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The Antecedents of the Intention to Lose Weight Quickly: A Proposed Model

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ABSTRACT

Individuals imbued with ideas of weight loss may present a tendency to minimize cognitive dissonance and psychological and physical suffering with the use of procedures that lead to quick and painless weight loss. The magical effect provided by weight-loss products leads individuals to envisage an easier and faster way to reduce dissatisfaction. Therefore, this study aims to present a proposed model of the antecedents of the intention to lose weight quickly with the use of weight-loss products or restrictive diets. The constructs that precede the intention to lose weight quickly are the intention to lose weight quickly, intention to lose weight, dissatisfaction with body image, social comparison of physical appearance, BMI and concern with physical appearance. Finally, the moderating factors of the described relations are listed: distance from the goal, self-esteem and age.

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INTRODUCTION

When women refer to health, two aspects stand out: a healthy body is thin and free of fat and; control of food intake and output represents good management of the body. These two ideas illustrate a cultural context in which the "healthy weight" discourse suggests fatter bodies with are a health issue and encourages weight control and weight-loss practices (Burns and Gavey, 2004).

The use of non-prescription and possibly harmful weight-loss products or methods, such as teas, shakes, diabetes medications, laxatives, homeopathic pills, oils, over-the-counter appetite suppressants, over-the-counter sugar-consumption inhibitors, metabolism accelerators and drugs not prescribed for rapid weight loss (Thogersen-Ntoumani *et al*., 2011) poses a health risk and is preponderant in the development of eating disorders (Quinones *et al*., 2013; Berg, 1999; Cogan and Emsberger, 1999).

As they are more sensitive to the pursuit of the stereotypical slim body and perceive it as being synonymous with health and beauty, women are more likely to consume such products. In pursuing an idealized slimness, women endanger their health (Yager and O'Dea, 2010) which makes it a social and public health problem (Cogan and Emsberger, 1999). Women who use weight-loss products tend to believe they are safer than other methods and practices and do not represent health risks (Tylka and Subich, 2002).

Currently, marketing studies that deal with health-care related issues can essentially be divided into two categories. Firstly, healthy lifestyle: where the most studied topics are barriers to a healthy lifestyle, decision making for healthy habits, maintaining such habits, disease prevention and healthy practices that include exercise, dieting, etc. Secondly, healthy and indulgent eating, including topics such as: regulatory guidance, behavior intention, self-control, pride, sense of control, the size of food portions, healthy habits, satiety, decision making, impulsivity, price, regulation of the food industry, obesity, ambivalent attitude, hostile environment, mood and hedonic issues.

Del Piori (2009) believes women identify a perception of youth in the achievement of the stereotypical thin body and in youth a sense of health, with the mass media acting to legitimize a thin body as being synonymous with beauty and beauty as synonymous with health. Cohen *et al*., (2009) argue that the unrest generated in the search for an ideal body image is strongly linked to the

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intention to lose weight, which also increases the intention to use products that promote rapid weight loss.

Before dealing with these initial questions, it is important to analyze the factors that explain the intention to lose weight quickly, because it is an unhealthy practice associated with the consumption of a wide range of products that can have undesirable consequences for the individual. Therefore, the literature search conducted in the present study suggests the factors anteceding the intention to lose weight quickly are more closely associated with issues related the search for a desirable body shape (the stereotype of beauty – the thin, youthful physical appearance of the woman) rather than issues involving proper care or concerns regarding health.

This theoretical essay seeks to understand the antecedents of the intention to lose weight quickly and proposes a model that attempts to explain the factors that lead women to engage in practices such as the consumption of weight-loss products or the adoption of restrictive diets ("miracle" diets that promote rapid weight loss), which are considered unhealthy and potentially dangerous practices (Pirsch *et al*., 2013; Kaplan *et al*, 2013;. Stirling *et al*., 2012).

Antecedents of the Intention to Lose Weight Quickly:

This section outlines the research analyzed in the identification of the antecedents of the intention to lose weight quickly. The antecedents are described in the following order: social comparison of physical appearance, BMI, concern with physical appearance, body image dissatisfaction, intention to lose weight and intention to lose weight quickly. Finally, the factors that moderate the described relations are listed as distance from the goal, self-esteem and age.

Relationship between the comparison of physical appearance and body dissatisfaction:

The most important predictor of dissatisfaction with body image is the level of social comparison, when made in relation to a figure considered ideal (comparing physical appearance), and the higher the level of the comparison relative to the ideal figure the greater the dissatisfaction with body image. In this situation, the propensity to adopt weight-loss activities increases, and the more susceptible the woman is to the stereotype of beauty the more dissatisfied she tends to be with her body image and the greater her susceptibility to adopt weight-loss activities (Bissell and Rask, 2010).

The extent of the difference between the current body and that desired by the woman is augmented by the lateral and upward comparison (Sohn, 2010). Social comparison is a strong predictor of dissatisfaction with body image (Pruis and Janowsky, 2010). In addition, negative feedback from other people is related to the perception of body image and, in social comparison situations, affects the perception of body image, heightening body image dissatisfaction (Thompson, Coovert, and Stormer, 1999).

When women are exposed to ideal figures in advertising (upward social comparison) their dissatisfaction with their body image heightens, mood, depression and self-esteem worsen, and the negative effects of the comparison with the ideal images are amplified (Bessenoff, 2006) and the quest for thinness is heightened (Ferreira Pinto-Gouveia and Duarte, 2013; Cahill and Mussap, 2007). In advertisements, thinner models are better accepted by women (Chan *et al*., 2012; D'Alessandro and Chitty, 2011; Lin and Reid, 2009), which increases the feeling of inferiority in relation to rivals, increasing the levels of image body dissatisfaction (Ferguson *et al*., 2011).

Body image dissatisfaction is exacerbated in the presence of other women if a climate of competition exists among them, especially in the presence of a desirable man (Ferguson *et al*., 2011). High levels of social comparison tend to increase competition among women and consequently the rejection of figures close to the stereotype of physical beauty, thus creating enhanced self-esteem that allows them to perceive themselves as being more attractive (Buunk and Dijkstra, 2011). Idealized images affect psychological satisfaction in situations of social comparison (Stormer and Thompson, 1996).

The images propagated by the media generate upward social comparisons and accentuate body image dissatisfaction (Cogan and Emsberger, 1999). The visceral responses of consumers consist of those cognitive responses associated with instinctual drives that do not require great cognitive or rational processing and are produced without planning, which may occur in relation to stimuli like advertising that increase upward social comparison (Amos and Spears, 2010). Social comparison modifies the effect of the stereotype of beauty in the perception of body image, and in the presence of figures larger than their own body image satisfaction with body image in women increases (D'Alessandro and Chitty, 2011). The result of social comparison increases the gap between the perception of the current figure and the ideal figure, and the larger BMI the greater gap (Sohn, 2006).

Social comparison, then, is understood to be the main predictor of body image dissatisfaction, and the more women compare themselves with other women the greater their tendency to be more dissatisfied with their own body image (Pruis and Janowsky, 2010; Bissell and Rask, 2010; Sohn 2010). Since, by constantly constant comparing themselves with others, women may perceive body characteristics in other women that approximate the idealized figure or that may arouse envy of the body shapes of other women. Such comparison may increase dissatisfaction with one's own body image due to the

internalized desire to have an image equal to that of other women or different from one's own body self-image.

Relationship between Body Mass Index and Concern with Physical Appearance with Body Image Dissatisfaction:

According to the WHO (2006), the Body Mass Index (BMI) is measured by dividing the individual's weight by the height squared, which results in an index that represents the amount of body fat. A BMI between 18 and 25 is considered normal. The individual with a BMI less than 18 is considered underweight while the individual the individual with a BMI above 25 is considered overweight. In women, the higher their BMI the greater is their tendency to be more dissatisfied with their body image and consequently the greater desire to lose weight (D'Alessandro and Chitty, 2011). When in situations of social comparison, women tend to increase the gap between the perception of the current figure and that of their ideal figure, while women with higher BMIs tend to amplify this gap and increase the perception of barriers to achieving the ideal (Sohn, 2006).

The higher the woman's BMI the greater her dissatisfaction with her body image tends to be (Lin and Reid, 2009). Women with higher BMI's tend to be more motivated to adopt weight loss practices due to their tendency to be more dissatisfied with their body image (Williamson *et al*., 1992). In adolescent girls, body dissatisfaction tends to be stronger when their BMI is higher (Ferguson *et al*., 2011). Eating habits, intensity of the concern with appearance and BMI are predictors of dissatisfaction with body image, the higher the BMI, and the more restrictive the diet, the greater the dissatisfaction with body image (Lattimore and Hutchinson, 2010).

The higher a teenage girl's BMI, the lower her assessment of her physical appearance tends to be and consequently the more like she is to dissatisfied with her body image (O'Dea, 2006). A high BMI is associated with the intention to lose weight and dissatisfaction with body image (Fan *et al*., 2010). Dissatisfaction with the body also appears in women of normal weight or with a BMI considered within the healthy range (Rodin *et al*., 1985). A study of body image dissatisfaction conducted in Brazil by Alvarenga *et al*., (2010) showed that overweight respondents (BMI higher than 25) idealize figures smaller than their current figure.

High levels of concern about physical appearance, weight and body image increase the consumer's susceptibility to produce a visceral response to the promise of weight loss products, due to the increased hedonic perception of weight loss products, generating greater impulsivity and a propensity to use weight loss products (Amos and Spears, 2010). The more the woman is concerned with physical appearance the greater the tendency to be dissatisfied with body image and the greater the propensity to engage in weight loss practices.

High levels of involvement with body image and concern with physical appearance increase the propensity to intend to improve the body (Sohn, 2006). Involvement with body image (more concerned with physical appearance) is the factor that increases or decreases the intention to lose weight (McCabe and Ricciardelli, 2003). Intensity of the concern with appearance is a predictor of dissatisfaction with body image and the greater the concern with appearance the greater tendency to be dissatisfied with the body (Lattimore and Hutchinson, 2010).

Based on the statements highlighted in this section, it can be understood that when a woman has a BMI above 25 and the more she compares herself to other women, the more likely she is to be more dissatisfied with her body image. In this same relationship (social comparison and body image dissatisfaction), it follows that the higher the level of social comparison and the greater concern with physical appearance, the greater the tendency towards dissatisfaction with the body image. Thus, both factors are understood to contribute towards increasing the level of dissatisfaction with the body.

Relationship between Body Image Dissatisfaction and Intention to Lose Weight:

Thinking negatively about one's appearance is a major source of unhappiness and generates both dissatisfaction with body image and low self-esteem. The more the one thinks negatively about one's image the greater the dissatisfaction with the body image and the greater propensity to engage in weight loss practices (Verplankena and Tangelder, 2011). Desire to lose weight in order to be thin is preceded by body image dissatisfaction (Koskina and Giovazolias, 2010).

The intensity of the body dissatisfaction determines the intention to lose weight. In female adolescents, body image dissatisfaction is the most important factor in determining the intention to lose weight, regardless of the consequences that such activities may have on health. The intention to lose weight is more closely linked to the way women relate to their bodies, i.e., the intensity of the body image dissatisfaction determines the intention to lose weight (Hjelkrem *et al*., 2013). Dissatisfaction with body image leads to a quest for an idealized thinner silhouette, which is perceived as being synonymous with health, while excessive weight (far from idealized) is associated with a disease (Cogan and Emsberger, 1999).

This section has dealt with theories that seek to explain a state of activation for weight-loss-related activities represented by the implementation intentions, which materialize the individual's motivation to reduce or eliminate body image dissatisfaction by engaging in actions that provide

results that will approximate the individual's body image to that considered ideal. The individual's intention to lose weight generates a motivation of an intrinsic or extrinsic nature that produces an implementation intention to lose weight.

Relationship between Intention to Lose Weight and Intention to Lose Weight Quickly:

An explanation of the effect of rapid weight loss linked to weight loss caused by weight-loss products and restrictive diets can be found in the study by James *et al*., (2011) on the effect of 'Magical Thinking' - which is the evocation of irrational and magical solutions that minimize the effect of stress on decision-making. 'Magical Thinking' helps to explain the magic power of rapid weight loss, which would turn an uncomfortable situation of being heavier than the weight considered ideal into one of reaching the ideal weight in a short time and with little effort. Magical solutions generate quick weight loss by using weight-loss products and restrictive diets while minimizing the effort required by the individual and maximizing the result.

Therefore, the visceral responses to advertisements for weight loss products are positively associated with impulsive consumption, purchase intention, attitudes toward the product and attitudes toward the advertising of rapid weight-loss products. A high level of involvement with weight and body image, not necessarily in obese consumers, increases the susceptibility of the consumer to a visceral response by increasing the hedonic perception of weight loss products, generating greater impulsivity. High levels of involvement with a reward increase the susceptibility to a visceral response (Amos and Spears, 2010).

With the expansion in the search for health and beauty in western society (Gould, 1988) products that aid in the quest for this stereotype have appeared, which may refer to the perception of not only a desirable appearance, but also a healthy body with the minimization of body fat. Levels of body fat can be reduced to a minimum with the use of a large range of products or procedures that include medicines, slimming products, diet pills, homeopathic products, aesthetic treatments and plastic surgery that promote rapid weight loss (Ruel, 2007).

When a product or service represents status to the individual, as do slimming products, the likelihood of adopting risk behavior increases (Bolton *et al*., 2006). This finding can be seen to be related to the stereotypes of physical beauty that are sources of status and self-esteem and ultimately increase the propensity of certain individuals to adopt slimming practices that are potentially harmful to their health.

The intention to lose weight can be effected in a variety of ways among which are slimming products, restrictive diets, guided diet, exercise, liposuction and plastic surgery, for example. In the present study, both restrictive diets and slimming pills/products were considered to have the same function, to produce rapid weight loss. Women can adopt these two paths to lose weight quickly, with less effort and suffering. Therefore, in order for an intention to lose weight to lead to an intention to lose weight quickly and therefore to the use of slimming products and restrictive diets, it is necessary that the individual feels motivated to use certain a technique/product to achieve weight loss. Based on this intention to implement weight loss the individual who seeks to minimize their effort and maximize their weight loss may adopt an intention to implement rapid weight loss that leads to the use of slimming products and restrictive diets.

Self-Esteem and Distance from the Goal as Moderators:

The function of self-esteem is to motivate the individual to have behaviors that minimize the possibility of social rejection. When individuals have higher self-esteem they are less prone to feel rejected by the social group and less sensitive to other people's opinions (Leary, 1999). Idealized standards of beauty for female body are the main cause of dissatisfaction with the body self-image that enhances existing low self-esteem (Thompson and Stice, 2001). The more one thinks negatively about one's own appearance, the greater the unhappiness and the dissatisfaction with the body and the lower self-esteem and hence the greater the propensity to adopt practices aimed at weight loss (Verplankena and Tangelder, 2011). The desire to lose weight to be slim is preceded by dissatisfaction with the body image (Koskina and Giovazolias, 2010). The intensity of the dissatisfaction with the body image determines the intention to lose weight (Hjelkrem *et al*., 2013).

Along with the reflection in the mirror, other stimuli can create a positive mental image regarding the body image. It is also important to understand that the self-esteem generated by a favorable body image produces a positive effect on the mental image of consumers with low self-esteem when exposed to stimuli. The same does not occur in individuals with high self-esteem, making them less susceptible to external stimuli. This proposition is aligned with the understanding that consumers with low self-esteem need more external stimuli to compensate for their low self-esteem. Satisfactory body image is an important source of self-esteem, especially for women, and its importance can be seen by the figures achieved by consumer-driven growth of the weight loss industry (Aydinoglu and KIriushna, 2012).

In women, lack of physical attractiveness causes low self-esteem (Mehrabian and Blum, 1997). Consumers with low physical-appearance-related self-esteem are more affected by external influences from social comparison or the idealization of beauty

(McFerran *et al*., 2010). Advertisements for weight loss products and services are considered to have little credibility and the more self-esteem individuals have the more skeptical they are regarding advertising in general and the less susceptible they are to external stimuli (Prendergast *et al*., 2009). The level of self-esteem influences their concern with physical appearance (Rosa *et al*., 2006) especially for adolescents, in whom the perceived failure to conform to the ideal of beauty negatively affects their self-esteem (Yuan, 2010).

Besides the self-esteem, another factor understood to affect the relationship between dissatisfaction with body image and the intention to lose weight is the distortion of the body image represented by the overestimation of body size (Thompson and Dolce, 1989) caused by assigning great importance to the body image especially as regards minimization of body fat (Slade 1977). This trait appears not only in people who have eating disorders (bulimia, anorexia), but also in people who do not suffer from such disorders, making it a phenomenon seen in a great many women (Thompson and Dolce, 1989).

In women, body self-image distortion generates an exaggerated pursuit for a body image that is thinner than men really desire, because there is a misperception regarding the ideals of beauty and the female body shape expected by men. This quest for a slim body image is driven by the woman's search for the ideal man, who would not feel attracted to her if she were not extremely thin. The function of both body thinness and weight loss is to create a means of establishing control over one's own life and the belief that other people (men and/or women) consider thinness a very positive trait in women. A distorted body self-image may lead to excess in the quest for thinness, such as inappropriate diets, bulimia, and anorexia (Fallon and Rozin, 1985).

Individuals with goals that require great effort or that are difficult to achieve due to the great distance between their current state and their goal and who perceive their current state as being unacceptable increase their motivation to reach the goal and reduce the cognitive dissonance (Carver and Scheier, 1990). Women who are thin and who believe they are overweight tend to overeat and do not believe in their ability to achieve the goal of losing weight. Women who believe in their ability (self-efficacy) to reduce the gap between their ideal figure and their current figure are more motivated to exercise self-control to achieve this goal (Vohs *et al*., 1999; 2001).

When individuals are very satisfied with their body the intention to improve the body increases because they are very close to achieving their ideal, while high barriers to success also predict the intention to improve the body because the distance between the current image and the desired image is very great (Sohn, 2006). Eisend and Möller (2007) demonstrated that exposure to upward social comparison creates a tendency toward dissatisfaction with body image among those who tend to worsen the body image distortion, thus increasing the distance from the goal and the pursuit of the ideal body image.

Women tend to feel they are above the idealized weight (stereotype of slimness) than they really are (distorted body image) and outside the standards of attractiveness to the opposite sex. Men and women present this distorted perception of their own body, however only women show concern about it (Rozin and Fallon, 1988; Fallon and Rozin, 1985).

Contrary to popular belief, planning to achieve a goal is not always beneficial to the individual's self-control. Specifically, although planning tends to produce a positive or neutral effect on individuals who perceive they are on course to achieving their long-term goals, individuals who perceive they are not on course to achieving their long-term plans create a negative effect increasing their psychological stress and anxiety, which consequently impact negatively on self-control. For individuals who are further away from achieving their goals, not planning increases the motivation to achieve their goals while for individuals who are closer to achieving their goals planning is a more efficient way of increasing motivation to reach the goal. In this context, implementation intentions become more effective when the target is closer (Townsend and Liu, 2012).

Based on the arguments of this section, self-esteem can be understood as a factor that can change the strength of the relationship between social comparison of physical appearance and body image dissatisfaction, since people with high self-esteem are less prone to external influences or are more likely to believe their body is beautiful and appropriate regardless of opinions or stereotypes. A similar effect occurs in the relationship between body image dissatisfaction and intention to lose weight similar effect occurs that higher self-esteem should minimize the effect of dissatisfaction with body image.

It was understood that the individual endowed with high self-esteem will be less influenced by the environment, i.e., the individual will be less affected by external influences from social comparison and the beauty stereotype that lead the individual to seek the idealized beauty (a slim body). Thus, it was understood that individuals with high self-esteem are less likely to seek the beauty stereotype, which is basically generated by a (social) external influence, despite being dissatisfied with their body. However, when the individual is satisfied with their body and their self-esteem is low, the reverse may occur and the individual will tend to have greater intention to lose weight, because, as they may feel inferior in relation to other people, they may believe that will more acceptable if they lose weight and approximate the stereotype of beauty.

Moreover, it was understood that in the relationship between body image dissatisfaction and intention to lose weight the greater the dissatisfaction with body image and the greater the distance from the goal, the greater the intention to lose weight tends to be. The more the individual is dissatisfied with their figure and the further they believe they are from the ideal the more willing they are likely to be to strive to restore the psychological balance by minimizing the cognitive dissonance and reducing the gap between the perceived and the ideal. In the case there is distance from the negative objective, that is, if the respondent believes they are below the ideal weight, they would be expected to have no intention to lose weight and therefore the relationship would not be moderated by the distance from the goal.

Age as a moderator:

Adolescent females are more likely and start to worry earlier about reaching the stereotype of physical beauty and dependence on physical exercise, the desire to lose weight and get slim and bulimia are more common aspects in adolescent girls than boys in the same age range (McCabe and Ricciardelli, 2006). Girls are more aware of body image than boys in the same age, because they are more susceptible to stereotypes of physical beauty. Adolescent females seek an ideal slim body and the non-achievement of that ideal affects their self-esteem (Yuan, 2010). In adolescence, women's dissatisfaction with body image is enhanced by the mother encouraging the teenage daughter to lose weight and extreme weight loss behaviors are influenced by the mother's dissatisfaction with her own body image or the mother's history of the use of more aggressive weight loss methods (Benedikt *et al*., 1998).

A study by Martin and Kennedy, (1993) demonstrated that among adolescent and pre-adolescent girls exposed to advertisements in which the stereotype of beauty is reinforced, the perception of their body image and physical attractiveness were unchanged. Nevertheless, with the advancing age, the tendency to compare themselves with stereotypes in advertisements increases and this tendency becomes stronger especially in adolescents who have a negative perception of their physical appearance or low self-esteem.

When analyzing female figures from advertisements, adolescent participants in a study conducted in Honk Kong considered as them to be unreal and not to represent the average woman. Nevertheless, the ideal images shown in advertisements fascinate teenagers, reinforcing a stereotype of beauty represented by the minimization of body fat (Chan *et al*., 2012). American women aged from 19 to 21 years regarded the ideals of beauty shown in the media as being too skinny in relation to the ideal figure. Amongst these women, those who did not conform to their own idealized figure were more dissatisfied with their bodies (Cardosi, 2006).

Younger people cite dissatisfaction with body image as one of the main triggers of eating disorders, while women over 40 years more strongly perceive family education as the most important trigger for eating disorders (Kally and Cumella, 2008). People with healthier habits or that take greater care of their health tend to be older women with good education, more reserved and who plan their actions in advance (Divine and Lepisto, 2005). Pruis and Janowsky (2010) suggest that in situations of social comparison with idealized images of female models, younger women are more prone to adopt weight loss activity and more susceptible to the influence of the social group regarding dissatisfaction with the body image. Older women tend to attribute less importance to these issues, although they have the same idealization of the perfect body (healthy, young and slim).

In women aged between 60 and 70 years, body image assumes a different form that of the young, because that group feel more constrained in activities that expose the body, although in the presence of familiar people and in the same condition that constraint decreases (Liechty and Yarnal, 2010). The studies from Morgan *et al*., (2012) confirm the moderating effect of age on body image dissatisfaction and the propensity to use weight loss methods or products, and the older the woman is the lees likely she is to use weight loss methods, especially those that are potentially hazardous to health. The relationship between the intention to lose weight and the intention to lose weight quickly is moderated by age because the older the woman, the more she cares about her health and the less likely she is to use slimming products, because they are potentially harmful to health.

Proposed Model and Final Remarks:

Regarding these issues, in the pursuit of an ideal of beauty represented by the minimization of body fat, consumers can perceive not only physical beauty, but also the perception of health gains through the minimization of body fat, by making a slim body synonymous with beauty and good health. It is understood that women project an image of health linked to an ideal of beauty, especially based on "being slim" and that in pursuing weight loss by consuming slimming products. To understand the antecedents of the intention to lose weight quickly, we have drawn up a model of the antecedents of the intention to lose weight quickly that comprises a set of relationships that antecede the highlighted phenomenon, as shown in Figure 1:

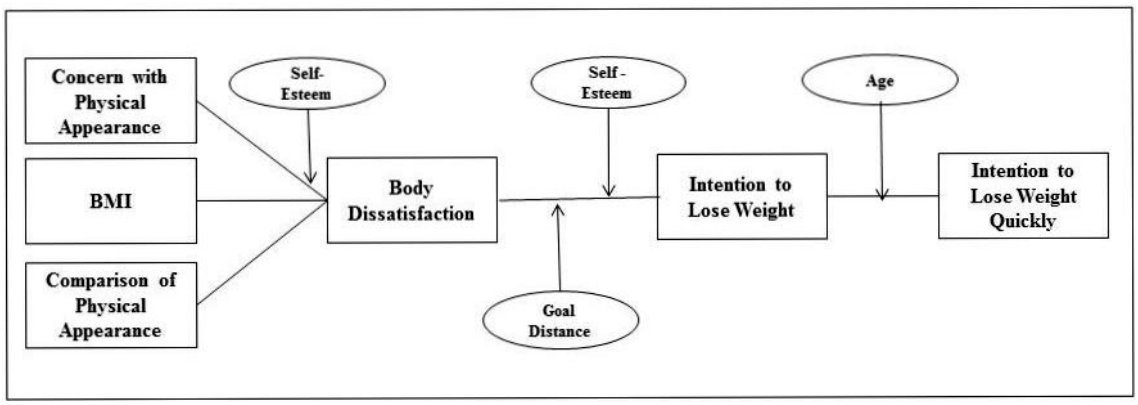

Fig. 1: Hypothetical Model.
Source: elaborated by the authors.

The use of dangerous strategies in rapid slimming programs such as slimming/diet pills/products without medical supervision is preponderant in the development of eating disorders (Berg, 1999; Cogan and Emsberger, 1999). The indiscriminate or unnecessary use of drugs, plastic surgery or eating disorders can be health hazards. Bulimia, for example, can be seen by bulimic women as a healthy practice for achieving or maintaining the perceived "ideal weight" and the stereotype of healthy thinness (Burns and Gavey, 2004).

The efforts made to lose weight reflect the quest for a body image that conforms to the social stereotype or the stereotype internalized by the individual, which does not necessarily mean conforming to the aesthetic standards is synonymous with good health. One of the most important aspects in this context concerns the consumption of slimming products and unsuitable diets in the attempt to lose weight, which significantly affect women, even if they are within the weight (BMI) that is considered normal and healthy (Yager and O'Dea, 2010).

Perceiving one's body image in accordance with the standards of physical beauty, based on internalized or socially constructed standards, is an issue of great importance in the physical and mental health of individuals. So much so that disorders associated with body dissatisfaction or distortion of self-image (which occur when individuals perceive their body silhouette as being larger or smaller than it actually is, based on indicators such as BMI) have become a public health problem in the Western world (Thompson and Stice, 2001).

Finally, the individual imbued with goals/objectives involving weight loss may present a tendency to minimize cognitive dissonance (Festinger, 1954) and psychological or physical suffering (Sohn, 2006) by using procedures that lead to quick and painless weight loss. The need to restore psychological equilibrium by reducing the dissonance between the idealized body and that perceived as unsatisfactory may lead to the intention to lose weight quickly. The magical effect of these procedures leads the individual to visualize an easier and faster way to improve self-satisfaction and avoid all the effort necessary to achieve the goal by means such as dietary control (longer-term) or regular exercise (which also assumes a longer period of time and requires regularity).

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