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Improving Self-Acceptance of Body Shaming using Gratitude Journal Method

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ABSTRACT

The primary objective of this study is to address the issue of low self-acceptance caused by Body Shaming. In order to promote positive aspects of human beings, such as engaging in Gratitude Journal activities, the Gratitude Journal was utilized. The study is a Pretest-Posttest Random Group Design that focuses on early adult female victims of Body Shaming. The sample consists of 20 participants, 10 in the Treatment Group and 10 in the Control Group. These participants were selected using a non-probability incidental sampling technique, and they all shared similar initial conditions, including awareness of the psychological effects of Body Shaming and the desire to overcome the problem. Regarding the Treatment Group, the intervention was a 21-day *Gratitude Journal* activity, which involved writing down the good things obtained in life. The measuring tools used included the Self-Acceptance Scale and the Gratitude Scale. The results showed that Gratitude Journal were effective in improving both self-acceptance (p= .004) and gratitude (p= .005). This study concluded that victims of Body Shaming can improve their self-acceptance and overcome the psychological effects they experience.

Key words: body shaming, gratitude journal, positive life, self-acceptance.

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Novelty and Significance

What is already known about the topic?

- · Research on Self-acceptance and Gratitude are considered an important topic because of its benefits to human life.
- Self-acceptance and Gratitude are imperative for some people experiencing body shame-type psychological distress.
- There have been many studies of psychological intervention that can be used to improve conditions in victims of body shame, including routine positive counseling, self-expression through art and physical activity, or a personal spiritual approach.

What this paper adds?

- Explore the Gratitude Journal method as a form of intervention for victims of body shaming.
- This type of intervention is more relevant when the affected people feel depressed, helpless, pessimistic and give rise to
 other psychological disorders.
- This study combined self-acceptance and gratitude, unlike previous interventions that usually focused only on a particular variable.

According to data cited from IDNTimes.com, the standard for an ideal body shape has existed since the time of the Renaissance and continued into the Victorian era. However, this ideal standard has evolved over time and across cultures in various countries (Sjarief, 2015). Today, the visualization of the ideal body shape is portrayed through various media such as TV commercials, the internet, and fashion magazines (Tiggemann, 2003). This has a significant impact on the ideal body shape standards in society and becomes a concept or paradigm embedded in daily life. In Indonesia, discussions about physical appearance are considered normal in family and friendship circles. Unfortunately, these discussions can often turn into the subject of jokes or teasing, which indirectly constitutes Body Shaming. These discussions often become the starting topic of conversation during reunions or when accidentally meeting old friend.

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Although not everyone is willing to accept criticism of their physical appearance, many remain silent due to the fear of being seen as overly sensitive. However, the impact of Body Shaming cannot be underestimated. This is because in Thailand, a 17-year-old teenager committed suicide after being repeatedly teased by his friends for being overweight (Kwan, 2018). Ariel Tatum, an Indonesian actress, also confessed to experiencing depression and attempting suicide due to the Body Shaming she experienced (Hanna, 2019). In early 2020, a 27-year-old man burned a female co-worker who frequently mocked his physical appearance (Fanani, 2020).

According to a Body Peace Resolution survey conducted with Yahoo, one of the largest search engines, 94% of teenage girls and 64% of teenage boys from a sample of 2000 people aged 13-64 have experienced Body Shaming (Dzultamulyana & Supratman, 2021). Moreover, WW, a health company, found that the majority of Body Shaming targets are body weights, where 6 out of 10 adults receive negative comments about their physique based on a survey reported by independent.co.uk (Hughes, 2019). In 2018, the Indonesian National Police reported that they had handled 996 cases involving Body Shaming (Santoso, 2018).

From the aforementioned observations, it can be concluded that Body Shaming is a grave issue, particularly because it significantly affects the psychological well-being of victims. According to Sakinah (2018) the effects of Body Shaming often lead victims to do anything to achieve an ideal body, causing them to lose confidence and feel insecure. Damanik (Sakinah, 2018) suggested that individuals who experience Body Shaming tend to pay more attention to their body and turn it into an object (self-objectification). Research has shown that individuals who experience Body Shaming tend to develop a negative perception of their bodies because they feel below standards set by others. Consequently, victims struggle to feel self-sufficient and try to meet these ideal body standards by every possible means.

Self-acceptance in psychology is a situation in which a person acknowledges and embraces their true personality. According to Glover *et alia* (2016), self-acceptance arises from objectively evaluating one's strengths and weaknesses in a given situation. Hurlock (1991) also stated that self-acceptance entails accepting both positive and negative aspects of oneself. Therefore, when individuals face difficult situations, they can approach the problem rationally and set aside any feelings of low self-esteem, insecurity, shame, or hostility that may arise. Based on the definitions previously discussed, it can be inferred that self-acceptance involves objectively evaluating one's strengths and weaknesses, and embracing both aspects. This ability allows individuals to approach difficult situations with a logical mindset, rather than being hindered by unpleasant situations.

Ryff (1989) explained that self-acceptance is characterized by a positive self-image and the acknowledgment of both strengths and weaknesses without shame or guilt. Individuals with self-acceptance possess high self-esteem and are not pessimistic (Supratiknya, 1995). Additionally, Chaplin (1999) defined the phenomenon as a sense of satisfaction with one's qualities and talents, as well as recognition of one's shortcomings.

Body Shaming has been found to have a negative impact on body image (Sakinah, 2018), which has a close relationship with self-acceptance. Individuals with positive body image tend to have high levels of self-acceptance, and vice versa (Yazdani *et alia*, 2018). Low self-acceptance in individuals can negatively impact various aspects of their lives. Fostering self-acceptance in individuals is crucial to enhance their satisfaction, self-worth, and ability to develop their strengths. In other words, there is a need for intervention with suitable and proven factors from studies or theories from experts that can help improve self-acceptance.

A preliminary study was conducted on 30 women between the ages of 18-28 who had been victims of Body Shaming. Most subjects reported feeling less confident, insecure, and dissatisfied with their body due to the comments made by the perpetrators. Further interviews conducted with five of the 30 subjects revealed that the negative effects were due to feelings of being different, being ostracized, and frequently experiencing Body Shaming. This altered the body image of participants and led to questioning whether they need to conform to society's standards. Additionally, the participants questioned whether they need to have bodies that meet certain standards and whether they are truly unattractive. To avoid experiencing further instances of Body Shaming and gain social acceptance, the respondents engaged in behaviors such as self-care, taking weight gain supplements, and even wearing two layers of clothing to appear fuller. Almost all of the subjects reported dissatisfaction with their bodies and desired a change, but none reported liking their bodies. The experiences of the victims proved that Body Shaming negatively affects both self-acceptance and gratitude.

Watkins *et alia* (2003) described self-acceptance as a component of well-being that is considered a variable in positive psychology and is closely related to gratitude. Seligman *et alia* (2005) examined the efficacy of 5 different interventions to boost personal happiness and decrease depression levels. It was discovered that gratitude is a trainable variable capable of being improved through intervention. Based on the various explanations above, there is a need to conduct an intervention to improve self-acceptance through gratitude.

Self-acceptance is the state in which an individual fully accepts everything about themselves (Camp et alia, 2020; Crowne & Stephens, 1961). According to Glover et alia (2016), it involves objectively evaluating oneself and one's condition by accepting both strengths and weaknesses. Ryff (1989) also stated that self-acceptance is when someone has a positive self-image and acknowledges their strengths and weaknesses without feeling ashamed or guilty about their nature. Glover et alia (2016) identified seven aspects of self-acceptance, namely (1) having confidence in oneself and believing that one can cope with any situation that arises in life; (2) basing attitudes and behaviors on personal values and principles rather than external pressures; (3) considering oneself to be of equal worth as other human beings; (4) taking responsibility for one's actions and acknowledging that every action has consequences; (5) accepting praise and criticism objectively, without allowing it to affect their sense of self-worth; (6) not blaming oneself for limitations or denying one's strengths (in this scenario, individuals do not feel helpless or useless when they realize their weaknesses in a certain area or situation, similarly, they do not deny their strength when it is recognized); and (7) not feeling rejected or being shy around others, while recognizing and embracing their unique qualities.

According to Seligman *et alia* (2005) gratitude is a natural feeling of happiness and appreciation arising in response to gifts received, regardless of whether they are perceived by others or provide a sense of comfort and safety. Emmons and Stern (2013) further explained that gratitude is a response to receiving a gift, and is a way of expressing appreciation for the altruistic kindness from others.

Fitzgerald (1998) identified three aspects of gratitude, namely (1) warm appreciation towards someone or something, which involves recognizing the role of others in our well-being and being mindful of the simple pleasures provided by God; (2) good feelings or intentions towards someone or something, including contentment with one's situation and enjoyment of other people's presence; and (3) a positive behavior that arises naturally from a sense of gratitude and good intentions, leading individuals

to perform acts of kindness and do their best in all activities as a form of gratitude towards life and God/Allah. Believers are commanded by Allah to express gratitude for all blessings, whether physical material or other things. In a hadith, the Prophet Muhammad instructed his followers to look at those who are less fortunate, rather than those who are more privileged. For example, someone with a physical disability needs to serve as a reminder of Allah's blessings. Surah At-Tin verse four states that humans were created in the best form, hence it is appropriate to be grateful for the physical form given by Allah. It can be concluded that those who engage in Body Shaming are criticizing Allah's creation and are at risk of punishment in the hereafter.

Several studies and theories have established a connection between self-acceptance and gratitude. Hurlock (1991) stated that individuals who have a positive self-image tend to accept themselves and are more likely to be accepted by others. They are also able to direct positive emotions, such as expressing gratitude. This makes Watkins *et alia* (2003) conclude that gratitude is a strong predictor of a person's well-being. Murniasih (2013) also found that gratitude can increase self-acceptance, being a component of well-being. Accoding to Froh *et alia* (2009) that gratitude facilitates self-acceptance and can lead to happiness, optimism, and pleasure. Based on the above theories and studies, self-acceptance arises from gratitude.

The intervention method used in this study is Gratitude Journal, introduced by the positive psychology organization to record good experiences in life. Several studies have investigated the effectiveness of this technique, such as the one conducted by O'Connell *et alia* (2017), stating that reflective and reflective-behavioral journaling had a significant and positive impact on well-being, affection, and depression after three months. Another study performed by Sucitra and Tiatri (2019) on cancer patients for two weeks showed that Gratitude Journal effectively reduced depressive symptoms. Also, Emmons and McCullough (2003) demonstrated that students who noted positive experiences reported increased social relationships, improved health, as well as greater life satisfaction and happiness.

Метнор

Participants

A total of 20 young adult females participated in this study, all of whom voluntarily registered to participate by filling out a Google form with an average age of respondents (20.4 years). This study employed non-probability sampling, specifically the incidental sampling technique, to select relevant respondents who are available. The participants comprised early adult women who had been body-shamed and suffered psychological effects. They were selected based on their initial perception of experiencing psychological effects from Body Shaming and the desire to overcome the problem.

All procedures performed in this study involving human participants were in accordance with the ethical standards of the institutional research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards. Informed consent was obtained from all individual participants included in the study.

Design

The Participants were grouped into two, namely Control Group and Intervention Group. In consequence a pretest-posttest Control Group design was used. The two

categories of Participants were grouped based on the same criteria and were given a pretest using the same scale. Treatment was then provided only to the treatment group. Finally, both groups were evaluated again as a final comparison to observe the effect of the independent variable on the dependent (Creswell, 2014).

Instruments

Self-Acceptance Scale (Kusuma, 2012). This scale consists of 20 items that reflect aspects proposed by Glover et alia (2016). Furthermore, the items were grouped into 11 favorable and 9 unfavorable statements, respectively. In the analysis of the self-acceptance measuring tool item number 5 was dropped due to its correlation value of 0.149, which was below the standard rating of 0.25. This item was declared invalid based on the opinion of Azwar (2012) that the minimum correlation value for reducing items is 0.25, lowered from the previous standard of 0.3. In the reliability test, the Cronbach alpha obtained was 0.819, which exceeded the minimum value according to Azwar (2012). The validity of this measuring instrument was tested using Guilford (1956) recommendation of a limit value for the dimensional validity of a variable.

Gratitude Scale (Listiyandini, Nathania, Syahniar, Sonia, & Rima, 2015). This scale is based on the aspects proposed by Watkins et alia (2003) and Fitzgerald (1998). This measuring instrument consists of 30 items, with 13 favorable and 17 unfavorable items. After analyzing gratitude measuring instrument, it was observed that item number 11 had a correlation value of 0.167, and it was below the standard value of 0.25. Consequently, this item was considered invalid based on Azwar (2012) recommendation that the minimum correlation value for items is 0.25. In terms of reliability, the Cronbach alpha obtained was 0.917, and it exceeded the minimum limit as prescribed by Azwar (2012), which is between 0.7 and 0.8.

Procedure

The positive psychology domain was used to evaluate self-acceptance and gratitude. A Gratitude Journal, one of the training activities developed by Emmons (2013) was employed for participants in the Intervention Group. The journaling activity involves writing down the good things the subject has experienced or felt daily. In addition, this activity aimed to instill gratitude and self-acceptance in the respondents for three weeks. The manipulation results were then measured by reassessing the self-acceptance and gratitude of the subjects.

This study was conducted under challenging circumstances due to the COVID-19 pandemic restrictions, and also because the participants came from various regions in Indonesia. To support the Intervention Group, a daily optimization was provided through the Whatsapp private chat application during the afternoon and evening for three weeks. The subjects who had not filled out the journal were checked and reminded to complete the activity.

Data Analysis

A descriptive analysis was performed to categorize the results obtained from each subject. Parametric and non-parametric statistical methods were utilized, specifically the paired sample t-test, which analyzes the difference between the pretest and post-test scores for a paired sample (Creswell, 2014). This also includes the Wilcoxon Match Pairs Test, which compares pretest and posttest between the Intervention and Control groups. A p <.05 based was used in the decision-making (Azwar, 2012).

RESULTS

The results indicate that the Intervention Group showed a M= 45.70 and a SD= 11.116 for the Self-acceptance pretest and a M= 59.80 and a SD= 11.755 for the post-test. In terms of Gratitude, the Intervention Group obtained a M= 112.40 and a SD= 17.621 regarding the pretest, and a M= 134.50 and SD= 16.662 for the posttest (see Table 1).

Table 1. Descriptive statistical pretest and posttest on Self-Acceptance and Gratitude for Intervention Group (n=10).

		M	SD	Minimum	Maximum	p
Self- Acceptance	Pretest	45.70	11.116	31	63	.004
	Posttest	59.80	11.755	32	73	
Gratitude	Pretest	112.40	17.621	88	147	.005
	Posttest	134.50	16.662	95	153	

The Control Group showed a M=56.80 (SD= 10.581) in the pretest, and a M=57.60 (SD= 8.422) at the post-test. Concerning Gratitude, showed that the pretest and posttest results in the Control Group were M scores of 127.20 and 126.60, while SD were 18.849 and 15.378, respectively (see Table 2).

Table 2. Descriptive statistical pretest and posttest on Self-Acceptance and Gratitude for Control Group (n=10).

for Control Group (n=10).						
		M	SD	Minimum	Maximum	p
Self-acceptance	Pretest	56.80	10.581	41	71	.772
	Posttest	57.60	8.422	40	69	
Gratitude	Pretest	127.20	18.849	98	153	.412
	Posttest	126.60	15.378	98	149	

Normality and homogeneity tests were conducted to determine the extent to which the data were normally distributed and homogeneous. In this study, the Shapiro-Wilk test was employed and the normality test result for self-acceptance data indicated that it is normally distributed, while the one for gratitude had some non-normal data. The homogeneity test on the results on self-acceptance and gratitude showed that both had homogeneous data.

In this stage, two different hypothesis tests were used because the data on Gratitude variable is not normally distributed, while that of Self-acceptance was normally distributed. A paired sample *t*-test, with a significance level of .05, was used to test the Self-acceptance data. On the other hand, a non-parametric Wilcoxon test, with a significance level of .05, was applied to test Gratitude data.

The test results for Self-acceptance in the Treatment Group (see Table 1) showed a p= .004. In contrast, there were no significant change between the pretest and posttest in the Control Group (p= .772; see Table 2). The Wilcoxon test result for Gratitude revealed a value of p= .005, for Intervention Group showing a difference in the mean scores between the pretest and posttest (see Table 1). In contrast, for the Control Group a p= .412, means there is no significant change between the pretest and posttest (see Table 2).

DISCUSSION

The results showed a significant impact of Gratitude Journal method on self-acceptance in the Treatment Group. This is in line with Emmons (2013) suggesting that gratitude can be a positive variable and promote other positive aspects, such as self-acceptance. Furthermore, the theory proposed by Hurlock (1991) supported the idea that expressing gratitude can lead to positive emotions. This is consistent with Froh *et alia* (2009) stating that being grateful can assist individuals in self-acceptance, being happy, and realizing the blessings they have received.

Gratitude variable in the Treatment group indicated a p value of .005. This infers a significant change in the value between the pretest and posttest. Therefore, it can be concluded that Gratitude Journal also affects gratitude of the participants. Regarding the Control Group, the p value was .412, implying that there was no significant change between the pretest and posttest. These results align with Emmons's (2013) proposal that keeping a Gratitude Journal can train and increase gratitude in individuals. Similarly, the study by O'Connell *et alia* (2017) demonstrated comparable outcomes that writing about gratitude can assist individuals in determining the things to appreciate, leading to a significantly positive impact on their well-being and affection.

In the posttest result of the self-acceptance variable in the Treatment Group, one participant had a low and moderate score, respectively, while eight participants had a high rating. The participant with a low result was the one in number 5, who often wrote about non-gratitude-related topics such as complaints about life and suicidal thoughts during data collection and journaling. Despite the various attempts to redirect the purpose of journaling, the participant remained unchanged. Based on the statement of the subject regarding the "suicidal thoughts", there is a need to refer to a professional in order to address the problem. The respondent with a moderate result was participant number 2, who generally journaled well, but sometimes filled out the journal late. Those with a high category include participants 1, 3, 4, 6, 7, 8, 9, and 10. All participants in this category carried out the journaling properly, although some were late in filling out Gratitude Journal.

Gratitude Journal was implemented online due to COVID-19 pandemic in 2020, while the data collection and journaling occurred during Ramadan. At this time, Indonesia was experiencing a surge in Covid-19 cases, hence, some participants tested positive and were self-quarantined. During the implementation, one participant stopped journaling on the second day, and a replacement had to be found, which caused a delay in data collection. These disturbances are considered extraneous variables (Christensen, 1988) and need to be controlled by ensuring voluntary participation and commitment to the intervention. The study also included a Control Group and reserve subjects, however, the disturbances cannot be completely avoided, which eventually affected the intervention process.

The results revealed that the Intervention Group had a significantly higher mean self-acceptance value than the Control. Furthermore, the Intervention Group had a higher average gratitude value than the Control Group, indicating a significant improvement due to Gratitude Journal intervention. It can be concluded that Gratitude Journal could help victims overcome the negative effects of Body Shaming by increasing self-acceptance and gratitude. This study provides insights into knowledge development, especially in positive psychology, and can serve as a reference for further studies on self-acceptance and Gratitude Journal.

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