Title

EXPERIENCES OF INDIVIDUALS WITH EATING DISORDERS IN RELATION TO EXPOSURE TO CONTEMPORARY FASHION TRENDS AND THEIR IMPACT ON THE IMPRESSION OF BODY IMAGE: A QUALITATIVE STUDY

Author

FERNANDO CABRERA ERASO

TUTOR

LINA MARÍA GONZÁLEZ BALLESTEROS

Thesis presented as a partial requirement for obtaining the title of Specialist in Psychiatry

Pontificia Universidad Javeriana

Faculty of Medicine

May 2025

Summary

This qualitative study examines how exposure to contemporary fashion trends influences the construction of body image among women diagnosed with eating disorders (EDs). Using a phenomenological and interpretive approach, the research conducted in-depth interviews with five women aged 18 to 35. Thematic analysis revealed five core experiential categories: comparison with imposed standards, emotional burden associated with clothing sizes, distorted body perception, influence of social and mass media, and criticism of the fashion industry. Participants consistently reported that exposure to thin, idealized bodies, particularly on social media and in fashion campaigns - intensified feelings of inadequacy, self-rejection, and unworthiness. Clothing, especially size labels, emerged as a symbolic marker of self- worth, often functioning as an emotional validator. Several participants described avoiding stores, experiencing mood swings based on how garments fit, and engaging in body-checking rituals. While some acknowledged the rise of more inclusive content, most perceived these industry efforts as superficial and contradictory. These findings suggest that fashion operates as a cultural language that shapes identity, emotional regulation, and social comparison, highlighting the need to incorporate it into clinical approaches for EDs to better support recovery.

Key Words:

Body Image, Eating Disorders, Fashion Industry, Social Comparison, Qualitative Research

Introduction:

The fashion industry serves as a platform where individuals select clothing and accessories to display who they are, reflecting cultural and social aspects of their lives (Singhal, 2024). While fashion enables people to express beliefs about their identity and the image they wish to project, today, its influence on mental health and body perception (Sulthana, 2024) raises concerns, not only because its impact for identity and personality development but also for emotional and behavioral health.

Data from Johns Hopkins Children's Hospital show that, between 2018 and 2022, consultations for eating disorders in individuals under 17 in the U.S. doubled (Johns Hopkins Medicine, 2024). This is alarming, given that children and adolescents are particularly susceptible. Additionally, globally, these disorders affect 2% to 5% of the population, being more common among women (Attia and Walsh, 2025), highlighting a decline in youth mental health.

Female models illustrate the pressure women face to conform to standards of youth, sexuality, and thinness, which are often linked to the development of eating disorders, characterized by extreme concern about appearance and changes in eating habits (Fixsen, Kossewska, and Bardey, 2023).

Despite progress in studying body image and fashion, the rise in eating disorders, driven by sociocultural pressures, shows that most research focuses on the general population, leaving gaps in knowledge about vulnerable groups and the relationship between fashion trends and body image disturbances in individuals with eating disorders. There is also a lack of clarity about the psychological and emotional processes shaping body image (Flügel, 2015; Urbón Ladrero, 2005). The study relies on sociocultural models of body image, particularly the Tripartite Model (Van den Berg et al., 2002), to explore how external standards become internal directives in women with EDs.

This study proposes a patient-centered perspective to better understand the factors affecting body image and psychological well-being. By analyzing how the fashion industry influences body image and mental health, both in the general population and in individuals with eating disorders, specific measures and supports can be suggested to improve mental well-being.

Research on the experiences of individuals with eating disorders is scarce, though it is essential for understanding how contemporary fashion, body image, and mental health intersect in this vulnerable population (Meneses Montero and Moncada Jiménez, 2008). This study addresses this gap, contributing knowledge about the interaction between these variables. This study draws upon sociocultural models of body image and interpretive phenomenology to explore how fashion-related discourses are internalized as lived bodily experiences. This framework is particularly suited to explore how social discourses—such as those conveyed by fashion—are internalized and lived through the body (Merleau-Ponty, 1962; van Manen, 1990). Rather than seeking generalizable patterns, the goal is to access participants' first-person accounts of meaning, affect, and embodiment, providing insight into how cultural norms become inscribed into personal suffering (Smith, Flowers, & Larkin, 2009; Eatough & Smith, 2008). Phenomenological research thus enables a deeper understanding of how the symbolic codes of fashion impact lived experience, particularly in vulnerable populations dealing with self-image and identity disruption.

The aim of this study is to explore the experiences of individuals with eating disorders regarding contemporary fashion trends and their effect on body image. Using qualitative methods, it seeks to understand these experiences to enhance comprehension of how fashion, body image, and mental health are related.

Background:

Fashion is a dynamic system, functioning as a cultural and social engine, explored through sociology, anthropology, and psychology. According to the Royal Spanish Academy, it operates as a "temporary or regional practice, shaping collective preferences in clothing and accessories" (Doria; 2019). Fashion also serves as a structured framework, guided by principles that amplify personal expression and anchor individual identity (Keery, van den Berg, & Thompson, 2004; Fardouly, Pinkus, & Vartanian, 2017).

The fashion industry acts as a multifaceted network, integrating economic, cultural, ethical, and technological components. It functions as a global mechanism for production and distribution, driving employment and international trade. While globalization fuels cross-cultural exchange within this network, it also sparks concerns about cultural erosion and authenticity loss (Piscitelli, A; 2017).

Theoretical Perspectives on Fashion and Identity:

To dissect fashion's symbolic, social, and economic roles, we propose analyzing the following theoretical frameworks:

- Fashion Imitation and Differentiation Framework: Developed by Thorstein Veblen and Georg Simmel, this framework positions fashion as a tool for signaling social standing, balancing the forces of conformity and distinction in clothing choices (Hernández; 2016).
- Fashion Cycle Framework: This model views fashion as a recurring system, moving from the emergence of new trends to their decline and eventual resurgence (Piñero; 2008).

- Dress as Communication Framework: This perspective casts clothing as a channel for nonverbal messaging, transmitting information about identity, gender, and societal roles, with contributions from theorists like Malcolm Barnard (Festinger; 1954).
- Liquid Modernity Framework in Fashion: Zygmunt Bauman's concept frames fashion as a reflection of society's fluid and transient nature, adapting to the rapid shifts of modern life (Vartanian & Dey; 2013).
- Social Differentiation Framework: Pierre Bourdieu's model presents fashion choices as strategic moves to acquire and maintain social and cultural capital within a competitive symbolic arena (Keery et al; 2004).

Additionally, the social comparison framework suggests individuals assess their worth by measuring themselves against others when objective benchmarks are absent (Fardouly et al; 2017). Sociocultural models highlight that frequent appearance comparisons can erode body satisfaction (Vartanian & Dey, 2013; Keery, van den Berg, & Thompson, 2004).

Media Representation and Body Dissatisfaction:

Fashion trends and sizing systems act as powerful influencers, shaping body image perceptions and often reinforcing dissatisfaction by promoting unattainable ideals through runway models, advertisements, and media. Digitally altered images and limited diversity in fashion campaigns distort reality, amplifying dissatisfaction (Fardouly et al; 2017).

For instance, De Freitas et al. (2018) examined 13 Australian fashion magazines, revealing minimal model diversity and underscoring the need for reform (Keery et al; 2004). Similarly,

McComb and Mills (2021) found that young women with high aesthetic perfectionism are particularly susceptible to idealized Instagram images, resulting in distress and reduced self-esteem (Fardouly et al; 2017).

Perception plays a critical role in how fashion trends reshape reality and influence self-image. It functions as the brain's active processing system, interpreting sensory data to construct meaningful representations, shaped by cultural context, emotions, expectations, and focus (Freitas et al; 2018).

Impression formation operates as a cognitive mechanism essential for social navigation, guiding behavior and decisions in contexts like politics and work (McComb & Mills; 2021). It enables differentiation between cooperative and uncooperative individuals (Hernández Bayona; 2013). Functional Magnetic Resonance Imaging studies reveal the Dorsomedial Prefrontal Cortex as a key hub in forming and refining impressions as new information emerges (Mende-Siedlecki, Cai, & Todorov, 2013; Mitchell, Macrae, & Banaji, 2005).

Cognitive and Affective Dimensions of Body Image:

Body image functions as a complex construct, encompassing internal perceptions of one's body, including beliefs, emotions, and behaviors tied to size, shape, and appearance (Mende-Siedlecki et al; 2013). It exists independently of physical reality and forms a core component of identity.

Body image comprises four interconnected elements, as outlined by Mitchell et al. (2005):

- **Cognitive:** Beliefs and thoughts about the body.
- **Perceptual:** Interpretations of body size and shape.
- **Affective:** Emotions tied to the body.

- **Behavioral:** Actions driven by body perceptions.

Distorted body image emerges from sociocultural and neurological influences. Identity, gender norms, fashion trends, and social pressures shape body image, particularly during adolescence (Price, 2006; King, 2018).

Children begin forming self-image around age two, molded by social cues (e.g., gender-specific clothing). This awareness intensifies during school years through peer comparisons and peaks in adolescence. Social rejection and fashion trends on social media amplify body dissatisfaction and pressure to conform to idealized standards (Hosseini & Padhy; 2023).

Fashion as Social Regulator:

Conversely, fashion can serve as a platform for forging collective identity, fostering connections through shared values. This creates a space for mutual recognition, where individuals gain emotional support and feel their perspectives matter (Nardini et al., 2021).

However, when fashion trends or sizing exclude certain individuals, they exert a controlling influence, compelling conformity to idealized standards, such as mimicking a brand's model or fitting into the smallest available size, often at the expense of mental or physical health (Arango Saraz, 2021) highlighting the dual role of fashion as both a potential site of empowerment and source of psychological harm.

In summary, fashion operates as more than a surface-level expression of aesthetics or preference; it functions as a potent sociocultural force that shapes perception, identity, and body image. It serves as both a mirror reflecting societal ideals and a mold enforcing conformity, wielding

symbolic influence over nonconformists. The fashion industry, through its trends, sizing, and visual campaigns, significantly impacts how individuals—especially young women—perceive themselves. While fashion can foster collective identity and emotional bonds, it also risks imposing standards that trigger psychological distress and harmful behaviors. Recognizing this dual role is critical for evaluating fashion's mental health implications in modern society.

Method:

Study overview and participants

This study adopted a qualitative, phenomenological–interpretative design to explore the subjective experiences of adults with eating disorders (ED) in relation to contemporary fashion trends and body-image construction. An initial systematic review of PubMed, Scopus, and PsycINFO was conducted to identify theoretical gaps and frame the relationship between fashion, body image, and ED. Ethical approval was obtained from the Pontificia Universidad Javeriana Faculty of Medicine Ethics Committee (Approval No. [FM-CIE-0485-24]), ensuring respect for autonomy, confidentiality, beneficence, and non-maleficence.

Participants were eligible for inclusion if they were between 18 and 35 years of age, had received a formal eating disorder diagnosis (including anorexia nervosa, bulimia nervosa, or binge-eating disorder), and possessed the cognitive and linguistic capacity to complete a semi-structured interview in either English or Spanish. Individuals were excluded if they had a concomitant severe psychiatric disorder (e.g., schizophrenia) that could distort perceptual or interpretive processes, a recent or ongoing history of significant trauma that might compromise informed participation, or any cognitive or language impairment that would impede meaningful engagement in the interview process.

Recruitment

The participant recruitment phase was carried out by means of a theoretical-intentional sampling with maximum variation strategy, through the snowball method. Participants were contacted through the dissemination of flyers in social networks and in the university's mail, which included the title and objectives of the study, the invitation to participate along with the indications to answer an initial socio-demographic survey hosted on Microsoft Forms and informed consent, as well as the contact information of the principal investigator. Likewise, banners were printed for dissemination in medical offices and other settings.

On the other hand, the data of patients registered in the Hospital San Ignacio system were considered to create a database and subsequently make calls to patients with a previous script to invite them to participate in the research.

Recruitment was sequential and iterative, allowing for continuous data collection and analysis until thematic saturation was reached. The final sample size was determined by data saturation, not a fixed number. Saturation was evaluated by tracking the appearance of new codes across interviews. When no new relevant themes emerged in consecutive transcripts, we concluded saturation was achieved.

Participants were selected intentionally based on their ability to provide rich, relevant data. Recruitment involved partnerships with ED clinics, outreach to mental health professionals, and efforts to include diverse gender, age, and diagnosis profiles.

Procedures

After the initial screening of the target population, the investigators contacted patients who reported interest in participating in the study to review 1) compliance with inclusion criteria 2) availability of applicants to schedule focus groups 3) signing the informed consent form.

Prior to conducting the interviews, the research group asked some basic questions to guide the interviews in a semi-structured manner, according to the previous research and the objectives of the study. Interviews were conducted with sensitivity to participants' emotional well-being, offering the possibility to pause or discontinue at any time. For each focus group, a field diary was designed to keep in mind the important points of each interview, the most repeated themes and relevant impressions at the time of analysis. (Table 1)

Sample size

From the perspective of Braun and Clarke's (2021) reflexive thematic analysis, themes do not automatically emerge from the data but are constructed through a rigorous interpretive process. In this qualitative study, based on in-depth interviews with four participants with a history of eating disorders, interpretive sufficiency was achieved by identifying consistent and nuanced thematic patterns that clearly address the research question about the impact of fashion trends on body image perception. The recurrence of themes such as social comparison, the influence of sizing, body frustration, critical perception of inclusion strategies, and emotional responses to the fashion industry appeared consistently across all cases, with the final interviews contributing no substantially new categories. Consistent with Braun and Clarke's model, this analytical stability, combined with the experiential depth and internal coherence of the findings, justified the decision to conclude fieldwork without expanding the sample.

Data analysis

The qualitative analysis was conducted using an interpretive phenomenological approach, aiming to capture and describe the participants' subjective experiences regarding the influence of fashion on their body image within the clinical context of eating disorders. The analytical process was carried out systematically, blending inductive and deductive criteria, technically supported by NVivo 14 software, a specialized tool for computer-assisted qualitative analysis (QSR International, 2022). While guided by Braun and Clarke's thematic development, this analysis retained a phenomenological orientation, focusing on participants' lived meanings and interpretive depth.

All interviews were transcribed and reviewed by the research team to ensure content accuracy. Next, an analytical reading of the material was performed, leading to the development of a preliminary coding framework. This framework included key nodes (core categories) defined based on the theoretical framework and research objectives—such as "Comparison with imposed standards," "Impact of clothing sizes," "Emotional dysfunction linked to fashion," "Social media and media," and "Criticism of the fashion industry." Each node was broken down into specific subnodes representing distinct dimensions emerging from the narratives, like "Comparison with models," "Desire to fit into a size," or "Body rejection." (Table 2).

The creation of these nodes and subnodes involved collaborative analysis sessions among the researchers, who discussed the units of meaning in the interviews and agreed on the operational definition of each category. This process progressively refined the coding system's structure, ensuring conceptual coherence, semantic precision, and thematic comprehensiveness. As coding progressed, analytical memos were integrated into NVivo to document interpretive decisions,

inclusion and exclusion criteria for segments, and theoretical-clinical reflections arising during the analysis. (Figure 1)

Once the node system was finalized, NVivo's analytical tools were used to examine the frequency, distribution, and co-occurrence of codes across participants. Cross-coding queries, coding matrices, and conceptual diagrams were employed to identify relationships between categories, thematic saturation, and distinct trajectories. This approach not only mapped recurring discourse patterns but also captured individual nuances, contradictions, and tensions within each participant's experience. (Figure 2).

The use of NVivo enabled a systematic, transparent, and replicable analysis while preserving the contextual richness of the qualitative narrative. The collective construction of the coding system and ongoing triangulation among team members ensured effective bias control and strengthened the study's internal validity. Throughout the process, the research team maintained reflexive journals to document positionality and evolving interpretations.

Trustworthiness of results

In this study, a sturdy framework of methods was built to manage biases common in qualitative research, with the goal of producing trustworthy, clear, and precise findings. Researcher triangulation was used during coding and thematic analysis, blending different clinical and theoretical viewpoints to lessen personal bias. The team maintained ongoing self-awareness by writing analytical memos, noting possible subjective influences, assumptions, and reactions to the narrative content. Participants were chosen through purposive sampling with consistent criteria, ensuring uniformity in eating disorder experiences and avoiding outliers that could disrupt

thematic consistency. Interviews followed a flexible semi-structured protocol, encouraging natural responses without strict rules, and all transcripts were carefully checked word-for-word for accuracy. Finally, the coding process preserved the narratives' context, respecting the participants' intended meaning and preventing misinterpretation, which bolstered the analysis's internal validity.

Researcher´s Positionality

The first author is a 30-year-old male physician and psychiatry resident. Since childhood, his exposure to fashion trends through his family's business has allowed him to understand the workings of the fashion industry. During his training, he has had a special interest in eating disorders (EDs), their impact, and the influence of culture on their etiology.

The second author is a 22-year-old psychology student in her last semester. Having contact with people living in the fashion world and with those affected by it, she shows a particular interest in understanding how different trends can affect not only the behavior of various individuals but also their relationship with food and their self-perception in the world, as well as the deterioration of their mental health, in terms of how these variables can contribute to the development of an eating disorder.

The third author is a 24-year-old female medical student currently in her ninth semester. She brings a strong clinical and cultural sensitivity to the study of mental health and its social determinants. From a young age, she was drawn to the world of fashion and aspired to be part of it. However, over time, she became increasingly aware of the psychological and emotional impact that the fashion industry can have on body image and mental well-being—both her own and that of others. This realization led her to distance herself from the fashion world. Nevertheless, she now views

this background as an opportunity to better understand the social forces that shape individual experiences and to contribute thoughtfully and critically from within the academic space.

The fourth author is a 22-year-old medical student currently in her final year. Her academic interests include child and adolescent psychiatry as well as perinatal psychiatry. She has observed the intersectionality between eating disorders and the child and adolescent population, given the cultural influences to which children are exposed, along with the various fashion trends imposed on society, and therefore believes that prevention of these disorders in this population should be encouraged.

The fifth author is a 22-year-old female medical student currently in her ninth semester. Her academic and personal interests have led her to explore the physiopathology of eating disorders (EDs), particularly their intersection with social behavior. She is especially intrigued by how fashion trends can influence body image and eating habits, and how these cultural dynamics contribute to the development and perpetuation of EDs.

The sixth author is a 20-year-old female medical student currently in her sixth semester. Since the beginning of her career path, she has been interested in the mechanisms through which mental pathology could occur and how it relates to social dynamics. She is especially interested in studying eating disorders that have a relevant prevalence in her generation and tries to understand how working on the social sphere can reduce the incidence of EDs.

The seventh author is a 50-year-old woman, a psychiatrist, cognitive behavioral therapist, and expert in eating disorders and qualitative research. She has a special interest in the experiences of patients with eating disorders and the social determinants of this disorder. She also has a particular interest in the aesthetic dimension.

Results:

Qualitative analysis identified five central thematic cores representing shared experiences among participants regarding the influence of fashion on their body image. These findings were consistently reiterated in the narratives and played a structural role in the development of psychological distress related to the body. From a phenomenological psychiatric perspective, they elucidate how a painful, sustained, and culturally validated bodily experience is formed in women with eating disorders (EDs).

Five central experiential themes emerged from the data, reflecting the complex ways in which fashion influences the lived experience of body image in women with EDs.

Theme 1: COMPARISON AS A STRUCTURING MECHANISM OF SELF-IMAGE

Social comparison is a cognitive process through which individuals evaluate their worth or appearance based on others, whether peers or idealized figures (e.g., public personalities). In EDs, this mechanism becomes dysfunctional when it operates constantly and hierarchically, resulting in a self-concept rooted in perceived inferiority. In this study, comparison emerged as a pervasive and deeply internalized phenomenon.

Participants reported feeling under constant scrutiny against what they considered a "valid body model," triggering guilt, shame, and self-rejection. This comparison was not episodic but systematic and often automatic, functioning as a persistent interpretive filter.

One participant stated:

> *"I compare myself all the time. Not just with the body, but also with hair, clothes, how they walk, how their pants look. I always feel inadequate, like everything about me is insufficient."*

Another described a deeper impact:

"I compared myself and ended up hating myself, not just physically but as a person, for not having those physical traits. I felt lesser in every way."

Comparison with peers also became a source of distress:

"At school, days without uniforms were awful. It was like a runway where everyone compared themselves. You measured yourself against everyone and always came up short."

This phenomenon illustrates how bodily judgment becomes existential judgment, preventing individuals from experiencing their bodies freely and securely. In this sense, the body becomes a site of continuous evaluation rather than lived embodiment.

Theme 2: CLOTHING SIZES AS SYMBOLS OF EMOTIONAL VALIDATION

In this context, clothing sizes are not perceived as practical indicators of body dimensions but as symbols of belonging, control, and self-esteem. The numerical size carries emotional and moral significance, becoming a measure of the body's "value" and personal discipline. When participants did not fit into their desired size (typically XS or S), they experienced feelings of failure, humiliation, or threats to their identity.

One participant explained:

"I ordered an XS bodysuit because the model wore it. It didn't fit, and it hit me hard. I didn't return it. It's stored as a goal. I must fit into it someday. If I don't, I feel like I've failed as a person."

Others described how variable sizing across brands caused confusion, interpreted not as a technical issue but as a personal deficit:

"In Zara, I'm an S; in Stradivarius, I'm an M. So, I wonder: what's my real body? Am I gaining weight, or is the pant wrong? But I always end up feeling it's my fault."

Clothing thus becomes an emotional monitoring device:

> *"My mood depends on how my pants fit. If they're tight, I'm fat. If they're loose, I can relax."*

This finding highlights how bodily experience in EDs is shaped by external categories internalized as personal truths.

Theme 3: EMOTIONAL DYSFUNCTION ASSOCIATED WITH BODY PERCEPTION

Emotional dysfunction related to the body manifests as rejection, shame, hatred, or profound devaluation of one's corporeality. In EDs, this experience is linked to the construction of a deficient identity, where the body is perceived as a defective object and a constant source of psychological distress. This experience is intensified by exposure to fashion and aesthetic standards.

One participant stated:

> *"I felt disgusted looking at myself. I believed I didn't deserve nice clothes or compliments. I was convinced I didn't have the right to that, as if having this body was a punishment."*

Another described its impact on social relationships:

> *"I stopped going out with friends because I was afraid they'd see me eat. I felt they were watching what I ate, how much, and how. It was like being exposed all the time."*

This rejection also manifests in active avoidance of the body:

> *"When I gain weight, I avoid trying on certain clothes. I don't want to know. Just thinking they won't fit gives me anxiety."*

This theme confirms that, in these patients, the body is not only perceptually distorted but experienced as a hostile entity.

Theme 4: HARMFUL INFLUENCE OF SOCIAL MEDIA AND DIGITAL PLATFORMS

Social media serve as symbolic amplifiers, where idealized bodies are not only displayed but narrated and prescribed. Algorithms reinforce comparison and self-evaluation by exposing individuals to bodies presented as normative, attainable, and desirable. This daily exposure promotes constant comparison and validates bodily self-demand.

One participant noted:

> *"I see a garment I own, and it looks better on someone else. I instantly feel bad. The algorithm keeps showing me the same thing: bodies that remind me I'm not enough."*

This highlights how social media platforms reinforce appearance-based comparison, creating a feedback loop that deepens dissatisfaction and erodes self-image.

Another described the impact of body-related narratives online:

> *"An influencer said she ate half an egg and a piece of bread to look like that. So, I thought: if I do that and don't look the same, what's wrong with me? Is my body defective?"*

This narrative illustrates how digital content transforms personal choice into perceived obligation, reinforcing the idea that failing to achieve a certain look equates to bodily defectiveness or lack of discipline.

Even inclusive content was met with ambivalence:

> *"I follow accounts with real people, but I still compare myself. I see their bodies and think mine still isn't right."*

This narrative illustrates how digital content transforms personal choice into perceived obligation, reinforcing the idea that failing to achieve a certain look equates to bodily defectiveness or lack of discipline.

This finding suggests that social media not only disseminate aesthetic ideals but also shape internalized bodily subjectivities. Social media serve as symbolic amplifiers, where idealized bodies are not only displayed but narrated and prescribed. Algorithms reinforce comparison and self-evaluation by exposing individuals to bodies presented as normative, attainable, and desirable. This daily exposure promotes constant comparison and validates bodily self-demand.

Theme 5: CRITICISM OF THE FASHION INDUSTRY'S INCLUSION DISCOURSE

Participants expressed critical views on the inclusion discourses promoted by fashion brands and campaigns. They perceived the representation of diverse bodies as partial, forced, or inconsistent with the reality in physical stores. This dissonance fosters distrust and reinforces feelings of structural exclusion.

One participant reflected:

> *"Victoria's Secret said they'd include plus-size models, then featured Barbara Palvin. That's plus-size? So what am I? Invisible?"*

Another highlighted the discrepancy between discourse and practice:

> *"They claim inclusivity online, but in stores, it's all XS and S. Larger sizes don't exist. It's marketing, not real inclusion."*

This finding underscores how the fashion industry's symbolic discourses have clinical implications, as they are perceived as exclusionary, hypocritical, or emotionally harmful.

These findings indicate that contemporary fashion functions not merely as an external trend but as a symbolic language regulating the bodily, emotional, and social experiences of women with EDs. Each element, comparison, sizing, social media, aesthetics, and discourse, contributes to

structuring a bodily experience marked by demand, insufficiency, and self-negation. The body is not only observed, measured, or altered; it is suffered. This suffering is validated, reinforced, and aestheticized by a sociocultural environment that obscures the psychological harm it causes. (Figure 3).

From a clinical perspective, these results suggest the need to address clothing and fashion as integral components of bodily distress in ED patients, incorporating this analysis into the processes of assessment, formulation, and psychotherapeutic treatment.

Discussion:

The results obtained in this qualitative study allow for the identification of a coherent experiential structure regarding the impact of contemporary fashion on body image perception in women with eating disorders (EDs), where fashion does not function as an isolated phenomenon but as a symbolic, cultural, and emotional web that intersects with the core psychopathological experience of these patients. From an interpretive phenomenological framework, this study reveals how clothing trends, when internalized and perceived as normative standards, shape a subjective experience of bodily inadequacy, which becomes a structuring core of psychological suffering.

The participants' narratives consistently illustrate how aesthetic standards promoted by fashion—particularly in its mediatized form through social media—are incorporated as referents of personal validation. The "thin ideal," far from being a neutral aesthetic aspiration, takes on the role of a marker of social value, self-esteem, and control. This is reflected in statements such as: "I compared myself and ended up hating myself, not just physically, but as a person, for not having those physical characteristics." This quote illustrates the process described by sociocultural models of body image and EDs, particularly the tripartite model (Van den Berg et al., 2002), which posits

that internalization of the body ideal and social comparison generate body dissatisfaction and dysfunctional behaviors. However, this process is not just psychological—it is also deeply symbolic. Bourdieu (1984) adds another layer by showing how fashion reinforces social hierarchies under the appearance of individual taste. As Barthes (2006) argues, fashion operates as a system of signs: garments do more than cover the body; they communicate status, identity, and belonging. In this sense, clothing size becomes not only a practical measurement, but a message—one that often translates into personal worth or failure. When participants in our study speak about not fitting into an XS or mistrusting "inclusive" campaigns, what they are pointing to is not just the discomfort of a tight garment, but the pain of symbolic exclusion. These theoretical perspectives remind us that the experience of the body in eating disorders is not shaped in isolation; it is configured by cultural codes that assign meaning, value, and legitimacy.

Likewise, the cross-cutting finding of suffering related to clothing sizes highlights how fashion's numerical codes (size S, XS, M) transform into identity and emotional markers. Participants do not refer to size as a technical variable but as an "emotional verification" of failure or success: "If I don't fit into the XS, I feel like I've failed; that bodysuit is there, waiting for the day I'm worthy enough to wear it." The fact that many participants report avoiding clothing stores or refusing to try on garments if they believe they won't fit demonstrates the degree of phobic avoidance that contact with this symbol can generate.

Another relevant finding is the emotional impact of this distorted relationship with the body mediated by fashion. The intensity of negative emotions (guilt, shame, disgust, devaluation) emerges as one of the psychopathological cores of the ED experience in the context of fashion exposure. As one participant describes: "I felt disgusted looking at myself. I felt I didn't deserve nice things. It wasn't just that I didn't like my body; I felt unworthy." These verbalizations suggest

a profound alteration of the four components of body image (perceptual, cognitive, affective, and behavioral), as described by Cash and Pruzinsky (2002), and point to the presence of self-annihilation phenomena that may reinforce restrictive behaviors and social isolation.

An emergent phenomenon of particular clinical importance is the role of social media in amplifying distress. The relationship between social network exposure and its effects on mental health is now widely known; however, the relationship between search algorithms and behavioral development is a recent phenomenon that leads to the exposure of people to biased content, according to new programming that is typical of social networks, therefore, there is a repetitive exposure (not always voluntarily) to pre-selected content, which ratifies current trends and may promote the development of behaviors associated with eating disorders (Griffiths et al., 2024). Participants acknowledge that the algorithms of platforms like Instagram or TikTok reinforce continuous exposure to idealized bodies, not only visually but also discursively. Influencers not only show how they look but also how they achieved that body: “An influencer said that to have that body, she ate half an egg and a piece of bread for breakfast… and I did the same, but if I didn’t look like her, it was devastating.” This narrative suggests a link between perfectionism in appearance and dysfunctional emotional regulation in the face of social comparison, as described by McComb and Mills (2021). Fashion in social networks is not only visualized; it is narrated, prescribed, and emulated; therefore, this algorithmic exposure transforms aesthetic norms into behavioral prescriptions with measurable psychological consequences.

Although some participants report following accounts with diverse bodies, the majority agree that body inclusion in the fashion industry is perceived as cosmetic rather than transformative. The critique is not only aesthetic but also ethical. The women express skepticism about the dissonance between what is discursively promoted and what brands actually offer: “They say they’re inclusive,

but in the store, everything is XS or S… they do it to look good, but they don't believe it." This perception aligns with Bourdieu's arguments, where fashion functions as a field of power that reproduces symbolic hierarchies under the guise of change. Even movements like body positivity are reinterpreted by patients as market strategies rather than genuine discourses of acceptance. Such symbolic exclusion undermines therapeutic progress by reinforcing patients' sense of unworthiness.

From a clinical perspective, the findings have profound implications. Fashion (and its bodily symbolism) acts as a maintaining factor of body image distortion in individuals with EDs, but also as a chronic source of emotional dysfunction. The interviews demonstrate that clothing, sizes, social media comments, or daily visual exposure not only affect body perception but also structure maladaptive behavioral and emotional responses. This dimension, often overlooked in traditional clinical approaches, deserves to be incorporated as an explicit therapeutic focus. Understanding fashion as a symbolic language that communicates value, belonging, or exclusion allows clinicians to address the patient's bodily experience with greater depth and sensitivity.

In summary, this study provides robust qualitative evidence that contemporary fashion, far from being a trivial or accessory phenomenon, constitutes a significant matrix of perception, affect, and behavior in women with EDs. Clothing trends not only reflect cultural ideals but impose them in a bodily and emotional manner. Patients internalize these codes as biographical truths and, in many cases, as clinical mandates. This finding demands critical reflection from mental health professionals as well as fashion industry stakeholders. Promoting a more diverse, transparent, and ethically committed clothing culture is not only desirable but necessary as a public health strategy. Integrating this understanding into therapeutic approaches can contribute to more comprehensive, effective, and humanized care for eating disorders.

Limitations:

This study, while offering a deep and contextualized understanding of the influence of fashion on the bodily experience of women with eating disorders, presents some significant limitations that must be acknowledged. Firstly, it relies on a small and homogeneous sample of five female participants, which restricts the generalizability of the findings to other populations, genders, or sociocultural contexts. In relation to the previous point, it is worth noting that neither men nor non-binary people were included, which could have limited the understanding of the phenomenon from a gender perspective. Secondly, as a qualitative design based on in-depth interviews, the results heavily depend on the participants' reflective and verbal abilities, potentially overlooking significant elements that are not articulated or unconscious. Additionally, the study was conducted in a specific context where fashion and social media discourses have a strong cultural presence, which may not be replicable in rural, intercultural, or less digitally connected settings. Finally, although the analysis was rigorous and systematic, the interpretation of the data is influenced by the research team's theoretical and clinical perspective, implying an inevitable degree of subjectivity in the construction of categories and meanings. These limitations do not invalidate the findings but underscore the need to replicate and expand the research with more diverse samples and complementary approaches.

Conclusions:

The findings of this qualitative study allow us to conclude that contemporary fashion, in its symbolic and social dimensions, exerts a significant influence on shaping body image in women who have experienced eating disorders. Constant comparison with idealized models,

internalization of unattainable aesthetic standards, the emotional burden associated with clothing sizes, and daily exposure to body-related content on social media emerge as factors that intensify psychological distress and perpetuate body dissatisfaction. The interviews reveal that clothing and fashion are not neutral elements but operate as cultural devices of validation or exclusion that directly affect self-esteem, the relationship with the body, and social functioning. Likewise, a critical perception is observed toward the superficial inclusion strategies of the fashion industry, which reinforces feelings of inadequacy. Collectively, these findings underscore the need to integrate the analysis of fashion discourse and practices into the clinical understanding of eating disorders and suggest that any therapeutic or preventive intervention must consider not only the biological body but also the symbolic body constructed by the cultural environment. With these in mind, future interventions aim to challenge symbolic norms in fashion and thus support the reconstruction of identity as part of recovery from eating disorders. In addition, future research should explore how individuals resist or reconfigure fashion norms, and how these insights can inform inclusive, identity-affirming interventions.

Declaration of Conflicting Interests:

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Funding:

The authors declare that they did not receive any type of funding for the research, authorship, and/or publication of this article.

Ethical Statement:

Ethical Approval

This study was approved by the Institutional Ethics and Research Comittee on April 25th, 2024.

Informed Consent

A written consent form was provided to respondents for review and signature. All participants provided written informed consent prior to participating. All informed consents were signed by the main author and are in his custody.

References:

- Arango Saraz, M. F. (2021). *Moda como expresión de empoderamiento femenino: Elementos que generan empoderamiento simbólico* (Trabajo de grado, Corporación Universitaria Minuto de Dios). Repositorio institucional UNIMINUTO. https://hdl.handle.net/10656/15267 . No DOI available.
- Attia, E., & Walsh, B. T. (2025). Eating Disorders: A Review. *JAMA*, *333*(14), 1242–1252. https://doi.org/10.1001/jama.2025.0132
- Barthes, R. (2006). *The language of fashion* (A. Stafford, Trans.). Berg Publishers. ISBN: 9781845203803. No DOI available. (Original work published 1967).
- Bourdieu, P. (1984). *Distinction: A social critique of the judgement of taste*. Harvard University Press. ISBN: 9780674212770. No DOI available.
- Braun, V., & Clarke, V. (2014). What can "thematic analysis" offer health and wellbeing researchers?. *International journal of qualitative studies on health and well-being*, *9*, 26152. https://doi.org/10.3402/qhw.v9.26152

- Cash, T. F., & Pruzinsky, T. (Eds.). (2002). *Body image: A handbook of theory, research, and clinical practice*. Guilford Press. ISBN 9781593850159. No DOI available.
- de Freitas, C., Jordan, H., & Hughes, E. K. (2018). Body image diversity in the media: A content analysis of women's fashion magazines. *Health promotion journal of Australia : official journal of Australian Association of Health Promotion Professionals*, *29*(3), 251–256. https://doi.org/10.1002/hpja.21
- Doria, P. (2019). Consideraciones sobre moda, estilo y tendencias. *Cuadernos Del Centro De Estudios De Diseño Y Comunicación*, *42*(42), 101 a 105. https://doi.org/10.18682/cdc.v42i42.1428
- Eatough, V., & Smith, J. A. (2008). Interpretative Phenomenological Analysis. In C. Willig & W. Stainton Rogers (Eds.), *The SAGE Handbook of Qualitative Research in Psychology* (pp. 179–194). SAGE Publications. https://doi.org/10.4135/9781848607927
- Fardouly, J., Pinkus, R. T., & Vartanian, L. R. (2017). The impact of appearance comparisons made through social media, traditional media, and in person in women's everyday lives. *Body image*, *20*, 31–39. https://doi.org/10.1016/j.bodyim.2016.11.002
- Festinger, L. (1954). A Theory of Social Comparison Processes. *Human Relations*, *7*(2), 117-140. https://doi.org/10.1177/001872675400700202 (Original work published 1954)
- Fixsen, A., Kossewska, M., & Bardey, A. (2023). I'm skinny, I'm worth more: Fashion models' experiences of aesthetic labor and its impact on body image and eating behaviors. *Qualitative Health Research*, 33(1–2), 81–91. https://doi.org/10.1177/10497323221141629
- Flügel, J. C. (2015). *Psicología del vestido* (1.ª ed.). Editorial Melusina.

- Griffiths, S., Harris, E. A., Whitehead, G., Angelopoulos, F., Stone, B., Grey, W., & Dennis, S. (2024). Does TikTok contribute to eating disorders? A comparison of the TikTok algorithms belonging to individuals with eating disorders versus healthy controls. *Body Image*, 51, 101807. https://doi.org/10.1016/j.bodyim.2024.101807
- Hernández Moreno, J., (2016). La modernidad líquida. Política y Cultura, (45), 279-282. No DOI available.
- Hernández Bayona, G. (2013). *Psicopatología básica* (pp. 33–38). Editorial Pontificia Universidad Javeriana. ISBN 9789586833325. https://doi.org/10.11144/Javeriana.9789587813081
- Hosseini, S. A., & Padhy, R. K. (2023). Body Image Distortion (Archived). In *StatPearls*. StatPearls Publishing. No DOI available.
- Johns Hopkins Medicine. (2024, diciembre). *Eating disorders among kids are on the rise*. https://www.hopkinsmedicine.org/news/articles/2024/12/eating-disorders-among-kids-are-on-the-rise
- Keery, H., van den Berg, P., & Thompson, J. K. (2004). An evaluation of the Tripartite Influence Model of body dissatisfaction and eating disturbance with adolescent girls. *Body image*, *1*(3), 237–251. https://doi.org/10.1016/j.bodyim.2004.03.001
- McComb, S. E., & Mills, J. S. (2021). Young women's body image following upwards comparison to Instagram models: The role of physical appearance perfectionism and cognitive emotion regulation. *Body image*, *38*, 49–62. https://doi.org/10.1016/j.bodyim.2021.03.012

- Mende-Siedlecki, P., Cai, Y., & Todorov, A. (2013). The neural dynamics of updating person impressions. *Social cognitive and affective neuroscience*, *8*(6), 623–631. https://doi.org/10.1093/scan/nss040
- Meneses Montero, M., & Moncada Jiménez, J. (2008). IMAGEN CORPORAL PERCIBIDA E IMAGEN CORPORAL DESEADA EN ESTUDIANTES UNIVERSITARIOS COSTARRICENSES. *Revista Iberoamericana de Psicología del Ejercicio y el Deporte, 3*(1), 13-34. No DOI available
- Merleau-Ponty, M. (1962). *Phenomenology of perception* (C. Smith, Trans.). Routledge & Kegan Paul. https://doi.org/10.4324/9780203981139
- Mitchell, J. P., Neil Macrae, C., & Banaji, M. R. (2005). Forming impressions of people versus inanimate objects: social-cognitive processing in the medial prefrontal cortex. *NeuroImage*, *26*(1), 251–257. https://doi.org/10.1016/j.neuroimage.2005.01.031
- Nardini, G., Bublitz, M. G., Peracchio, L. A., Rank-Christman, T., & Cross, S. N. N. (2021). Together we rise: How social movements succeed. *Journal of Consumer Psychology*, 31(1), 112–145. https://doi.org/10.1002/jcpy.1201
- Piñero, S. (2008). La teoría de las representaciones sociales y la perspectiva de Pierre Bourdieu: Una articulación conceptual. *Revista de Investigación Educativa*, 7, 1–19. http://doi.org/10.25009/cpue.v0i7.96.
- Piscitelli, A. (2017). La moda y el consumo como formas de comunicación. Transformaciones en el nuevo milenio. URL: https://veredasojs.xoc.uam.mx/index.php/veredas/article/view/455/450. No DOI available
- QSR International. (2022). *NVivo* (versión 14) [Qualitative analysis software]. https://www.qsrinternational.com/nvivo-qualitative-data-analysis-software/home

- Singhal, S. (2024). Fashion and mental health: Exploring the psychological impact of fashion choices on consumer identity. *International Journal for Multidisciplinary Research (IJFMR)*, 6(6). https://doi.org/10.36948/ijfmr.2024.v06i06.32794.
- Smith, J. A., Flowers, P., & Larkin, M. (2009). *Interpretative phenomenological analysis: Theory, method and research*. SAGE Publications. https://doi.org/10.1080/14780880903340091
- Sulthana, S. R. (2022, 29 octubre). Influence of fashion and textiles on mental health. *Journal of Positive School Psychology*, 6(9), 5003–5008. URL: https://journalppw.com/index.php/jpsp/article/view/13468. No DOI availble.
- Urbón Ladrero, E. (2005). En torno al vestido y al cuerpo: moda y aceptación social. Años noventa y años dos mil. *Zainak Cuadernos de Antropología-Etnografía*, 27, 269–268. No DOI available.
- Van den Berg, P., Thompson, J. K., Obremski-Brandon, K., & Coovert, M. (2002). The Tripartite Influence Model of body image and eating disturbance: A covariance structure modeling investigation testing the mediational role of appearance comparison. *Journal of Psychosomatic Research*, 53(5), 1007–1020. https://doi.org/10.1016/S0022-3999(02)00499-3.
- van Manen, M. (1990). *Researching lived experience: Human science for an action sensitive pedagogy*. State University of New York Press. https://doi.org/10.4324/9781315421056.
- Vartanian, L. R., & Dey, S. (2013). Self-concept clarity, thin-ideal internalization, and appearance-related social comparison as predictors of body dissatisfaction. *Body image*, *10*(4), 495–500. https://doi.org/10.1016/j.bodyim.2013.05.004.

Annexes:

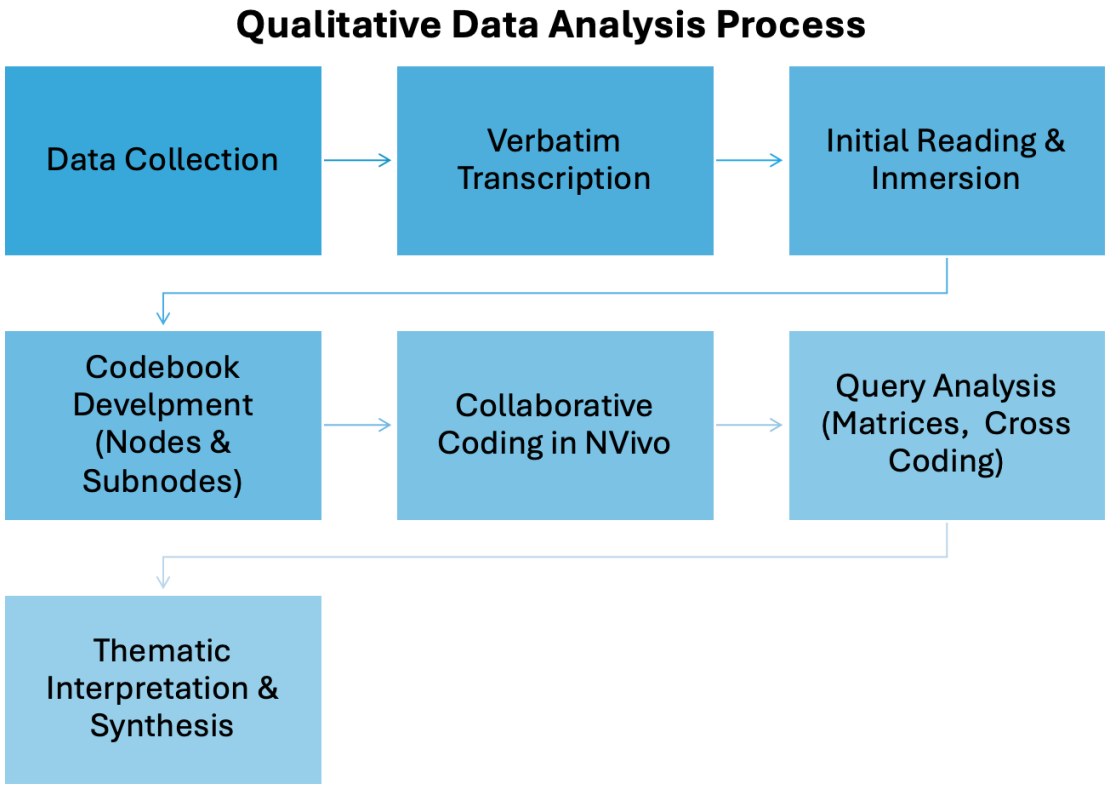
Table 1: Participant Demographics (N=5)

ID Number	*Age*	*Gender*	*Diagnosis*	*Diagnosis Onset*	*Schooling*	*Occupation*	*Region*
1	20	F	Restrictive anorexia nervosa	August/19	Bachelor	Student	Bogotá
2	20	F	Restrictive anorexia nervosa	July/24	Bachelor	Student	Bogotá
3	24	F	Purging anorexia nervosa	October/18	Bachelor	Student	Bogotá
4	18	F	Restrictive anorexia nervosa	July/2024	Bachelor	Student	Bogotá
5	19	F	Restrictive anorexia nervosa	January/2025	Bachelor	Student	Bogotá

Table 2: Categories and Subcategories

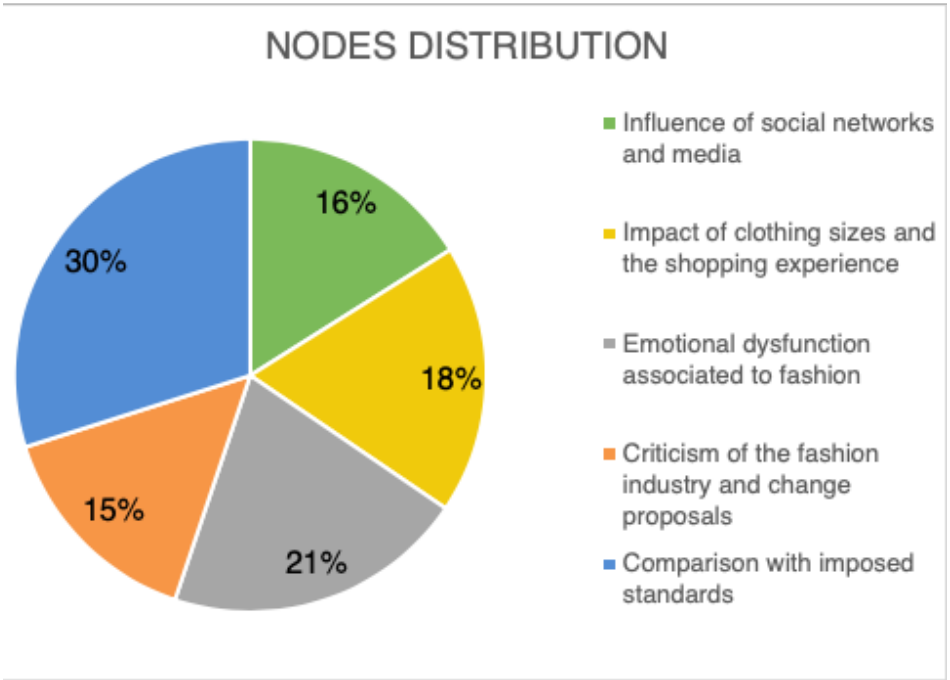
Node	Subnodes
Influence of social networks and media	Propagation of extreme or restrictive diets
	Normalization of edited or unrealistic bodies
	Influencers impact on self-image
	Ambivalence to inclusivity movements
Impact of clothing sizes and the shopping experience	Store avoidance as a protection strategy
	Desire to fit into a size as a body validation
	Negative emotional association with size
	Anxiety about size variability between brands
Emotional dysfunctional associated to fashion	Feelings of unworthiness
	Rejection of one's own body
	Direct influence on self-esteem and mental health
	Social isolation to avoid showing one's body
Criticism of the fashion industry and change proposals	Recommendations to brands on diverse body representation
	Proposals to promote genuine and healthy bodies
	Perception of commercial strategies as forced
	Symbolic vs. actual inclusion in advertising campaigns
Comparison with imposed standards	Internalization of unattainable aesthetic ideals
	Emotional impact of comparison
	Peer comparison (friends, peers, family members)
	Comparison with public figures and models

Figure 1: Qualitative Data Analysis Process



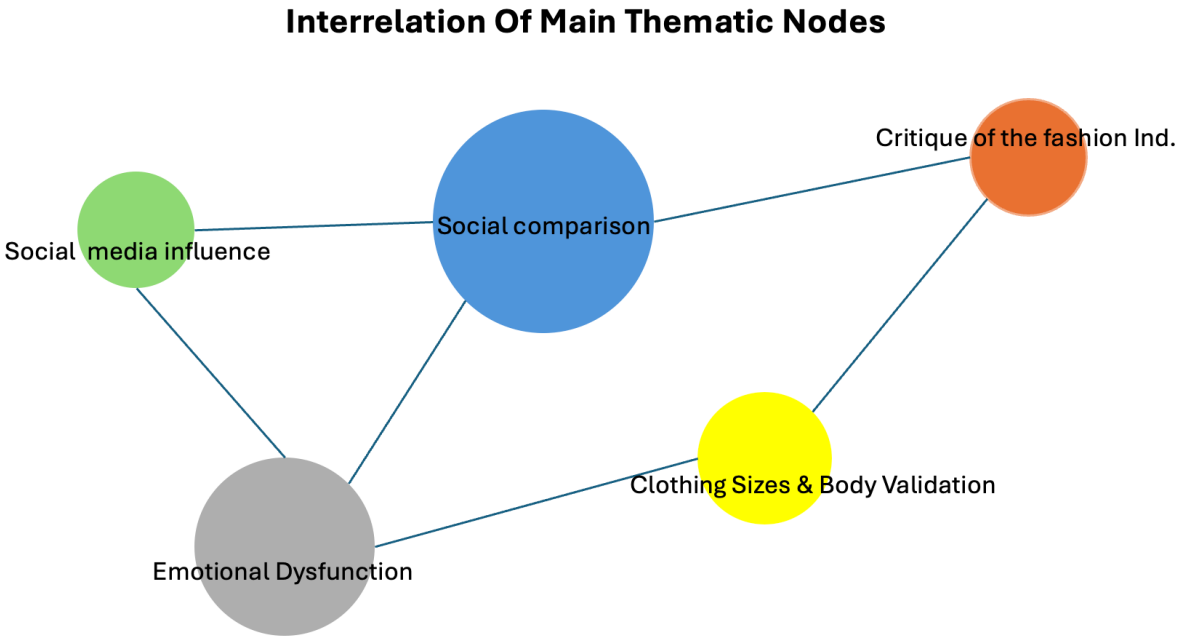
This figure summarizes the data analysis process, from collection, coding, analysis and interpretation.

Figure 2: Nodes Distribution



This figure shows the five main nodes identified by the research team, with the frequency with which they are repeated in the interviews conducted with the participants.

Figure 3: Interrelation Of Main Thematic Nodes



The figure represents the interplay of key factors shaping body dissatisfaction in women with eating disorders. At its core, emotional dysfunction stands as the nucleus, impacted by social comparison and body validation through clothing sizes, both directly influenced by social media content. In turn, participants critique the fashion industry for reinforcing these standards, intensifying self-judgment toward their bodies. The visual model reveals how these factors converge, weaving a symbolic and emotional web that sustains eating disorder symptoms.