.	3.61	1.91	Moderate
0. When I go to social events, I care more about looking attractive in pictures people might post on social media than I care about having a fun time.	3.95	1.90	Moderate
0. If an unattractive picture of me is posted on social media, I feel bad about myself.	4.86	1.96	High
0. I look at pictures of myself on social media again and again.	4.74	1.96	High
0. I zoom into social media pictures to see what specific parts of my body look like.	4.34	2.13	Moderate
0. If someone takes a picture of me that might be posted on social media, I ask to look at it first to make sure I look good.	4.89	1.87	High
0. Before I post pictures on social media, I crop them or apply filters to make myself look better.	3.64	1.97	Moderate
0. If someone takes a picture of me that might be posted on social media, I pose in a particular way so that I'll look as attractive as possible.	4.44	1.90	Moderate
TOTAL ASMC	**4.47**	**1.42**	**Moderate**

**Legend: Lowest level: 1.00–1.49; Very low level: 1.50–2.49; Low level: 2.50–3.49; Moderate: 3.50–4.49; High level: 4.50–5.49; Very high level: 5.50–6.49; Highest level: 6.50–7.00*

Table 2 displays the level of Appearance-related Social Media Consciousness (ASMC) among the participants, revealing a mean score of 4.47 (SD=1.42). This suggests that the participants' awareness of how their appearance is perceived by social media audiences is moderate, approaching the borderline of high awareness. It suggests a heightened preoccupation with their appearance on social media, where body surveillance and comparison occur frequently, impacting their body esteem. This implies that their body image is increasingly influenced by social media interactions and the comparisons they make with others.

These findings align with existing studies that show excessive social media use encourages individuals to internalize societal beauty standards and compare themselves to others (Rohimi et al., 2021). Adolescents, in particular, are highly active on social media, with over half of teens aged 13–17 checking photo-based platforms at least once an hour (Rideout & Robb, 2018). Social media platforms reinforce beauty ideals and promote frequent self-monitoring behaviors, which increase awareness of one's appearance and amplify body image concerns (Fox & Vendemia, 2016; Kleemans et al., 2018).

Section 3. Extent of Body Dysmorphic Disorder (BDD) Symptoms Among Filipino Adolescents

Table 3

Descriptive Statistics of BDD Symptoms: Total Appearance Anxiety Inventory (AAI) and Subscales (Threat Monitoring, Camouflaging, Avoidance)

	Statement	Mean	SD	QD
1.	I compare aspects of my appearance to others.	2.27	1.31	Moderate
0.	I check my appearance (e.g., in mirrors, by touching with my fingers, or by taking photos of myself).	2.66	1.26	Moderate
0.	I avoid situations or people because of my appearance.	1.42	1.31	Normal
0.	I brood about past events or reasons to explain why I look the way I do.	1.79	1.34	Mild
0.	I think about how to camouflage or alter my appearance.	1.68	1.38	Normal
0.	I am focused on how I feel I look, rather than on my surroundings.	1.86	1.30	Mild
0.	I avoid reflective surfaces, photos, or videos of myself.	1.39	1.26	Normal
0.	I discuss my appearance with others or question them about it.	1.57	1.33	Normal
0.	I try to camouflage or alter aspects of my appearance.	1.53	1.34	Normal
0.	I try to prevent people from seeing aspects of my appearance within particular situations (e.g., by changing my posture, avoiding bright lights).	1.88	1.33	Mild
Threat Monitoring		2.03	.97	Mild
Camouflaging		1.80	.99	Mild
Avoidance		1.48	1.74	Normal
TOTAL AAI		**1.81**	**1.10**	**Mild**

Legend: Normal: $\bar{x} \leq 1.7$; Mild: $1.7 < \bar{x} \leq 2.1$; Moderate: $2.1 < \bar{x} \leq 2.9$; Severe $2.9 < \bar{x} \leq 3.7$; Extremely Severe: $\bar{x} > 3.7$

Table 3 shows that the mean score for the threat monitoring subscale is 2.03 (SD = .97), indicating a mild level of vigilance toward appearance-related threats, suggesting that respondents are mildly focused on monitoring perceived flaws in their appearance. For the camouflaging subscale, the mean score is 1.80 (SD = .99), which falls within the mild range, reflecting minimal use of strategies to conceal perceived imperfections. The avoidance subscale shows a mean score of 1.48 (SD = 1.74), representing a normal extent of avoidance behaviors, such as withdrawing from activities due to appearance concerns.

Meanwhile, the Total AAI score has a mean of 1.81 (SD = 1.10), indicating a mild level of BDD symptoms among the participants. This suggests occasional or slight preoccupation with body image that does not significantly interfere with daily life. These concerns are relatively common and manageable, causing minimal distress or dysfunction. While this level of symptoms is not considered severe, it aligns with the DSM-5 (*Diagnostic and Statistical Manual of Mental Disorders*), which states that body dysmorphic disorder typically begins during adolescence, with the average onset around 16–17 years, and the most common onset occurring between 12–13 years (*American Psychiatric Association*, 2013).

Section 4. Comparison on the Level of Appearance-related Social Media Consciousness (ASMC) Across Respondents' Profile

Table 4

Comparison on the Level of ASMC in Terms of the Respondents' Age

Groups	df	Mean	SD	QD	F-value	p-value
Early Adolescent	121	3.96[A]	1.50	Moderate		
Middle Adolescent	133	4.65[B]	1.31	High	14.439**	.000
Late Adolescent	70	4.98[B]	1.20	High		

***p<0.001, Mean groups who do not share a common letter are significantly different from each other*

Table 4 indicates that middle adolescents (M = 4.65, SD = 1.31) and late adolescents (M = 4.98, SD = 1.20) exhibit a high level of ASMC, while early adolescents (M = 3.96, SD = 1.50) demonstrate a moderate level of ASMC. The ANOVA results also revealed significant differences in ASMC levels across the three age groups (F = 14.439, p = 0.000). The results indicate significant differences among the three means. Table 5 below presents the test results identifying which pair or pairs of means show statistically significant differences.

Table 5

Post Hoc Test on the Level of ASMC in Terms of the Respondents' Age

(I) Age	(J) Age	Mean Difference (I-J)	Std. Error	Sig.
Early Adolescent	Middle Adolescent	-.68904*	.17137	.000
	Late Adolescent	-1.01729*	.20484	.000
Middle Adolescent	Late Adolescent	-.32825	.20142	.235

**p < 0.05*

Tukey post hoc tests confirmed that middle and late adolescents have significantly higher levels of ASMC than early adolescents. These findings indicate that ASMC generally increases as individuals progress from early to middle and late adolescence. This suggests that as adolescents mature, their exposure to and engagement with social media platforms likely intensify, leading to increased appearance-related social comparisons and self-monitoring behaviors.

These findings align with Hashmi and Fayyaz (2022), who describe adolescence as a critical stage marked by heightened sensitivity to societal beauty standards and increased self-consciousness about appearance. Likewise, Nesi et al. (2018) emphasize adolescence as a pivotal period characterized by sensitivity to peer evaluation, social standing, and a pronounced focus on physical appearance.

Table 6

Comparison on the Level of ASMC in Terms of the Respondents' Sex

Groups	f	Mean	SD	QD	t-value	p-value
Male	116	3.90	1.51	Moderate	-5.351**	0.000
Female	208	4.78	1.27	High		

***p<0.001*

As Table 6 shows, the two-sample t-test revealed a significant difference between the two groups (t = -5.351, p = 0.000). Descriptive statistics indicate that female respondents (M = 4.78, SD = 1.27) exhibit a high level of ASMC, while male respondents (M = 3.90, SD = 1.51) demonstrate a moderate level of ASMC. This suggests that females tend to have a higher level of consciousness about appearance-related social media use compared to males. This is significant

as revealed by the t-test results where t = -5.351, p = 0.000. This trend aligns with findings by Kenny et al. (2017), who noted that adolescent girls are more invested in self-presentation behaviors and are influenced by feedback metrics like "likes" and "comments."

Table 7

Comparison on the level of ASMC in Terms of the Respondents' Socioeconomic Status

Groups	f	Mean	SD	QD	F-value	p-value
Income is little, sometimes not enough for my family	17	4.13	1.46	Moderate	1.203^{ns}	0.309
Income is sufficient only for my family needs, can hardly save	76	4.57	1.25	High		
Income is very sufficient for my family needs, can save	209	4.41	1.49	Moderate		
Have much money and properties that we need, can buy whatever we like	22	4.88	1.16	High		

^{ns} *p>0.05*

A one-way Analysis of Variance (ANOVA) was conducted after testing and establishing the assumptions of homogeneity of variances and normality. Table 7 indicates no significant differences in the level of ASMC across the four socioeconomic groups (F = 1.203, p = 0.309). Descriptive statistics show that participants from families with "income is little, sometimes not enough for my family" have a moderate level of ASMC (M = 4.13, SD = 1.46). Those with "income is sufficient only for my family needs, can hardly save" demonstrate a high level of ASMC (M = 4.57, SD = 1.25). Participants from families with "income is very sufficient for my family needs, can save" also report a moderate level of ASMC (M = 4.41, SD = 1.49), while those from families with "much money and properties that we need, can buy whatever we like" exhibit a high level of ASMC (M = 4.88, SD = 1.16).

Despite variations in mean scores, the differences among groups are not statistically significant (F = 1.203, p = 0.309). This suggests that Filipino adolescents, regardless of socioeconomic background, engage with social media in similar ways.

This finding contrasts with Skogen et al. (2022), who found that negative social media experiences increase as socioeconomic status decreases. The differences may be due to context-specific factors or unique characteristics of their study population, where socioeconomic disparities had a stronger impact on social media use and perceptions. These results highlight that the link between socioeconomic status and social media consciousness is not universal and can vary based on location, population traits, or how social media is used within different communities.

Section 5. Comparison on the Extent of Body Dysmorphic Disorder (BDD) Symptoms Across Respondents' Profile

Table 8

Comparison on the Extent of BDD Symptoms in Terms of the Respondents' Age

Groups	f	Mean	SD	QD	F-value	p-value
Early Adolescent	121	1.61^{A}	.97	Mild	4.256*	0.015
Middle Adolescent	133	1.91^{B}	.95	Mild		
Late Adolescent	70	1.94^{B}	.98	Mild		

**p<0.05, Mean groups who do not share a common letter are significantly different from each other*

A one-way Analysis of Variance (ANOVA) was conducted, with homogeneity of variances and normality tests completed to ensure the test's assumptions were met. Table 8 reveals

significant differences in the extent of BDD symptoms across the three age groups (F = 4.256, p = 0.015).

Early adolescents (M = 1.61, SD = 0.97) exhibit the lowest mean score, indicating a mild extent of BDD symptoms. This suggests that individuals in this developmental stage may experience fewer appearance-related concerns compared to older groups. In contrast, middle adolescents (M = 1.91, SD = 0.95) and late adolescents (M = 1.94, SD = 0.98) demonstrate higher mean scores, still within the mild range but nearing the threshold for moderate symptoms. The three group means differ statistically in the extent of BDD symptoms, as indicated by F = 4.256, p = 0.015.

Table 9

Tukey's Post Hoc Test on the Extent of BDD Symptoms in terms of the Respondents' Age

(I) Age	(J) Age	Mean Difference (I-J)	Std. Error	Sig.
Early Adolescent	Middle Adolescent	-.31233*	.12127	.028
	Late Adolescent	-.34218*	.14496	.049
Middle Adolescent	Late Adolescent	-.02985	.14254	.976

**p < 0.05*

Tukey post hoc tests confirmed that middle and late adolescents have significantly higher levels of BDD symptoms than early adolescents. These findings suggest an increase in BDD symptoms as individuals progress from early to middle and late adolescence. This is consistent with Linardon's (2023) observation that approximately 50% of 13-year-old girls report body dissatisfaction, which rises to nearly 80% by age 17.

Table 10

Comparison on the Extent of BDD Symptoms in Terms of the Respondents' Sex

Groups	f	Mean	SD	QD	t-value	p-value
Male	116	1.62	1.002	Mild	-2.605*	0.010
Female	208	1.91	.95	Mild		

**p<0.05*

Male respondents (M = 1.62, SD = 1.002) exhibit a mild extent of BDD symptoms, while female respondents (M = 1.91, SD = 0.95) also fall within the mild range but display relatively higher body image-related anxiety. A two-sample T-test was conducted after verifying the assumptions of normality and homogeneity of variances. The results indicate a statistically significant difference between the two groups (t = -2.605, p = 0.010), with females showing a higher mean score than males. Females showing higher levels of body image anxiety suggests that gender may influence the extent of BDD symptoms. They are more vulnerable to experiencing body image-related concerns.

These findings align with prior research, such as Ram et al. (2024), which revealed that a significant number of adolescents, particularly females, experience clinically significant body image concerns. Similarly, Himanshu et al. (2020) found that females often report dissatisfaction related to body fat and complexion, whereas males tend to focus on muscularity and acne.

Table 11

Comparison on the extent of BDD Symptoms in Terms of the Respondents' Socioeconomic Status

Groups	f	Mean	SD	QD	F-value	p-value
Income is little, sometimes not enough for my family	17	1.94	1.94	Mild	0.412ns	0.744

Income is sufficient only for my family needs, can hardly save	76	1.71	.85	Mild	
Income is very sufficient for my family needs, can save	209	1.84	.99	Mild	
Have much money and properties that we need, can buy whatever we like	22	1.78	.93	Mild	

^{ns} p>0.05

Descriptive statistics reveal that respondents from all groups exhibit mild symptoms of BDD. Those with "income is little, sometimes not enough for my family" reported the highest mean score (M = 1.94, SD = 1.94), followed by those with "income is very sufficient for my family needs, can save" (M = 1.84, SD = 0.99). Respondents from families with "much money and properties that we need, can buy whatever we like" had a slightly lower mean (M = 1.78, SD = 0.93), while those with "income is sufficient only for my family needs, can hardly save" reported the lowest mean (M = 1.71, SD = 0.85).

A one-way analysis of variance (ANOVA) was conducted after verifying assumptions of normality and homogeneity of variances. The results indicate no statistically significant differences in the extent of BDD symptoms across the four socioeconomic groups (F = 0.412, p = 0.744). This contrasts with the findings of Soler et al. (2019), who reported that individuals from lower socioeconomic backgrounds are more likely to experience body dysmorphic disorder.

Section 6. Relationship Between Appearance-related Social Media Consciousness (ASMC) and Body Dysmorphic Disorder (BDD) Symptoms Among Filipino Adolescents

Table 12

Relationship Between ASMC and BDD Symptoms in Terms of Total AAI

	Pearson r	p-value	QD
ASMC AAI	0.710**	0.000	High Positive Correlation

Legend: Negligible Correlation: 0.00 to ±0.30; Low Correlation: ±0.30 to ±0.50; Moderate Correlation: ±0.50 to ±0.70; High Correlation: ±0.70 to ±0.90; Very High Correlation: ±0.90 to ±1.00

***p<0.001*

Pearson r correlation analysis indicates a significant positive relationship between the two variables (r = 0.710, p = 0.000). The results suggest a high positive correlation, implying that higher levels of ASMC are associated with increased levels of BDD symptoms in terms of total AAI. This finding underscores the potential influence of social media consciousness on the development or intensification of body image concerns among respondents.

This finding is consistent with existing literature. Vuong et al. (2021), Rohimi et al. (2021), and Agnihotri (2022) all suggest that social media use contributes to body dissatisfaction and the internalization of unrealistic beauty standards seen on social media platforms. These behaviors, such as altering online personas to align with beauty ideals, have been linked to psychological issues like body dysmorphia, anxiety, and low self-esteem. Additionally, Laughter et al. (2023) further emphasized that excessive social media use intensifies preoccupation with perceived image flaws among those already experiencing BDD symptoms. This reinforces the idea that social media consciousness can amplify body image concerns and potentially contribute to the development of BDD.

Conclusion

The findings suggest that Filipino adolescents, particularly females and older age groups, are significantly influenced by social media regarding appearance awareness. While their ASMC levels are moderate, the proximity to high awareness indicates the pervasive role of social media in shaping their perceptions of physical appearance. This implies that their body image is

increasingly influenced by social media interactions and the comparisons they make with others. The mild extent of BDD symptoms, particularly the prominence of threat monitoring, indicates that while body image concerns are present, they are not yet severe. This suggests occasional or slight preoccupation with body image that does not significantly interfere with daily life. However, the upward trend among older adolescents and females suggests a vulnerability that could escalate if left unaddressed. The lack of influence from socioeconomic status for both level and extent of ASMC and BDD symptoms suggests that these concerns are pervasive across all economic backgrounds, emphasizing the universal impact of social media on body image.

The high positive correlation between ASMC and BDD symptoms highlights the critical role of appearance-related social media consciousness in exacerbating body image concerns. This suggests that individuals who are more conscious of their appearance in online spaces may be more vulnerable to developing heightened self-criticism and distress related to their physical features. These findings emphasize the need for greater awareness of the psychological impact of social media and the importance of fostering healthier digital consumption habits to mitigate its negative effects on body image perception.

Recommendations

For guidance counselors, it is suggested that they develop interventions like counseling sessions and workshops to address body image concerns. Schools, especially at the Junior and Senior High School levels, should incorporate media literacy programs into the curriculum. Parents can help by fostering open discussions about body image, encouraging self-worth independent of online validation, and promoting balanced screen time. Future research should expand the sample to include both public and private school adolescents, ensure a balanced representation of demographics, explore additional contributors to body image concerns like cultural beauty standards, use qualitative methods to understand personal experiences, and examine the influence of specific social media content on adolescent body image over time.

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