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Body Shame and Wellness: Consequences of Being Fat

Edith Halina James

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Body Shame and Wellness: Consequences of Being Fat

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Presented to the Faculty of the
Graduate School of Clinical Psychology

George Fox University

in partial fulfillment

of the requirements for the degree of

Doctor of Psychology

in Clinical Psychology

Newberg, Oregon

Approval Page

Body Shame and Wellness: Consequences of Being Fat

by

Edith Halina James

has been approved

at the

Graduate School of Clinical Psychology

George Fox University

as a Dissertation for the PsyD degree

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October 11, 2023

Abstract

People who live in larger bodies have unique experiences which may influence their overall wellbeing. While primary care providers may choose to focus on weight and physical health, there are numerous emotional consequences to being fat, including social stigma and shame. Unfortunately, there are few studies researching the experience of fat people, resulting in a significant gap in knowledge. The present study seeks to provide some preliminary information about the fat experience, which can be utilized in future research and in clinical and interpersonal settings. A convenience sample of young adults (ages 18–30 years) was derived from undergraduate and graduate students at a private Christian college in Oregon. Participants were asked to report demographic information, including t-shirt size and body proportions, and answer questions regarding their emotional experience, life satisfaction, and engagement in meaningful activities. We found that fat participants experienced greater external shame compared to their thin peers. No moderating or mediating relationships among body size, shame, or other variables were found. However, it was clear that shame is related to life dissatisfaction and lack of cheer. Engagement in meaningful activities did not appear to be related to shame, but was related to cheer in that participants who experienced higher levels of cheer did not engage in activities as often as those with lower levels of cheer. Overall, the present study highlighted the importance of considering body size and shame in research and clinical practice and encourages future fat-centered research.

Keywords: fat, internal shame, external shame, life satisfaction, meaningful activities, cheerfulness

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In addition to my immense gratitude to the many people who have supported me through this process, it is necessary to acknowledge my personal interest in this research. I am a White,

cisgender, fat woman. These intersecting identities may influence my interpretation of results.

Additionally, my body size is one of the many reasons I am passionate about researching and advocating for others to research body size as a diversity factor.

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Body Shame and Wellness: Consequences of Being Fat

Chapter 1

In Western society, people are frequently negatively evaluated on their body's shape, size, and weight (Calogero et al., 2018). This body shaming may be overt (i.e., verbal and physical bullying; Ames & Leadbeater, 2017) or covert (i.e., decreased social acceptance and friendships; Ettekel et al., 2019). No matter how body shaming occurs, it leads to emotional distress (Vartanian et al., 2014), increased negative emotional experiences (Pasco et al., 2013), and is linked to poor physical and mental health conditions (Vogel, 2019). Since people experiencing illness, mental health conditions, or chronic pain are less likely to engage in meaningful and fulfilling activities (Dixon et al., 2016), this may occur for those experiencing body shaming as well. Therefore, the purpose of this study is to explore levels of shame in people of various body sizes and determine if those shame levels are negatively correlated with cheerfulness (a measurable positive emotion), engagement in meaningful activities, and life satisfaction.

Definitions

Commonly used terms such as “obese” and “overweight” have negative connotations and are often associated with laziness, lack of motivation, and the inability to care for self (Ellis et al., 2014). Because of this, groups, organizations, and collectives have formed such as The Body Positive (<https://thebodypositive.org/>), The National Association to Advance Fat Acceptance (<https://naafa.org/>), and the Body Neutrality Movement (Cleveland Clinic, 2022). Members of these groups movements are choosing to challenge negative stereotypes (i.e., larger bodied people are lazy, unmotivated, and cannot take care of themselves) and reclaim the word “fat,”

using it as a descriptor (Mohammed, 2020; Papas, 2020; Shackelford, 2019; Gordon, 2021).

Because of this, the word “fat” will be used to describe larger bodied individuals throughout this document.

Body Shame and Emotion

The external shame (i.e., microaggressions and shaming comments) fat people experience can lead to internal shame and body shame (Forbes & Donovan, 2019) which causes further emotional distress. People’s perception of their ideal bodies (regardless of what their bodies look like) is a significant predictor of their body experience (McKinley, 2004). In other words, the stigma or shame they experience and internalize causes greater emotional distress than their actual appearance. This indicates that shame, rather than body size, may be the core issue.

Body shaming occurs through television and billboard advertisements, and the media’s portrayal of plus-sized individuals in movies and television shows. Fat people also experience body shaming comments from friends, family, peers, and strangers (Vartanian et al., 2014). These comments can be deeply hurtful and lead to emotional dysregulation (Kass et al., 2019), increased negative emotional experiences (Pasco et al., 2013), verbal and physical victimization (Ames & Leadbeater, 2017), and fewer friends over the lifespan (Ettekal et al., 2019). While the impact of body shame on negative emotions is clear, it raises a question about the degree body shaming is related to positive emotions.

On the other hand, people may perceive fat folks to be jolly. The “jolly fat” hypothesis arose from studies which found that being fat may decrease the likelihood of depressive symptoms in aging adults (Crisp et al., 1980; Crisp & McGuiness, 1976; Palinka et al., 1996). However, many began to view this hypothesis as fact and generalized it to all fat populations. This is not helped with the media’s portrayal of fat folks as either the villain or the happy, jolly,

and cheerful sidekick who provides comedic relief. Additionally, examples such as Santa Claus who are represented as fat and jolly perpetuate this belief. For this reason, measuring a positive emotion like cheerfulness can shed light on the true experience of positive emotions in fat folks.

Body Shame and Meaningful Activities

The emotional distress experienced because of unspecified shame frequently has a negative effect on social interaction and one's engagement in activities (Substance Abuse and Mental Health Services Administration, 2022). Many activities involve—or can be made more meaningful by—human interaction, social engagement, and peer-support, which are necessary for overall health and well-being (Reblin & Uchino, 2008). Additionally, social support can decrease the risk of depression, mood disorders (Pasco et al., 2013), and other health conditions (Southwick et al., 2005). However, the connection between body shame and engagement in meaningful activities has not been previously studied. This invites examination into the extent meaningful activities increase and support overall wellness for fat individuals.

Current Study

The aim of the study is to determine if shame is correlated with a decrease in positive emotions and decrease in meaningful social/activity engagement. First, the level of shame will be measured in fat, mid-sized, and thin individuals. Then, the relationship between shame and cheerfulness, shame and engagement in meaningful activities, and shame and life satisfaction will be determined.

Hypotheses

1. Fat young adults experience increased levels of shame compared to their thin peers.
2. Internal and external shame will be negatively correlated with cheerfulness.
3. Internal and external shame will be negatively correlated with engagement in meaningful

activities.

4. Life satisfaction will be positively correlated with cheerfulness and engagement in meaningful activities.
5. Life satisfaction will be negatively correlated with internal and external shame.

Chapter 2

Method

Participants

Participants consisted of 441 individuals currently enrolled in an undergraduate or graduate program at a private, Christian university located in Oregon. Participants younger than 18 years old or older than 30 years old were removed, resulting in 369 young adults, aged 18–30 years. Participants were predominantly White (74%); 6.5% identified as Hispanic, 3.5% identified as Asian American, 12.2% identified themselves as multi-ethnic, and 3.8% reported other ethnicities.

Procedures

Ethnicity, age, gender, and gender-neutral t-shirt size were assessed at the beginning of the survey (see Table 1). Students selected the most appropriate option(s) or wrote in their own response to each question. Based on responses to t-shirt size, three groups were created: fat (sizes greater than or equal to extra large), mid-sized (sizes large and medium), and thin (sizes less than or equal to small).

Measures

External and internal shame were measured using the External and Internal Shame Scale (Ferreira et al., 2020). Participants selected the best option on a 6-point Likert-type scale (e.g., “I am different and inferior to others”). There were a total of eight statements with an equal distribution of internal shame and external shame themes. The External and Internal Shame Scale was concurrently validated with the Others As Shamer -2 ($r = .84$). The internal consistency for this scale is $\alpha = .89$.

Positive emotions was measured using the 10-items from the International Personality Item Pool representation of the Johnson (2014) five factor model of cheerfulness. Participants selected the best response on a 6-point Likert-type scale (e.g., “I radiate joy”). The internal consistency for this scale is $\alpha = .81$.

Engagement in meaningful activities was measured using the Engagement in Meaningful Activities Survey (Eakman, 2012; Goldberg et al., 2002). Participants selected the best option on a 4-point scale ranging from *rarely* to *always* (e.g., “The activities I do give me pleasure”). There were 12 questions, producing a possible score range of 12–48. Scores ranging from 12–28 were considered low perception of meaning in activities, 29–41 was considered moderate perception of meaning in activities, and scores over 41 were considered high perception of meaning in activities. The construct validity of the Engagement in Meaningful Activities Survey ranges from $r = .51$ to $r = .73$. The internal consistency of this measure is $\alpha = .85$.

Life satisfaction was measured using the Satisfaction with Life Scale (Diener et al., 1985). Participants selected the best response on a 6-point Likert-type scale (e.g., “I am satisfied with my life). The internal consistency for Satisfaction with Life Scale is $\alpha = .74$.

Chapter 3

Results

To evaluate our hypotheses, participants were assigned to one of three groups: fat, mid-sized, and thin. For the first hypothesis, external shame, internal shame, cheerfulness, engagement in meaningful activities, and life satisfaction were examined between groups using a series of one-way analysis of variances. Additionally, correlations were examined among all variables to examine the remaining hypotheses.

We initially hypothesized that fat young adults would experience increased levels of shame when compared to their thin peers. While fat young adults did show higher levels of external shame compared to peers, $F(8.69, 287.28) = 5.52, p = .004, \eta^2 = .03$, there is no indication that they experience greater levels of internal shame, $F(2.32, 233.86) = 1.81, p = .165, \eta^2 = .009$. Our Post Hoc (LSD) revealed that fat participants reported more external shame ($M = 3.31, SD = 1.23$) compared to thin ($M = 2.84, SD = 0.88$) and midsized ($M = 2.75, SD = 0.83$) peers. There were no significant differences between the groups on any of the other variables (internal shame, cheerfulness, engagement in meaningful activities, and life satisfaction; see Table 3).

Our second hypothesis examined the relationship between shame and cheerfulness. We found that internal shame was negatively correlated with cheerfulness $r(367) = -.29, p < .001$, and external shame was negatively correlated with cheerfulness $r(367) = -.16, p = .002$.

Our third hypothesis sought to determine the relationship between shame and engagement in meaningful activities. We found no significant correlation between internal shame $r(367) = -.006, p = .901$ or external shame $r(367) = -.003, p = .958$, and engagement in

meaningful activities.

The fourth hypothesis looked at the correlations between life satisfaction and other variables. Data showed that life satisfaction is positively correlated with cheerfulness, $r(367) = .53, p < .001$ —as hypothesized, but it is negatively correlated with engagement in meaningful activities $r(367) = -.31, p < .001$.

The final hypothesis was supported as data showed that life satisfaction was negatively correlated with internal shame $r(367) = -.26, p < .001$, and external shame $r(367) = -.18, p = .001$.

In addition to the stated hypotheses, we examined the correlations among other variables. We found that internal shame was positively correlated with external shame $r(367) = .51, p < .001$, and cheerfulness was negatively correlated with engagement in meaningful activities $r(367) = -.272, p < .001$ (see Table 2). There were no significant differences among the variables when controlling for body size (see Table 4).

Chapter 4

Discussion

The present study provides valuable information about fat people's experience of shame and the extent to which this shame influences their engagement in meaningful activities, life satisfaction, and cheerfulness. The goal was to determine if fat participants experienced greater levels of internal and external shame, and if that shame contributes to lack of engagement in meaningful activities, cheerfulness, and life satisfaction. An additional aim was to examine potential relationships among cheerfulness, life satisfaction, and engagement in meaningful activities.

We found that fat participants experienced increased levels of external shame but did not experience significantly more or less internal shame when compared to peers. Since there is a positive relationship between internal and external shame, these findings were unexpected. One possibility is that, while both types of shame may be related, the relationship is not influenced by body size. Other possible explanations for these unexpected findings include the limited number of fat participants or extraneous life factors, such as growing up in a body positive family, being surrounded by people of various sizes, or having a different cultural understanding of fatness. And, it may be that fat people experience different levels of internal shame, but they experience relatively consistent external shame from society and the people around them.

Additional relationships were detected. Both internal and external shame were negatively related to cheerfulness and life satisfaction. While fat participants experienced higher levels of external shame, and external shame is negatively related to cheerfulness and life satisfaction, body size did not mediate or moderate these relationships, which may indicate that shame, not

body size, is the factor that impacts overall cheerfulness and life satisfaction.

Implications

The present study highlights numerous implications for future research, including the importance of size representation. Individuals in larger bodies have unique experiences that have not been the focus of much psychological research, leading to a lack of understanding about the fat experience. Future studies should make a point to include body size in their initial demographic questionnaire. Additionally, because shame influences people's experiences, controlling for internal and external shame in future research would be prudent.

This study also showcases clinical implications. For instance, clinicians working with fat patients should be aware of the potential elevation in external shame and how this may affect their life satisfaction and cheerfulness. Clinicians should be aware of internal and external shame of their clients, regardless of body size, because of the potential impacts it has on their life.

In addition to research and clinical impacts, fat individuals could benefit from learning about themselves and the potential influence of both their bodies and shame on their lives. Fat people may be better able to identify the impacts of shame on their emotions and overall life satisfaction, and people that are not fat could become aware of and learn how to facilitate wellbeing for their fat friends and family.

Limitations

Although this study provides necessary data about fat people's experience, there are several limitations that should be acknowledged. While the sample size was adequate, the percentage of fat participants compared to mid-sized and thin participants was not representative of the state of Oregon, the Pacific Northwest, or the United States. Because of this, the sample cannot be generalized beyond the setting that was studied (undergraduate and graduate young

adults enrolled at a private Christian university in Oregon). Additionally, participants were drawn from a convenience sample of individuals willing to answer questions about their lived experience and body. Notably, people in larger bodies, people who experience greater levels of internal shame, and people who do not wish to engage in activities may not be as likely to participate in such a study, potentially skewing results. Finally, there are extraneous, uncontrolled variables which may influence participants' perceptions of their bodies and experience (i.e., participation in sports, cultural background, body diverse family and friends, environment during development, etc.).

Conclusion

The results of this study point to the importance of understanding the presence and influence of body size and shame on people's lives. Young adults with elevated levels of shame may experience lower life satisfaction and feelings of cheer. Furthermore, fat young people may experience increased levels of external shame, which may lead to negative consequences. Future research should continue to study young adult populations in the Pacific Northwest, across the United States, and even internationally, as culture and life context may play an important role in people's body perceptions and experiences of shame.

References

- Ames, M., & Leadbeater, B. (2017). Overweight and isolated: The interpersonal problems of youth who are overweight from adolescence into young adulthood. *International Journal of Behavioral Development*, 41(3), 390–404. <https://doi.org/10.1177/0165025416647799>
- Calogero, R. M., Tylka, T. L., Mensinger, J. L., Meadows, A., & Danielsdottir, S. (2018). Recognizing the fundamental right to be fat: A weight-inclusive approach to size acceptance and healing from sizeism. *Women & Therapy* 42(1–2), 22–44. <https://doi.org/10.1080/02703149.2018.1524067>
- Cleveland Clinic (2022, April 22). *What’s the difference between body positivity and body neutrality?* <https://health.clevelandclinic.org/body-positivity-vs-body-neutrality/#:~:text=%E2%80%9CBody%20neutrality%20is%20a%20middle,one's%20body%20rather%20than%20love.%E2%80%9D>
- Crisp, A. H., & McGuiness, B. (1976). Jolly fat: relation between obesity and psychoneurosis in general population. *British medical journal*, 1(6000), 7–9. <https://doi.org/10.1136/bmj.1.6000.7>
- Crisp, A. H., Queenan, M., Sittampaln, Y., & Harris, G. (1980). ‘Jolly fat’ revisited. *Journal of Psychosomatic Research*, 24(5), 233–241. [https://doi.org/10.1016/0022-3999\(80\)90013-6](https://doi.org/10.1016/0022-3999(80)90013-6)
- Diener E., Emmons, R. A., Larsen, R. J., & Griffin, S (1985). The satisfaction with life scale, *Journal of Personality Assessment*, 49, 71–75. https://doi.org/10.1207/s15327752jpa4901_13
- Dixon, L. B., Holoshitz, Y., & Nossel, I. (2016). Treatment engagement of individuals experiencing mental illness: Review and update. *World Psychiatry*, 15(1), 13–20. <https://doi.org/10.1002/wps.20306>

- Eakmen, A. M. (2012). Measurement characteristics of the engagement in Meaningful Activities Survey in an age-diverse sample. *American Journal of Occupational Therapy* 66(2), 20–29. <http://dx.doi.org/10.5014/ajot.2012.001867>
- Ellis, S., Rosenblum, K., Miller, A., Peterson, K. E., & Lumeng, J. C. (2014). Meaning of the terms "overweight" and "obese" among low-income women. *Journal of nutrition education and behavior*, 46(4), 299–303. <https://doi.org/10.1016/j.jneb.2013.08.006>
- Ettekal, A. V., Simpkins, S. D., & Schaefer, D. R. (2019). Obesity and social marginalization: When do organized activities promote or hinder peer relationships? *Applied Developmental Science*, 23(2), 132–143. <https://doi.org/10.1080/10888691.2017.1329013>
- Ferreira, C., Moura-Ramos, M., Matos, M. & Galhardo, A. (2020). A new measure to assess external and internal shame: Development, factor structure and psychometric properties of the External and Internal Shame Scale. *Current Psychology*. 41, 1892–1901. <https://doi.org/10.1007/s12144-020-00709-0>
- Forbes, Y., & Donovan, C. (2019). The role of internalised weight stigma and self-compassion in the psychological well-being of overweight and obese women. *Australian Psychologist*, 54(6), 471–482. <https://doi.org/10.1111/ap.12407>
- Goldberg, B., Brintnell, E. S., & Goldberg, J. (2002). The relationship between engagement in meaningful activities and quality of life in persons disabled by mental illness. *Occupational Therapy in Mental Health*, 18, 17–44 http://dx.doi.org/10.1300/J004v18n02_03
- Gordon A. (2021, May 28). 'Fat' isn't a bad word – It's just the way I describe myself. SELF. <https://www.self.com/story/fat-isnt-bad-word>

- Johnson, J. A. (2014). Measuring thirty facets of the five factor model with a 120-item public domain inventory: Development of the IPIP-NEO-120. *Journal of Research in Personality*, 51, 78–89.
- Kass, A. E., Wildes, J. E., & Coccaro, E. F. (2019). Identification and regulation of emotions in adults of varying weight statuses. *Journal of Health Psychology*, 24(7), 941–952.
<https://doi.org/10.1177/1359105316689604>
- McKinley, N. M. (2004). Resisting body dissatisfaction: Fat women who endorse fat acceptance. *Body Image*, 1(2), 213–219. <https://doi.org/10.1016/j.bodyim.2004.02.001>
- Mohammed, F. (2020, August 14). 'Fat' is not a bad word. Medium.
<https://aninjusticemag.com/fat-is-not-a-bad-word-ac7f981099e4>
- National Association to Advance Fat Acceptance (2020). *About us*. <https://naafa.org/about-us>
- Palinkas, L.A., Wingard, D. L., Barrett-Connor, E. (1996). Depressive symptoms in overweight and obese older adults: A test of the “jolly fat” hypothesis. *Journal of Psychosomatic Research*, 40(1), 59-66. [https://doi.org/10.1016/0022-3999\(95\)00542-0](https://doi.org/10.1016/0022-3999(95)00542-0)
- Papas, C. (2020, February 19). *Unpacking and reclaiming the word 'fat.'* ABC Everyday.
<https://www.abc.net.au/everyday/unpacking-and-reclaiming-the-word-fat/11726100>
- Pasco, J. A., Williams, L. J., Jacka, F. N., Brennan, S. L., & Berk, M. (2013). Obesity and the relationship with positive and negative affect. *Australian & New Zealand Journal of Psychiatry*, 47(5), 477–482. <https://doi.org/10.1177/0004867413483371>
- Reblin, M., & Uchino, B. N. (2008). Social and emotional support and its implication for health. *Current Opinion in Psychiatry*, 21(2), 201–205.
<https://doi.org/10.1097/YCO.0b013e3282f3ad89>

Shackelford, A. (2019, August 26). *Fat is not a bad word*. TeenVogue.

<https://www.teenvogue.com/story/fat-is-not-a-bad-word>

Southwick, S. M., Vythilingam, M., & Charney, D. S. (2005). The psychobiology of depression and resilience to stress: Implications for prevention and treatment. *Annual Review of Clinical Psychology*, 1(1), 255–291.

<https://doi.org/10.1146/annurev.clinpsy.1.102803.143948>

Substance Abuse and Mental Health Services Administration (2022, April 14). *Warning signs and risk factors for emotional distress*. [https://www.samhsa.gov/find-help/disaster-](https://www.samhsa.gov/find-help/disaster-distress-helpline/warning-signs-risk-factors)

[distress-helpline/warning-signs-risk-factors](https://www.samhsa.gov/find-help/disaster-distress-helpline/warning-signs-risk-factors)

Vartanian, L. R., Pinkus, R. T., & Smyth, J. M. (2014). The phenomenology of weight stigma in everyday life. *Journal of Contextual Behavioral Science*, 3(3), 196–202.

<https://doi.org/10.1016/j.jcbs.2014.01.003>

Vogel, L. (2019). Fat shaming is making people sicker and heavier. *CMAJ: Canadian Medical Association Journal*, 191(23), E649. <https://doi.org/10.1503/cmaj.109-5758>

Tables

Table 1

Demographic Characteristics of Participants

Variable	Category	Frequency	Percent
Ethnicity	Black	7	1.6
	White	327	74.1
	Hispanic	31	7.0
	Pac Islander	3	0.7
	Asian American	16	3.6
	Other/no response	7	1.6
	Multiple	50	11.3
	Total	441	100.0
Gender	Female	336	76.2
	Male	93	21.1
	Nonbinary	12	2.7
	Total	441	100.00
T-shirt size	No response	1	0.2
	Smaller than extra small	2	0.5
	Extra small	25	5.7
	Small	127	28.8
	Medium	149	33.8
	Large	83	18.8
	Extra large	36	8.2
	2XL	11	2.5
	3XL	4	0.9
	More than 3XL	2	0.5
	Total	440	99.8

Table 2*Intercorrelations*

	Internal shame	External shame	Cheerfulness	Engagement	Life satisfaction
Internal shame	-				
External shame	.53***	-			
Cheerfulness	-.29***	-.14**	-		
Engagement	-.04	-.06	-.26***	-	
Life satisfaction	-.28***	-.20***	.52***	-.29***	-

* $p < .05$, ** $p < .01$, *** $p < .001$.

Table 3*ANOVA Tables*

Measure	Thin		Mid-size		Fat		$F(2, 365)$	η
	M	SD	M	SD	M	SD		
External shame	2.84	0.88	2.75	0.83	3.31	1.23	5.52**	0.03
Internal shame	3.18	0.75	3.12	0.80	3.41	1.02	1.81	0.01
Cheerfulness	4.19	0.77	4.30	0.83	4.05	0.76	1.50	0.01
Engagement	7.05	2.26	6.92	2.31	6.51	2.65	0.70	<0.01
Life satisfaction	3.75	1.14	3.79	1.20	3.65	1.22	0.20	<0.01

Note. ANOVA = analysis of variance.

* $p < .05$, ** $p < .01$, *** $p < .001$.

Table 4*Correlations Controlling for Body Size*

Dep variable	Size (I)	Size (J)	Mean diff	SE	Sig
Internal shame	Thin	Midsized	.07	.08	.37
		Fat	-.30	.13	.02*
	Midsized	Fat	-.37	.12	<.01**
External shame	Thin	Midsized	.09	.09	.32
		Fat	-.44	.14	<.01**
	Midsized	Fat	-.53	.14	<.01***
Cheerfulness	Thin	Midsized	-.12	.09	.17
		Fat	.11	.13	.42
	Midsized	Fat	.22	.13	.08
Engagement	Thin	Midsized	.19	.24	.43
		Fat	.47	.36	.20
	Midsized	Fat	.29	.35	.41
Life satisfaction	Thin	Midsized	-.02	.12	.91
		Fat	.21	.19	.26
	Midsized	Fat	.21	.18	.21

Note. Dep = dependent; diff = difference; sig = significance.

* $p < .05$, ** $p < .01$, *** $p < .001$.

Appendix

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Education

Anticipated 2025 **PsyD**, Graduate School of Clinical Psychology, George Fox University
Newberg, Oregon

2022 **MA**, Graduate School of Clinical Psychology, George Fox University Newberg,
Oregon, Master of Arts in Clinical Psychology

2019 **BA**, George Fox University, Newberg, Oregon Bachelor of Arts in Psychology, Cum
Laude

2017 **AA**, Clark College, Vancouver, Washington Associate of Arts, With Honor

Supervised Clinical Experience

Current **Analogue Supervision with 2nd Year Student**

Under the supervision of Dr. Rodger Bufford, PhD and in tandem with a supervision and management course instructed by Dr. Leihua Edstrom, PhD I have helped support a second year student.

Current **Behavioral Health Crisis Consultation Team**

Starting in 2022, I have been a part of a team of students who supported Yamhill County by conducting after hours crisis evaluations in the local hospitals. I met with patients experiencing various levels of crisis to determine the need for additional support. I collaborated with physicians, nurses, and other hospital staff to support patients. I connected with Yamhill County and other services to provide patients with needed services.

Current **Clinical Extern, Eugene Center for Anxiety and Stress**

Under the supervision of Dr. Colleen Comeau, PsyD, I have been conducting psychological assessments across the lifespan. This includes a clinical interview, test selection, administration of assessments, scoring, interpretation, report writing, and providing client feedback.

2022-2023 **Psychology Intern, Chemawa Indian School**

Under supervision, I conducted psychological evaluations with Indigenous adolescents who received special education referrals. The results were used to develop Individualized

Education Programs for students. I also worked with students individually providing counseling support. Additionally, I ran a body image and eating disorder group during lunch for those who needed a safe space to eat and engage with those who experience similar struggles.

2021-2022 Psychology Trainee, Behavioral Health Clinic

Under the supervision of Dr. Julie Oyemaja, PsyD, I conducted short-term and long-term therapy with community members. I administered cognitive, personality, memory, and projective assessments for adults and children, and followed-up with comprehensive psychological reports and feedback sessions. I assisted with administrative duties (i.e., managing files, monitoring emails, returning phone calls, etc.) and helped facilitate a comfortable, friendly environment in the lobby and office spaces for clients.

2021 Workshop, Love INC

A fellow student and I assisted Dr. Shaun Davis, PsyD in instructing workshops on resilience and self-talk. The two programs lasted four and 11 weeks, respectively and included CBT and mindfulness strategies.

2021 Student Therapist

Under the supervision of a fourth-year TA and Dr. Aundrea Paxton, PsyD, I conducted a cumulative 18 sessions of analogue therapy including intake and termination sessions with two undergraduate students.

Professional Experience

2021-Current Worship Arts and Youth Pastor

At 2nd Street Community Church, I have served as a member of the pastoral team, supporting the congregation through worship, teaching, and more. My responsibilities also include administrative tasks including budgeting, managing the website, communicating with the congregation, and more.

2023 Teaching Assistant – Comprehensive Psychological Assessment

Assisting Dr. Leihua Edstrom, PhD by offering in-class workshops, grading assignments, and consulting on class matters.

2023 Adjunct Faculty – Neuroscience

At George Fox University, I taught an undergraduate psychology course in Neuroscience. I modified the previous cognitive neuroscience course and focused on clinical neuroscience. I constructed a syllabus, created course slides, selected appropriate texts, and created and graded assignments.

2021 Teaching Assistant – Personhood

Assistant Dr. Susan O'Donnell, PhD in designing an undergraduate general education course required of all students. This course included psychological themes including the biopsychosocial-spiritual model and diversity.

2021 **Research Assistant**

Assisting fellow graduate student with his dissertation. I administered and interpreted the Thurston-Cradock Test of Shame to a handful of undergraduate student.

2019-2020 **Certified Behavior Therapist**

Working with children on the autism spectrum, assisting with life skills and promoting independence.

2017-2019 **Direct Support Provider**

Assisting adults with developmental disabilities in daily living tasks, including administration of medication and advocating for their wants and needs.

Research, Presentations, and Peer-Reviews

James, E. (2023). *Body shame and wellness: Consequences of being fat* [Unpublished doctoral dissertation]. George Fox University.

James, E. & Nelson, A. (2022, July 6-8). *The fat tax: Fat professionals self-perception of competence and experienced stigma* [Conference recorded presentation]. International Society of Critical Health Psychology Fat Studies, New Zealand.

2022, **Scholarly Peer-Review**

Fat Studied – An Interdisciplinary Journal of Body Weight and Society

Lange M., **James E.**, Mendenhall. W., Thurston N. & Young, D. (2022, March 8-9). *Examining the relationships among religion, grace, and shame in undergraduates* [Conference poster presentation]. CAPS 2022 Conference.

James. E., Durbin, A., & Davis, S. (2021, April 30 – May 1). *Program evaluation of self-talk psychoeducation workshop* [Conference poster presentation]. OPA 2021 Conference.

2020 **Scholarly Peer-Review**

Under the supervision of Susan L. O'Donnell, PhD, Motivation and Emotion – “The Why and What of Academic Goals, the Perceived Value, and Relation to Academic Goal Pursuit.”

2019 **Substitute Teaching**

History and System of Psychology, Adolescent Development, Child Development, Research Methods, Writing 111.

2018, 2019 **Presenter**

Presented on both the 6th and 7th edition of APA style and formatting in multiple undergraduate courses.

2018 **Workshop Assistant**

Assisted Susan L. O'Donnel, PhD in her semi-annual APA workshop.

2018 **Research**

Alongside two other students, we looked at relationships among emotional intelligence, self-esteem, creativity, and resilience/adaptability.

Relevant Training

Naber, K. (2024, January-February). *Autism and ADOS-2*. Certificate Course, George Fox University, Newberg, OR.

Logan, K. (2023-2024). *Trauma Treatment*. Consultation Group and Certificate Course, George Fox University, Newberg, OR.

Cox, W. (2022, October 12). *Empowering people to break the bias habit: Evidence-based approaches to reducing bias and creating inclusion*. Grand Rounds, Graduate School of Clinical Psychology, George Fox University, Newberg, OR.

Wilson, E. E. (2022, March 9). *Sex, religion, and spirituality in the therapy room: Clinical interventions*. Grand Rounds, Graduate School of Clinical Psychology, George Fox University, Newberg, OR.

Bourg, W. (2022, January 2). *Intractable conflict in families and society: What do we know about healing the rifts*. Colloquium, Graduate School of Clinical Psychology, George Fox University, Newberg, OR.

Liebscher, B., & Vaiz, L. (2021, November 3). *May it be well with your soul: Anti-racism, spiritual freedom, and wellness*. Colloquium, Graduate School of Clinical Psychology, George Fox University, Newberg, OR.

Wilson, E. E. (2021, October 13). *Erotic transcendence: Integrating faith with what's new in sex research*. Grand Rounds, Graduate School of Clinical Psychology, George Fox University, Newberg, OR.

Chloe Ackerman, PsyD. (2021, March 10). *Gender diverse clients: Therapy and intervention readiness assessments*. Grand Rounds, Graduate School of Clinical Psychology, George Fox University, Newberg, OR.

Janelle Kwee, PhD. (2021, February 3). *Saying 'yes' to your embodied life: An invitation for psychotherapists*. Colloquium, Graduate School of Clinical Psychology, George Fox University, Newberg, OR.

Jason Steward, PhD. (2020, November 4). *Complex PTSD: Advanced case conceptualization, assessment, and treatment approaches in trauma populations*. Colloquium, Graduate School of Clinical Psychology, George Fox University, Newberg, OR.

Justin Lee, PhD. (2020, October 14). *Examining the role of neuropsychology within the pediatric cancer setting*. Grand Rounds, Graduate School of Clinical Psychology, George Fox University, Newberg, OR.

Memberships and Certifications

In process **Autism Diagnostic Observation System (ADOS-2)**

In process **Trauma Certificate**

Since 2020 **Crisis Intervention**

Since 2022 **Web of Science**, ResearcherID: GNW-5657-2022

Since 2021 Student Member, **American Psychological Association**