

How contact with overweight people is
related to how we interact with our bodies
(and those of others)

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Anti-fat attitudes

- Anti-fat attitudes (AFA) increasing
- Last 'acceptable' form of discrimination
- Weight as controllable
- Discrimination
- Consequences of prejudice



Prejudice reduction

- Public and clinical health psychology
 - Information
 - Favourable beliefs of others
 - Empathy
- Social psychology
 - Interpersonal factors
 - Prejudice research



Contact and AFA

- Contact hypothesis
- Valence of contact important
- Contact hypothesis and AFA



Current study

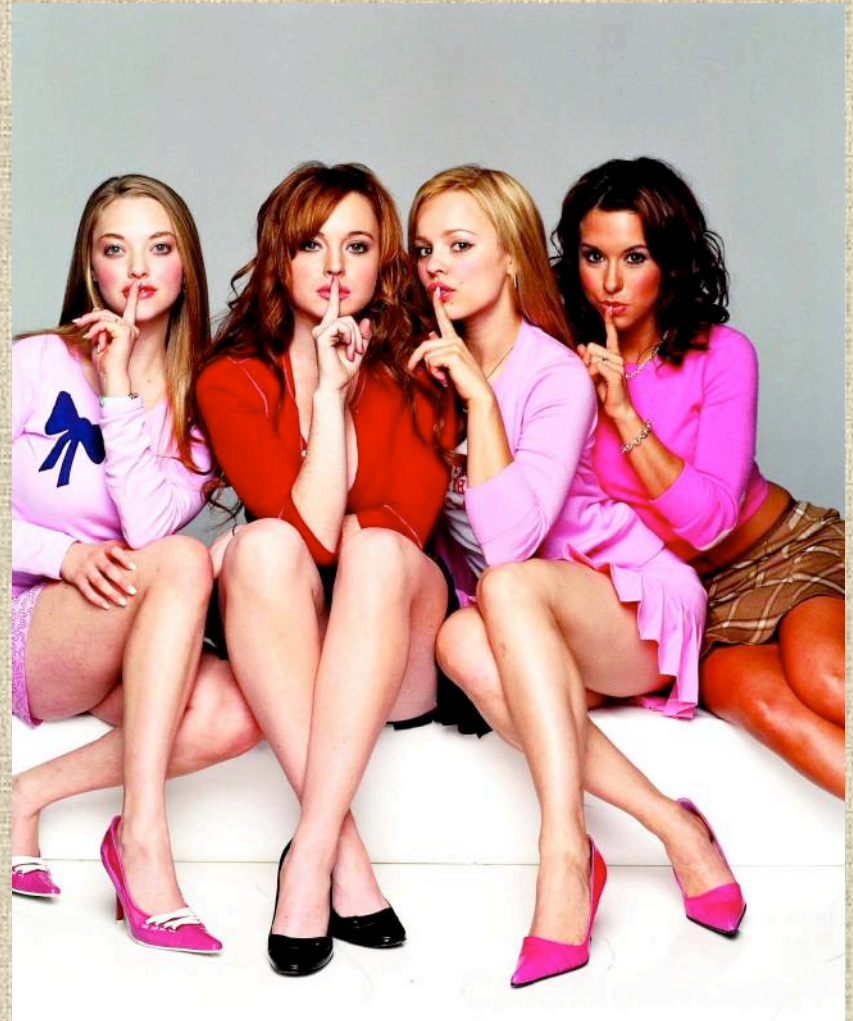
- Group permeability
- Impact of contact may be moderated by own BMI
- Low BMI & contact
- Positive contact
- Behaviours



Definitions

Fat talk

- Ideal exercise and eating habits
- Fear of becoming fat
- Others' bodies
- Own weight
- Strategies – muscle building, meal replacement, supplements, diets
- Consequences



Definitions

Drive for thinness

- An excessive desire to be thin
- Unhealthy weight loss activities – disordered eating and excessive exercise
- Cardinal feature of eating disorders



Definitions

Body checking behaviour

- Compulsive checking
- Monitor changes
- Prevent potential distress
- Results in body dissatisfaction



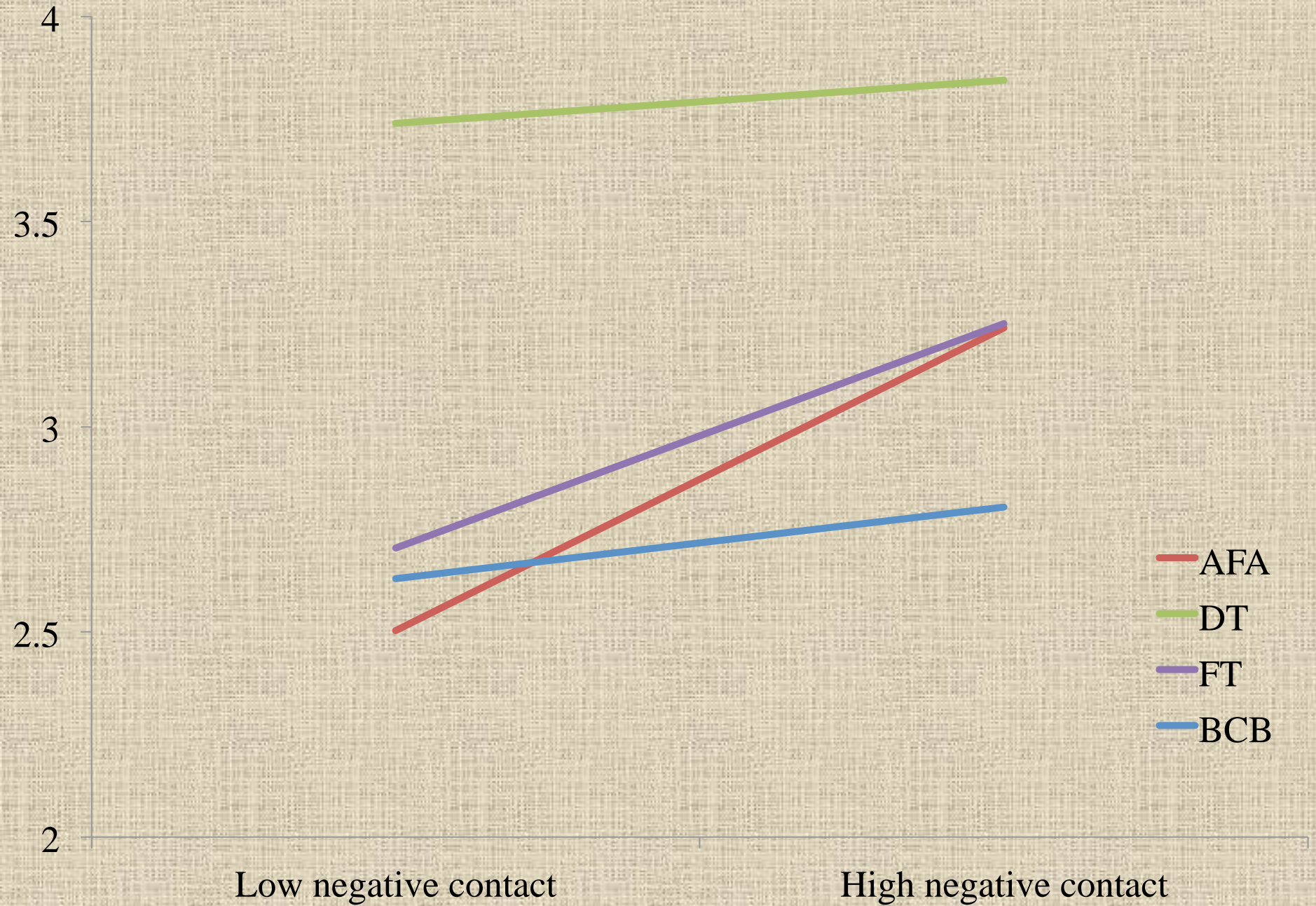
Hypotheses

1. Positive contact should be associated with decreased AFA.
2. Negative contact should be associated with increased AFA.
3. Traditional contact effects for participants with a high BMI regarding fat talk, drive for thinness and body checking behaviours
4. Both positive and negative contact will be linked to increased fat talk, drive for thinness and body checking behaviours for those with a low BMI.

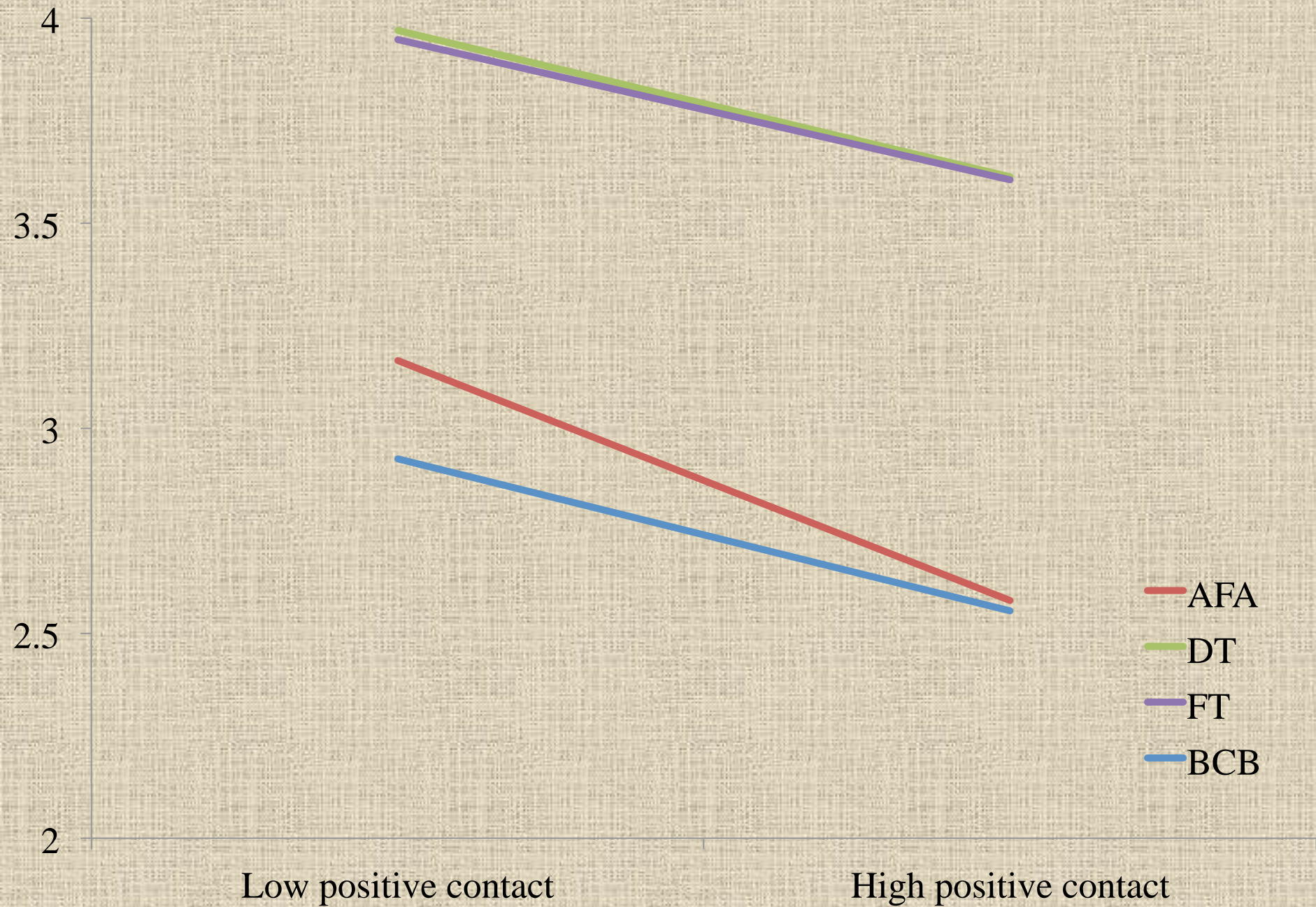
Participants, materials, method

- Recruited on online survey platform Social Sci – only those from USA
- 1452 participants (F = 645, M = 807)
- Age range 18-91 ($M = 28.41$, $SD = 8.84$)
- BMI range 13.21-60.47 ($M = 25.79$, $SD = 6.35$)
- Completed survey regarding body image, including BMI, Anti-Fat Attitudes Scale, Fat Talk Scale, Drive for Thinness Scale and Body Checking Questionnaire and measures regarding contact with overweight or obese people

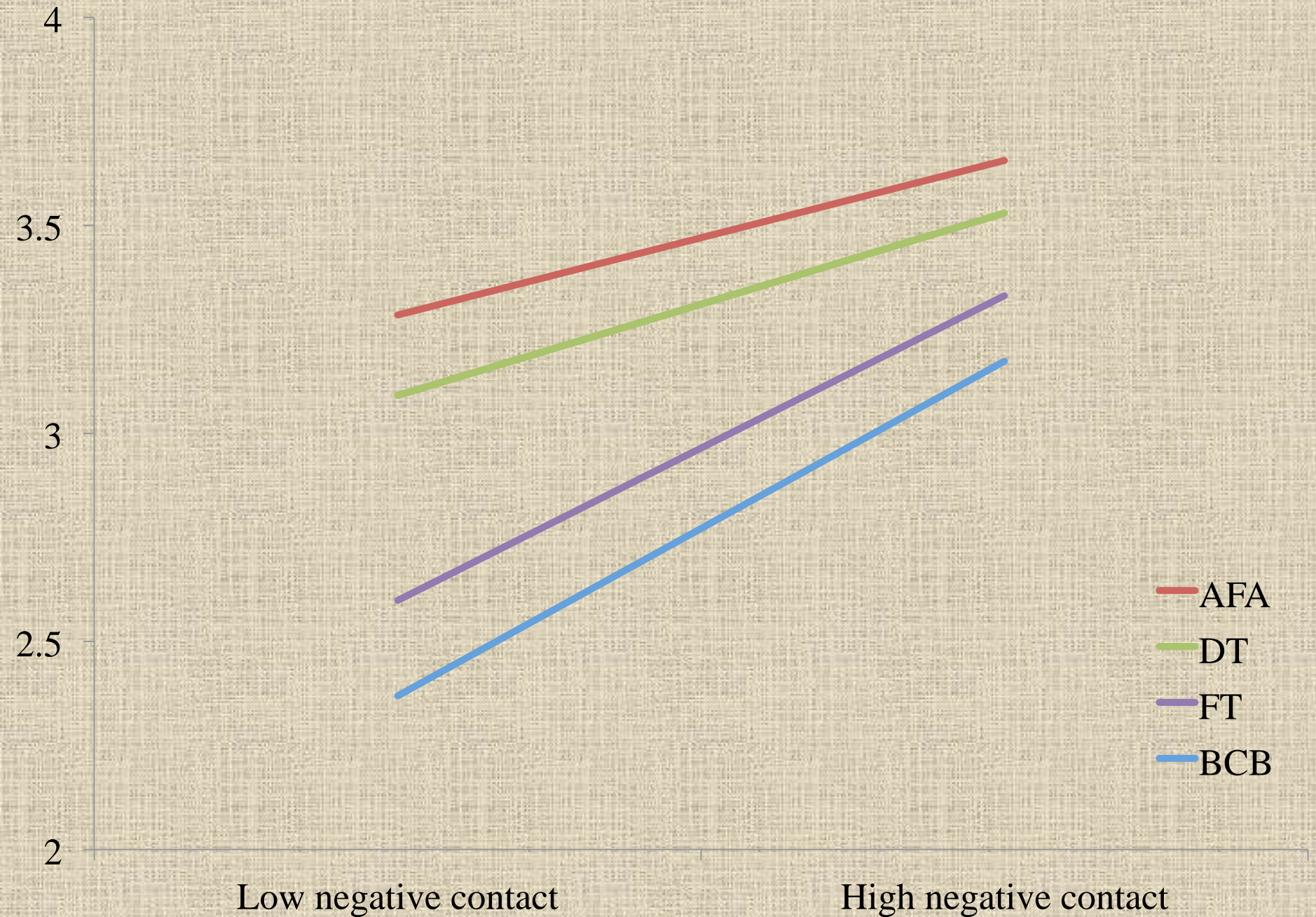
High BMI and negative contact



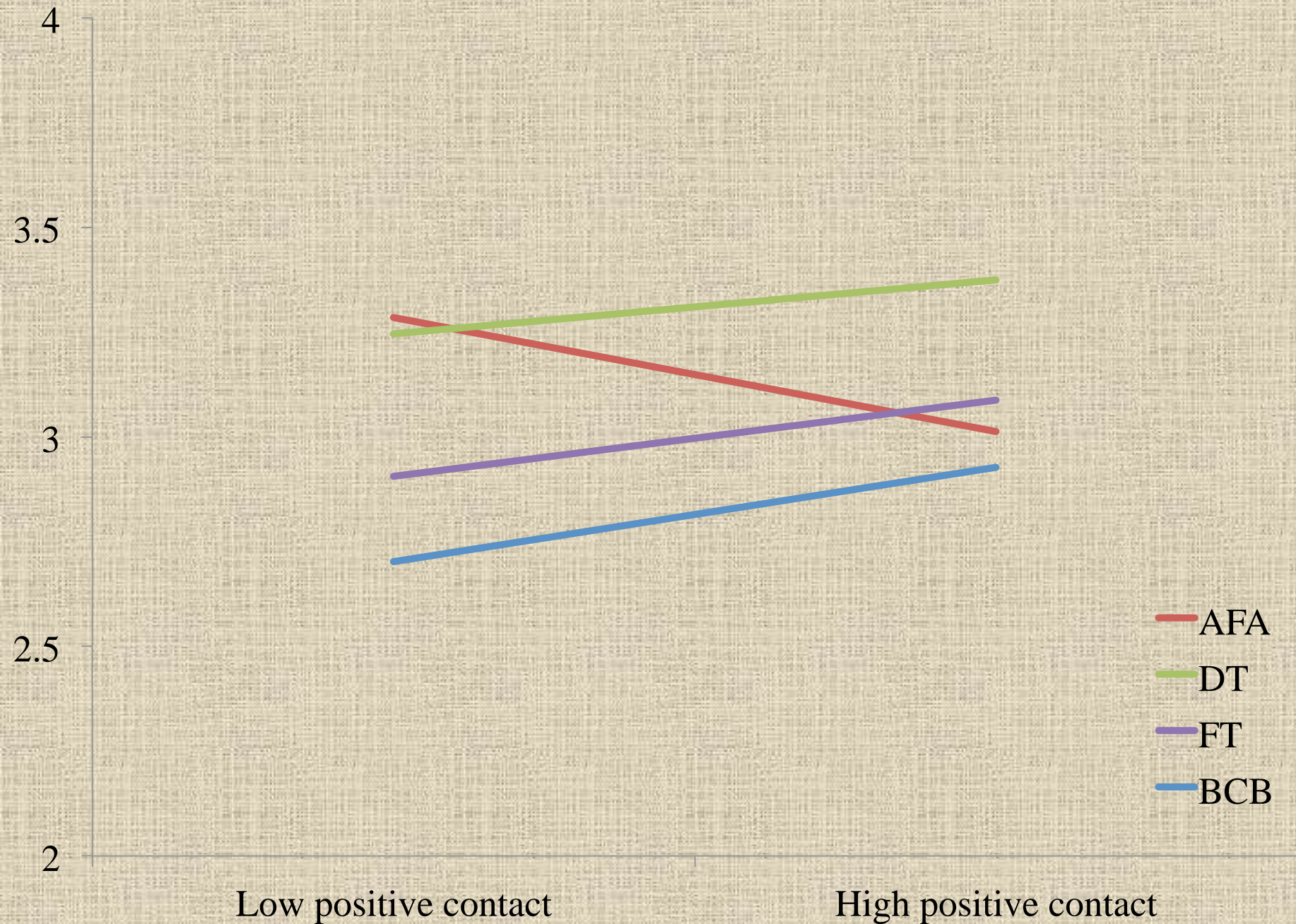
High BMI and positive contact



Low BMI and negative contact



Low BMI and positive contact



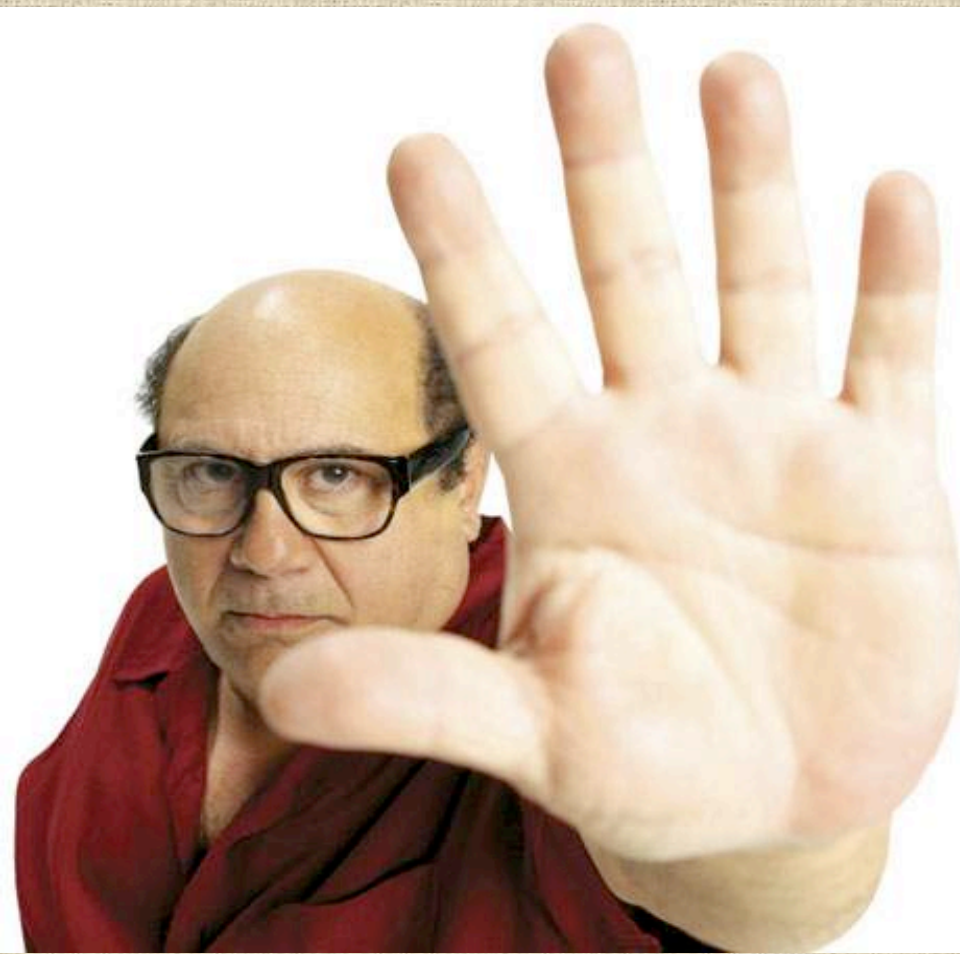
Conclusions

- Contact linked to AFA, and intrinsically linked to how we feel about ourselves, and others
- Positive contact is not necessarily associated with good outcomes
- Positive contact reduces prejudice most for people who already belong in the derogated group
- Currently under review at Social Science & Medicine in collaboration with Dr. Matthew Hornsey, Lydia Hayward, Dr. Phillippa Diedrichs and Dr. Fiona Kate Barlow



Future directions

What is negative contact?







Thanks for listening!
Any questions?