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To cite this article: Javiera Calisto, Catalina Salazar, Macarena Seco, Pablo Vergara-Barra & Marcell Leonario-Rodriguez (2025) Women report worse metrics of positive body image and fat talk: Findings of an exploratory study in a Chilean sample, *Fat Studies*, 14:2, 164-172, DOI: [10.1080/21604851.2025.2518767](https://doi.org/10.1080/21604851.2025.2518767)

To link to this article: <https://doi.org/10.1080/21604851.2025.2518767>



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Published online: 13 Jun 2025.



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Women report worse metrics of positive body image and fat talk: Findings of an exploratory study in a Chilean sample

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ABSTRACT

This study aimed to investigate the correlation between a positive body image and fat talk, along with the influencing factors shaping their relationship within a cohort of Chilean participants. A cross-sectional exploratory study was undertaken, with variables drawn from the Body Appreciation Scale (BAS) and the Fat Talk Questionnaire (FTQ). Body image distortion was gauged through anthropometric measurements juxtaposed with Standard Figural Stimuli (SFS). Women exhibited lower levels of body image positivity in comparison to men ($p = 0.049$), coupled with a statistically significant elevation in exposure to fat-phobic discussions ($p = 0.005$). Remarkably, these two variables were associated irrespective of gender, age, nutritional status, or socioeconomic status within the evaluated population.

KEYWORDS

Body image; corporal distortion; fat talk; eating disorders; gender differences

Introduction

Positive body image is a contemporary construct that has emerged strongly in recent decades in the field of health and social science research (Kling et al. 2019). It is positioned as a multifaceted term with body acceptance, a broad conceptualization of beauty, and inner positivity as central themes. Its popularity in modern societies is due to the influence of feminist movements, as well as health efforts to decrease the prevalence and incidence of eating disorders (Tylka and Wood-Barcalow 2015). This is precisely because its counterpart, a negative body image, promotes body dissatisfaction associated with sleep problems (Bordeleau et al. 2022), alcohol and tobacco abuse (Gonçalves et al. 2022), lower physical activity levels, and significant dietary restrictions (Hao et al. 2023). In view of this, initiatives that seek to position strategies for developing a positive body image among the population constitute a significant public health challenge.

In this line, different associated factors have been identified, among them interestingly, fat talk, a concept that interprets a style of verbal expression involving negative self-statements, complaints about physical appearance, and weight control. This type of expression hurts young women's cognitions, affect, and behavior and increases the harmful effects for women with higher self-objectification (Jones, Crowther, and Ciesla 2014). A meta-analysis has established that exposure to these types of conversations is related to body constructs related to body dissatisfaction and understanding that these are pretty common in the population, awareness should be raised about their sequential effects on the generation of a negative body image (Mills and Fuller-Tyszkiewicz 2017).

However, despite the rise of positive body image and the actions of movements worldwide supporting it, it remains difficult for societies worldwide to embrace it. Authors have postulated that the present situation occurs because of both collective and personal barriers, as the concept has been widely criticized for being associated with a cis, young, white European woman of high socio-economic status. It has even been proposed that the idea is appropriated by economic groups that have commodified its development, excluding the economically vulnerable and racially diverse population (Griffin, Bailey, and Lopez 2022). This situation is reflected concretely in academic productivity, where observational and intervention-level

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research focuses on Western populations in the Northern Hemisphere (Linardon et al. 2021), while studies in the South American population are limited and the evidence underscores the need for further research (Andres et al. 2024).

This situation makes it impossible for health organizations in the southern hemisphere to act, which is why it is necessary to report on their reality to understand the development of this phenomenon better, significantly when situations such as fat talk can develop according to the context faced by each country.

In this sense, the relationship between body positivity and fat talk in the Chilean population is a topic that deserves to be explored in depth, given that the country has experienced significant changes in its culture and lifestyle. The anti-inequality protests in 2019 (Curilef et al. 2021), the mental health demands of the COVID-19 pandemic (Irrazaval et al. 2021), the now annual marches on March 8th for International Women's Day (Maira, Casas, and Vivaldi 2019), and the increases in "obesity" rates (Contreras et al. 2022), constitute a quartet of important potential antecedents to consider in the Chilean reality and evaluate how they affect the Chilean population. Given this, this exploratory study aimed to determine the association between positive body image and fat talk and the factors that influence their relationship in a sample of Chilean subjects.

Methods

A cross-sectional exploratory study was conducted on a sample of adults from the city of Temuco in the southern region of Chile. The primary focus of the study was to assess levels of positive body image and the extent of exposure to fatphobic conversations. The sample size was determined based on population data obtained from the 2017 Census of the country for the population aged 18 to 59 in the city ($N = 282,415$). The sample size was calculated through the online platform SurveyMonkey® with a 95% confidence level and a maximum error of 5%, resulting in a sample of $n = 384$. Non-probabilistic convenience sampling was employed, and recruitment took place at four key locations in the city representing middle and high socioeconomic sectors, as determined by education and income data published by the Ministry of Social Development and Family of the Chilean Government.

Inclusion criteria encompassed all voluntary individuals encountered at the recruitment points who met the age requirement for adult status and exclusively resided in the designated sectors. Regarding exclusion criteria, individuals with eating disorders or mood disorders were not permitted to participate due to potential biases in self-perceived body image. Regarding the first element, the SCOFF screening instrument was administered, and any potential volunteer who endorsed two positive responses was immediately excluded from the study (Rueda Jaimes et al. 2005). As for mood disorders, these were assessed directly and confidentially during the informed consent process. Additionally, the study excluded the city's floating population, comprising individuals who, while residing in Temuco, engage in daily activities in other municipalities within the region.

Data collection took place during field operations conducted between October and December 2023. Recruitment was conducted through in situ measurements at four strategically selected sites within the city, representing the locality's high and middle socioeconomic strata. These sites comprised pedestrian thoroughfares in shopping centers, a university neighborhood, and two urban parks (Robinovich et al. 2014). First, a booth equipped with tables, chairs, and privacy partitions was installed to protect the privacy of volunteers who responded to the open call. Recruitment was carried out using informational posters as well as snowball sampling through oral invitations. Licensed Nutrition and Dietetics professionals, trained in advance to perform measurements in person and handle physical documents, oversaw the data collection process. The primary variables were derived from the Body Appreciation Scale (BAS) and the Fat Talk Questionnaire (FTQ). Additionally, age and gender data were obtained through self-reporting by each volunteer. Body image distortion was assessed using accurate anthropometric measurements and their comparison with Standard Figurative Stimuli (SFS).

The field operations were conducted by licensed professionals in Nutrition and Dietetics who had undergone prior training to ensure consistency in measurements and documentation handling during in-person interactions. The key instruments for assessing positive body image and exposure to fatphobic conversations were the BAS and FTQ, respectively. Basic demographic information, such as age and gender,

was self-reported by the participants. Furthermore, distortion in body image was evaluated by comparing actual anthropometric measurements with Standard Figural Stimuli (SFS).

Body Appreciation Scale (BAS)

The BAS is a 13-item instrument that respondents answer using a 5-point scale ranging from “Never” to “Always.” The total score on the BAS can reach a maximum of 65 points. The questions are designed to assess the individual’s feelings regarding their body image, with higher scores indicating a more positive body image. Notably, the instrument has been validated in Spanish, ensuring its applicability and reliability in assessing body appreciation within the Spanish-speaking population (Lobera and Ríos 2011), as well as its application in the South American population (Mariani and Gongora 2017).

Fat Talk Questionnaire (FTQ)

The FTQ consists of 14 questions, each with five response options (ranging from “Never” to “Always”), allowing for a maximum score of 70 points. The items are designed to assess volunteers’ perception of their bodies in social contexts, with higher scores indicating a greater level of exposure to fatphobic conversations. This tool was developed, and validated among Canadian university students (Royal, MacDonald, and Dionne 2013). It was recently adapted and validated in specific South American population (da Silva, Ganen, and Alvarenga 2021).

Body image distortion

The distortion of self-perceived body image was determined based on the agreement or disagreement between the actual BMI presented by the assessed individuals and the BMI projection they believed they had. In the first case, participants’ weight and height were measured using a Excel® Digital Scale (maximum capacity 160 kg, precision of 100 g) and a Portable Terraillon® Stadiometer 213 (measurement range 20–205 cm, precision of 1 mm). Both measurements were performed with participants barefoot and with the Frankfurt plane maintained. BMI was then calculated using the Quetelet Index and classified according to the following cutoff points: “underweight” ($<18.5 \text{ kg/m}^2$), “normal weight” ($18.5\text{--}24.9 \text{ kg/m}^2$), “overweight” ($24.9\text{--}29.9 \text{ kg/m}^2$), and “obesity” ($>29.9 \text{ kg/m}^2$). Subsequently, without informing the subjects of their measurements, they were asked to indicate the body image on the Standard Figural Stimuli (SFS) that they felt represented them, thereby establishing whether there was distortion in self-perceived body image. The SFS consists of a scale of nine images of bodies, each 8 cm high, representing men and women of hypothetical BMIs ranging from 17–34 kg/m^2 . It is a widely used instrument in Latin America (Rueda-Jaimes et al. 2012; Varela, Oda-Montecinos, and Saldaña 2019). Participants did not know the BMI of each image when viewing them.

Once the data were collected, the variables were entered into a Microsoft Excel® spreadsheet and analyzed using GraphPad Prism v.10 for Windows (San Diego, California USA). Distributions were determined to characterize the sample, along with means, standard deviations, and 95% confidence intervals for continuous quantitative variables. To analyze significant differences in scores by group, data normality was first assessed using the Shapiro – Wilk test. Subsequently, Student’s t-test or the Kolmogorov – Smirnov test was applied for dichotomous variables, depending on data normality. Pearson’s or Spearman’s correlation was also used to determine the degree of correlation between BAS and FTQ scores. To assess the association between the variables and body-image distortion, odds ratios were calculated and Fisher’s exact test was employed to determine statistical significance.

It is important to note that all subjects participated voluntarily, signing informed consent documents. Additionally, this research was conducted by the principles of the Declaration of Helsinki and was approved by the Scientific Ethics Committee of the University Mayor of Temuco, Chile (File 0334).

Table 1. Sample characterization.

	n (%)
Sex	
Male	58 (49.6)
Female	59 (50.4)
Age	
20–34	81 (69.2)
35–55	36 (30.8)
Socioeconomic level	
Middle	42 (35.9)
High	75 (64.1)
Nutritional status	
Normal	48 (41.0)
Overnutrition	69 (58.9)
Body image distortion	
Yes	80 (68.4)
No	37 (31.6)

Table 2. BAS and FTQ scores across sex, age group, socioeconomic level, nutritional status and body image distortion.

	BAS	SD	KS value	p-value	FTQ	SD	KS value	p-value
Sex								
Male	52,6	7,2	0,252	0,049	23,6	7,7	0,319	0,005
Female	48,8	9,0		*	29,5	10,9		**
Age								
20–34	50,0	8,8	0,170	0,469	27,2	10,8	0,179	0,401
35–55	52,1	7,1		ns	25,3	7,1		ns
Socioeconomic level								
Middle	48,3	9,4	0,212	0,176	30,0	11,9	0,284	0,026
High	52,0	7,4		ns	24,7	7,9		*
Nutritional status								
Normal	50,1	9,6	0,138	0,657	28,7	11,1	0,253	0,054
Overnutrition	51,1	7,4		ns	25,1	8,6		ns
Body image distortion								
Yes	50,3	8,7	0,142	0,685	25,7	8,8	0,139	0,711
No	51,5	7,4		ns	28,5	11,7		ns
All sample	50,7	8,3			26,6	9,8		

Results

One hundred seventeen subjects were successfully interviewed, representing 30.5% of the calculated sample (Table 1). The sample was evenly distributed between men and women (49.6% and 50.4%, respectively) and predominantly comprised individuals under 35 years of age (69.2%), those from high socioeconomic status (64.1%), those with higher BMI (58.9%), and those with a distortion in self-perceived body image (68.4%).

Regarding the first primary variable (Table 2), the average score for BAS in the total sample was 50.7 ± 8.3 . Higher levels of body image positivity were associated with men, individuals over 35 years old, those with high socioeconomic status, overnutrition, and those without distortion in self-perceived body image. However, in most considered variables, the differences are not significant, except for gender, where women reported lower levels of body image positivity than men ($p = .049$). As for the other primary variable, an average score of 26.6 ± 9.8 was reported for the FTQ instrument, with significantly higher exposure to fatphobic conversations in women ($p = .005$) and individuals with medium socioeconomic status ($p = .026$) compared to their counterparts. On the other hand, differences were found based on age, nutritional status, and self-perceived body image, but without statistical significance.

On the other hand, when analyzing the relationship between BAS and FTQ scores (Table 3), a moderate negative correlation was found in the entire evaluated sample with significant results ($p < .000$). In the same vein, negative correlations were reported for each of the considered variables; however, different metrics were achieved based on gender, age, socioeconomic status, nutritional status, and distortion in self-perceived body image. Specifically, a moderate and significant inverse relationship was identified in women ($r = -0.530$; $p < .000$), individuals under 35 years old ($r = -0.506$; $p < .000$), the population with medium socioeconomic status ($r = -0.569$; $p < .0001$), subjects with normal nutritional status ($r = -0.611$; $p < .000$), and those with distortion in self-perceived body image ($r = -0.551$; $p < .000$). Although the counterparts of each of these

Table 3. Correlation between BAS and FTQ scores across sex, age group, socioeconomic level, nutritional status and body image distortion.

	r	95% CI	R squared	p-value	
Sex					
Male	−0.366	−0.570 to −0.119	.134	.004	**
Female	−0.530	−0.692 to −0.317	.281	.000	****
Age					
20–34	−0.506	−0,652 to −0,324	.256	.000	****
35–55	−0.486	−0,702 to −0,187	.236	.003	**
Socioeconomic level					
Middle	−0.569	−0,744 to −0,320	.324	.000	****
High	−0.384	−0,562 to −0,173	.148	.001	***
Nutritional status					
Normal	−0.611	−0,763 to −0,396	.374	.000	****
Overnutrition	−0.377	−0,563 to −0,154	.142	.001	**
Body image distortion					
Yes	−0.551	−0,688 to −0,377	.304	.000	****
No	−0.494	−0,705 to −0,203	.244	.002	**
All sample	−0.506	−0,629 to −0,357	.256	.000	****

Table 4. Body image distortion across sex, age group, socioeconomic level, nutritional status and body image distortion.

	Distortion n (%)	Non distortion n (%)	OR	CI 95%	p-value
Sex					
Male	41 (70.7)	17 (29.3)	1.24	0.56 to 2.65	.691
Female	39 (66.1)	20 (33.9)	0.81	0.38 to 1.79	ns
Age					
20–34	53 (64.4)	28 (34.6)	0.63	0.27 to 1.46	.391
35–55	27 (75.0)	9 (25.0)	1.59	0.68 to 3.70	ns
Socioeconomic level					
Middle	30 (71.4)	12 (28.6)	1.25	0.54 to 2.80	.681
High	50 (66.7)	25 (33.3)	0.81	0.36 to 1.86	ns
Nutritional status					
Normal	29 (60.4)	19 (39.6)	0.54	0.26 to 1.21	.157
Overnutrition	51 (73.9)	18 (26.1)	1.86	0.82 to 3.90	ns

mentioned elements also exhibit a significant inverse relationship between BAS and FTQ, these are of a lesser degree, tending toward a weak correlation in some cases.

Finally, regarding the presence of distortion in self-perceived body image (Table 4), elevated figures were reported for both men and women in the sample (70.7% and 66.1%, respectively), for individuals under and over 35 years of age (64.4% and 75%), for those with medium and high socioeconomic status (71.4% and 66.7%), and for subjects with normal nutritional status and overnutrition (60.4% and 73.9%). As for the association indicated by the calculated Odds Ratios (OR), there is a minimal tendency toward women, those under 35, individuals with medium socioeconomic status, and the presence of overnutrition; however, none of these associations reach statistical significance.

Discussion

The biomedical emphasis on “obesity” as a chronic disease promotes a reductionist view centered on weight loss and the normalization of measures such as BMI, thereby overlooking the experiences of people with diverse bodies and reinforcing weight-related stigma. Perpetuating this biomedical narrative tends to ignore the psychosocial and structural determinants of fatness, reinforcing individual responsibility while discounting environmental complexity, which can exacerbate body insecurity and disordered eating behaviors. Therefore, integrating body-positivity perspectives is essential to broaden the health paradigm, recognizing that well-being is not limited to clinical weight control or conformity to biomedical standards (Nutter et al. 2023; Syed 2019).

The scientific evidence suggests that a positive body image correlates directly with essential variables associated with well-being, such as self-esteem and even academic performance (Khalaf, Al Hashmi, and Al Omari 2021). Promotion through the reduction of fat talk is relevant not only from a psychological and social perspective but also from a public health policy standpoint, as fat-phobic attitudes and conversations can have a direct impact on the health and well-being of the entire population. By better understanding this

relationship in different population contexts, more effective strategies can be developed to promote body positivity and reduce fatphobia, thereby improving individuals' quality of life.

In the same vein, initiatives carried out at the local level are essential for understanding how these phenomena unfold in a specific manner. Our results indicate that the present sample exhibits high levels of distortion in body self-perception, as previously reported in the general Chilean population (Vidal et al. 2022), as well as in university populations (Inzunza Rosales et al. 2023). This could be attributed to the denial of the nutritional problem, with a prevailing underestimation of body weight and nutritional status. Therefore, it is crucial to address deficiencies in food and nutritional education within the Chilean educational system, where interventions and evidence in this regard are pretty limited (Bustos et al. 2016).

About body positivity, men exhibited better metrics than women, which aligns with a recent study published in the Australian population, where this result even predicted differences in intuitive eating practices between the two genders (Murray et al. 2023). Various studies have supported this trend of poorer body image in women. For instance, a meta-analysis published in 2017 reported that this situation is consistently more prevalent in women than men and persists throughout the lifespan. Furthermore, it is independent of nutritional status, representing a cross-cutting phenomenon within the specific population group (Weinberger et al. 2017). In this sense, public policies in education aimed at enhancing body positivity in the population should incorporate a solid feminist and gender component.

Concerning the second primary variable, both women and individuals from middle-class backgrounds exhibited significantly poorer metrics than their counterparts. Initially, this could be explained by the social pressure women face toward a thinness ideal, a situation that is not as pronounced for men (Guertin et al. 2017). Furthermore, the evidence suggests that greater body dissatisfaction is associated with increased exposure to this type of conversation, as our results demonstrate in the women's group of the current sample (Dalley et al. 2022). About increased exposure to fat-phobic conversations according to socio-economic status, it is not possible to compare with previous studies, but this is likely influenced by the educational level of the population about comments about physical appearance and weight stigma (Langford et al. 2022; Massicard et al. 2022). On the other hand, and interestingly, neither age, nutritional status, nor body image distortion influenced the scores on BAS and FTQ. This situation could be attributed to the phenomenon's pervasiveness, affecting both young and adult individuals, as well as those with various body sizes.

A consistently reported moderate and significant inverse relationship was achieved regarding the correlations between BAS and FTQ scores about the general variables investigated. This would indicate that, at higher levels of body positivity, there are lower levels of exposure to fat-phobic conversations independent of gender, age, nutritional status, socioeconomic status, and distortion of body self-perception. This is intriguing, and it would be necessary to confirm this relationship with longitudinal studies so that in the future, interventions based on the modulation of fat-phobic conversations can be evaluated to improve levels of body positivity. This could have tangible implications for mental health and overall quality of life, addressing significant global health challenges (Hooper et al. 2023).

As regards the limitations of the study, it is essential to mention that the calculated sample size could not be achieved, and it is necessary to interpret the present results with caution. This likely occurred due to the number of focal points in the city selected (4 localities) and the recruitment time (4 months). To improve this, it would be necessary to increase the number of field researchers and the number of covered sectors. Regarding the collection time, as a team, we prioritized collecting data during a single season of the year different from summer, considering the geographical area where the study was conducted, as it could directly influence body perception, as reported in previous studies (Griffiths et al. 2021). Another factor limiting the generalizability of the present study pertains to the instruments employed. Although these tools have been validated in Spanish and within South American populations with health profiles similar to those of Chileans, limitations may arise because mere translation does not guarantee that items retain their original meaning. Translation and back-translation processes can overlook cultural nuances, idiomatic expressions, or psychosocial constructs specific to a given context. Furthermore, interpreting results using cutoff points derived from other populations introduces additional complications. For example, this exposes minority groups to potential misinterpretations of their scores. Moreover, response styles such as acquiescence, extreme response, and social desirability vary systematically across cultures and may bias the

results (Alavi and Cleary 2025; Goodwin, Williams, and Snell Herzog 2020). In this regard, conducting full-scale validation studies of these instruments is essential to develop more reliable measures that accurately capture the local reality. Similarly, it is important to note that a Cronbach's alpha analysis yielded values of 0.762 for the BAS and 0.921 for the FTQ, indicating positive metrics of reliability and internal consistency.

Among future directions, research in this field should embrace qualitative or mixed-methods approaches, including ethnographic studies as exemplified by existing initiatives. Investigations of "fat-positive" activism forums have demonstrated how these interactions serve both solidarity and resilience rituals against stigma. Likewise, social-media-based reports reinforce that body dissatisfaction among women university students is directly linked to spontaneous comments and self-perceptions related to nutritional status. In this context, ethnography would enable the elucidation of experiences from populations underrepresented in prevailing literature, the development of scale items more attuned to participants' cultural and discursive realities, and the identification of the internal boundaries and tensions within the body-positive movement beyond its official narrative (Kennedy, Preston, and Kenny 2023).

To conclude, in the present sample of Chilean adults, women report poorer metrics of body positivity and exposure to fat-phobic conversations than men. Furthermore, these two variables are interrelated regardless of gender, age, nutritional status, and socioeconomic level of the evaluated population. Future studies in other populations and longitudinal initiatives would be necessary to confirm these results.

Ethics statements

This study was approved by the Institutional Scientific Ethics Committee of the University Mayor of Chile (Accredited by the Health SEREMI Araucanía Resolution No. 2309663975 dated January 11, 2024), and all researchers acted by the Helsinki guidelines. It is important to note that all subjects who participated did so voluntarily and by signing an informed consent document.

Acknowledgments

We thank all critical stakeholders contacted for disseminating volunteer recruitment for the present research work.

Disclosure statement

No potential conflict of interest was reported by the author(s).

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Data availability statement

The corresponding author affirms that all utilized data are accessible in an attached link 10.6084/m9.figshare.28916126. Any data required for comprehension can be requested via e-mail.

Role of funding sources

The publication of this work was funded by internal resources from the Vice Rectory of Research at Universidad Mayor. The Vice rectorate had no role in the study design, collection, analysis, or interpretation of the data, writing the manuscript, or submitting the paper for publication.

Contributors

PVB conceptualized the research idea, reviewed the data analysis, and reviewed the final version; JC, CS, and MS acted as field researchers collecting all the data for the work. MLR conducted the formal analysis of the results, reviewed the final publication, and supervised the whole research process. All authors contributed to the publication's writing.

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