

# body liberation for gender equality in Europe

BODY  LIBERATION

**Needs analysis report about body  
image and experienced weight bias  
among young women in Latvia,  
Czechia and Cyprus  
2025**



Agency for International  
Programs for Youth  
Republic of Latvia



Co-funded by  
the European Union



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# Glossary

**Body policing** - the social practice of monitoring, judging, and regulating people's bodies according to dominant norms and expectations. It involves criticizing or attempting to control how bodies look, move, dress, eat, age, or express gender and identity, often reinforcing power structures related to size, race, gender, ability, and sexuality.

**Body politics** - the ways in which bodies are regulated, valued, controlled, and governed through social norms, institutions, laws, and cultural practices. Body politics shape which bodies are seen as acceptable, healthy, productive, or desirable, and which are marginalized or disciplined.

**Body shape and size discrimination** - the experience of being shamed, excluded, or treated unfairly because of one's body size, shape, or appearance. This can be interpersonal (comments, bullying), institutional (healthcare, education, work), or internalized, and affects people across the size spectrum.

**Confidence talk** - a cultural expectation (that is often placed on women and marginalized people) to respond to discrimination or harm by becoming more confident, rather than addressing the structural conditions that produce body shame, exclusion, or inequality in the first place.

**Desirability politics** - social systems that determine which bodies are considered attractive, lovable, or worthy of desire. These politics privilege bodies that align with dominant norms (thin, young, able-bodied, white, cisgender) while marginalizing others, affecting access to relationships, safety, and social value.

**Diet culture** - a belief system that promotes thinness as a moral and social ideal, equates weight with health and worth, and normalizes food restriction, body surveillance, and self-discipline. Diet culture reinforces weight stigma and disordered relationships with food and bodies.

**Diet industry** - the commercial system built around weight loss and body modification, including diets, programs, products, apps, and pharmaceuticals. The industry profits from body dissatisfaction and often reproduces harmful narratives about health, responsibility, and success.

**Emotional labor** - the often invisible work of managing one's own emotions and those of others in order to maintain social harmony. In body-related contexts, this includes explaining, justifying, softening responses to stigma, or protecting others from discomfort when challenging harmful norms.

**Feminism** - a broad social and political movement that seeks to challenge gender-based oppression and inequality. Within body liberation, feminism critically examines how beauty standards, body norms, and control over bodies are used to maintain power hierarchies.

**Gender equality** - the state in which people of all genders have equal rights, opportunities, and access to resources. From a body liberation perspective, gender equality requires addressing how bodies are differently regulated, valued, and disciplined based on gender norms.

**Gender expression** - the ways people express gender through appearance, behavior, clothing, voice, or body presentation. Gender expression is culturally shaped and policed, and bodies that do not conform to dominant gender norms are often subject to increased scrutiny or stigma.

**Health** - a complex and multifaceted concept that includes physical, mental, and social well-being. Body liberation challenges narrow, weight-focused definitions of health and emphasizes autonomy, access to care, and freedom from stigma as essential to well-being.

**Respectability politics** - a strategy that encourages marginalized people to conform to dominant norms (appearance, behavior, body size) in order to gain acceptance or reduce harm. While often framed as self-protection, it reinforces exclusion by placing responsibility on individuals rather than systems.

**Social inclusion** - the process of ensuring that all people can participate fully in social, cultural, economic, and political life. In body liberation work, social inclusion means removing body-based barriers and challenging norms that exclude certain bodies from visibility and belonging.

**Weight bias** - negative attitudes, beliefs, or assumptions about people based on their body weight or size. Weight bias can be explicit or implicit and often frames higher-weight bodies as lazy, unhealthy, or irresponsible.

**Weight stigma** - the social process through which people are devalued, shamed, or discriminated against because of their body weight. Weight stigma operates structurally and culturally, not just individually, and has documented harms for mental, physical, and social health.

# 1. Executive summary

**“Body Liberation for Gender Equality” is a needs analysis report exploring body image pressures, body shaming, and experienced weight bias among young women in Latvia, Czechia, and Cyprus. The report approaches body image as a gendered social issue that affects young women’s wellbeing, participation, and equality. Within Erasmus+ and youth work contexts, these topics remain difficult to address despite their strong influence on wellbeing, participation, and equality. The report identifies key gaps in support systems and offers practical recommendations to strengthen bodily autonomy and inclusion in youth work and beyond.**

The analysis is based on survey responses from 169 young women aged 18 to 35. While not statistically representative, the data provides important insight into lived experiences that can guide practitioners. Appearance-based judgment was reported across all body sizes, but women identifying as larger than average experienced these harms more frequently and more intensely, as well as reported lower satisfaction with their appearance and lower confidence in responding to negative comments. Young women experienced body shaming most often in educational institutions and family settings, showing that everyday environments meant to be supportive can reproduce stigma. Verbal forms of discrimination were the most common, while institutional experiences such as being dismissed or not taken seriously were also present. The strongest reported impact was on mental health, followed by effects on physical wellbeing and participation. Many young women described withdrawing from visible or socially evaluated situations such as sports, beaches, social events, shopping for clothes, and romantic relationships. Over time, these repeated small withdrawals contribute to reduced social inclusion and confidence.

The gap analysis based on explicitly expressed wishes shows that young women in these countries need practical tools, stronger formal support networks, and broader cultural change. Respondents asked for specific skills such as assertive communication, boundary setting, emotional regulation, and strategies for responding to body-related comments, including ready-to-use scripts and scenario practice. They sought support mostly among friends and peers, while trust in formal support, including youth workers and professionals, remained very low. Key barriers included shame, self-blame, normalization of harm, and fear of judgment, highlighting how social stigma becomes internalized. For Erasmus+ and youth work, these findings point to a clear need to integrate body liberation principles by shifting from individual blame towards deeper awareness about harmful systems, strengthening community care, and building practical self-advocacy skills.

We foresee that this report will provide inspiration and tangible advice for educators, youth workers, activists and other stakeholders working with young women and gender equality topics. We truly hope that this will also give food for thought to friends, partners and family members of women of all ages, as well as women themselves. This way we can all come together to raise awareness and change the culture of valuing people for their external traits.

## 2.Introduction

In recent years, body image and weight bias have begun to receive increasing attention within research and health-related fields. But the recognition of the broader social harms around these themes in wider audiences is still lacking. We see that also reflected in our work with EU funded projects for youth - there is a long way to have a unified understanding about the effects and ways to tackle these harms. Initiatives turning attention to size discrimination, body shaming and weight bias as social issues that significantly affect young bodies and minds emerged only in the last few years, with the number of projects about size discrimination still being counted on the fingers of one hand.

Importantly, perceptions of bodies are not shaped solely by individual experiences. They are produced and reinforced through systemic forces such as gender norms, traditional and social media, capitalism, globalization, the fashion and beauty industries, diet culture, pharmaceutical and health discourses. Despite narratives of increasing individual freedom, digitalization and globalization have intensified the spread of narrow and normative body ideals across borders and generations. In this context, critical thinking, bodily autonomy, and the ability to resist imposed norms become essential skills for young women navigating their lives.

While youth work and, specifically, Erasmus+ are meaningful elements that help developing a more inclusive society and supports young people in experiencing more fulfilled lives, we have noticed that working with topics around body image and body size is a significant hurdle in this field. These topics are deeply embedded in cultural norms, are highly personal, and often connected to lived experiences of shame, exclusion, and trauma. Tackling of those therefore requires careful, ethical, and methodologically grounded approaches, both to create meaningful impact, as well as to safeguard people we work with from further harm.

This report examines how youth work, education, civil society, and other stakeholders can more effectively support young women's well-being, participation, and agency. Grounded in lived experiences, it contributes to developing practices that challenge body-based inequalities and strengthen collective resilience. By grounding these insights in lived experience, the report seeks to contribute to the development of youth work practices that challenge body-based inequalities and support young women in building collective strength, confidence, and resistance to systems that reproduce gendered limitations in everyday life. **Used and proven by activists across the globe and increasing research, the principles of body liberation and fat acceptance are therefore used in our work as a novel tool to assist efforts for gender equality and female empowerment.**



### 3. Background and theory

Gender equality is a core value and legal principle in the European Union, yet women still face significant gaps in pay, care responsibilities, safety, health access, and decision-making power across member states. As the EU implements its 2026–2030 Gender Equality Strategy with a stronger focus on intersectionality and health, adding size discrimination to this conversation offers a timely way to address an underexplored aspect. It is crucial to discuss and take into consideration how body-based discrimination, weight stigma, and narrow beauty norms reinforce these gendered inequalities and limit women’s full participation in society. It starts with ensuring meaningful support to young women in their formative years, and in the following sections we offer an insight in how we can move towards that.

#### Gendered beauty norms and body policing

Research shows that women’s bodies are shaped by societal expectations, cultural norms, media portrayals, and social environments, all of which influence how women perceive and manage their bodies<sup>1</sup>. **Body policing** refers to the everyday practices through which these norms are informally enforced, as people monitor, judge, and regulate (women’s) appearance and behavior through comments, criticism, and social pressure. Maintaining socially valued feminine appearance often requires continuous effort and self-discipline. Feminist scholarship shows that women are expected to invest significant time, attention, and bodily work, including grooming, dieting, and regulating posture and behavior, in order to produce bodies that conform to dominant norms of femininity and attractiveness<sup>2</sup>.

These pressures are particularly pronounced among young women. Social media environments and anti-fat attitudes intensify body surveillance and are associated with body checking, low self-esteem, weight bias, and an increased risk of eating disorders and depression<sup>3</sup>. According to the European Institute for Gender Equality, adolescent girls and young women in Europe report poorer mental health than boys, partly due to ongoing concerns about appearance, body

<sup>1</sup> Sadık, R., & Yılmaz, G. N. (2025). Female body perception: social norms, criticism, and the impact of weight perception. *International Journal of Qualitative Studies on Health and Well-being*, 20(1), 2564088.

<sup>2</sup> Bartky, S. L. (2015). *Femininity and domination: Studies in the phenomenology of oppression*. Routledge.

<sup>3</sup> Pearl, R. L., Sharpe, H., Puhl, R. M., & Crandall, C. S. (2021). Weight stigma and social media: Evidence and public health solutions. *Frontiers in Nutrition*, 8, Article 739056.

dissatisfaction, and weight. Nearly one in two girls (47%) report mental health difficulties at least once a week, compared with 34% of boys<sup>4</sup>. Sociocultural appearance pressures and the internalization of thin, often unattainable beauty ideals increase body dissatisfaction, which is a well-established risk factor for disordered eating and eating disorders among adolescent girls and young women<sup>5</sup>.

Although many women recognize these pressures in their everyday lives, broader recognition of their structural effects, including the ways they restrict opportunities and generate chronic tension, remains limited. Similar observations emerged in workshops with youth conducted within the [BodyKind](#) project in Latvia, Czechia, and Macedonia, where participants, particularly girls and young women, reported lacking vocabulary, practice, and safe spaces to discuss their bodies in neutral and non-stigmatizing ways.

### Size discrimination and weight bias as a gendered issue

Size discrimination (also called weight stigma, anti-fat, fatphobia, fatmisia and others, depending on the context) refers to the **negative attitudes, beliefs, and practices directed towards a person based on their body size or weight**. Alternatively, these are directed towards somebody in normative size with the intent to fear them into not gaining weight, with that being believed to be the ultimate moral failing. It includes various forms, including social, associative and self-stigma. It is a highly prevalent, yet understudied topic, especially in the context of youth work<sup>6</sup>.

Discussion about weight stigma is urgent, because in most countries of the world it remains legal to discriminate against people because of their body size or weight. It is a **socially accepted form of discrimination**, documented in education, health care, employment, mass media, social media, and interpersonal settings<sup>7</sup>. Our independent research among 342 Europeans living in bigger bodies showed it was also an extremely prevalent one - 88.3% of them had experienced body shaming, 67.3% had been discriminated against, and 62.3% had experienced hate speech based on their body shape or size at some point in their lives, but 17.6% experienced physical violence for these reasons. The most common perpetrators of such actions are their families (70.6%), peers in education (61.8%), medical staff (61.5%), and strangers in public places (51%).

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<sup>4</sup> European Institute for Gender Equality. (2021). [Body image drives poor mental health, especially in youth](#).

<sup>5</sup> Breault-Hood, J. (2023). Sociocultural Pressures, Thin-Ideal Internalization, Body Dissatisfaction, and Eating Pathology in Young Adult Women (Doctoral dissertation, Loma Linda University).

<sup>6</sup> Puhl, R. M., & Lessard, L. M. (2020). Weight stigma in youth: Prevalence, consequences, and considerations for clinical practice. *Current Obesity Reports*, 9(4), 402–411.

<sup>7</sup> Latner, J. D., et al. (2021). Potential policies and laws to prohibit weight discrimination: Public views from four countries. *Milbank Quarterly*, 99(4), 1181–1201.



**Weight stigma is a gendered issue** also because body size carries different social meanings for women and men. Women's social value continues to be more strongly linked to appearance, which means that higher body weight often results in greater social and economic penalties, including disadvantages in hiring, wages, and interpersonal evaluation<sup>8,9</sup>. As a result, size discrimination does not operate in isolation but reinforces existing gender inequalities by affecting women's access to employment, health care, social participation, and personal relationships across the life course. Even without diving deeper into more complex systemic explanations, this explains why addressing size and shape discrimination is essential to advancing gender equality.

### Effects on mental health of young women and participation

The above described problematics are alarming, because research indicates that **weight bias and body dissatisfaction begin early**. It comes largely from internalization of the surrounding narratives perceived from families, media, and peers. As a result, the person begins to believe negative stereotypes and ideals about body size and appearance, subsequently applying them to themselves, and judging their own body by those standards<sup>10</sup>.

European survey data show that about one-third of adolescents, including roughly 34% of girls, perceive themselves as too fat (while only half of this number is clinically considered over the normative weight). Studies consistently find that a substantial proportion of adolescent girls report dissatisfaction with their bodies<sup>11</sup>. Large international studies showing that concerns about weight and appearance are already common among girls by ages 10–12 and increase steadily through adolescence<sup>12</sup>.

These experiences place youth at risk for psychological distress (primarily depressive symptoms, low self-esteem, and suicidal ideation), worse social and academic outcomes, and adverse physical health consequences including harmful eating behaviors, lower physical activity, substance use, and weight gain<sup>13</sup>. This, in turn, affects self-confidence and participation in social, educational, and professional activities, resulting in marginalization with its own consequences.

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<sup>8</sup> Puhl, R. M., & Heuer, C. A. (2009). The stigma of obesity: A review and update. *Obesity*, 17(5), 941–964.

<sup>9</sup> Tiggemann, M., & Rothblum, E. D. (1998). Gender differences in social consequences of perceived overweight in the United States and Australia. *Sex Roles*, 38(1–2), 75–86.

<sup>10</sup> (Rebecca M. Puhl & Chelsea A. Heuer, 2009).

<sup>11</sup> Rakić JG, Hamrik Z, Dzielska A, Felder-Puig R, Oja L, Bakalár P et al. A focus on adolescent physical activity, eating behaviours, weight status and body image in Europe, central Asia and Canada. Health Behaviour in School-aged Children international report from the 2021/2022 survey. Volume 4. Copenhagen: WHO Regional Office for Europe; 2024.

<sup>12</sup> World Health Organization. (2020/2022). *Health Behaviour in School-aged Children (HBSC) study: International report on adolescent health and well-being*. WHO Regional Office for Europe.

<sup>13</sup> Puhl, R. M., & Lessard, L. M. (2020). Weight stigma in youth: Prevalence, consequences, and considerations for clinical practice. *Current Obesity Reports*, 9(4), 402–411.

Searching for ways to resist systemic problems that far exceed any one person's field of influence is a natural response to living in an unjust world. One approach that emerged from fat, queer, often Black women's organizing in the United States during the 1960s and 1970s is what we now call **body liberation**.

While body positivity is the more familiar term, its original purpose has been diluted by corporate marketing that promotes unconditional body acceptance without committing to real, diverse representation or structural change. For this reason, many activists prefer the language of body liberation, because it shifts responsibility for injustice away from individuals and onto systems, and it explicitly considers community as essential for both healing and resistance.



**Body liberation is a social and political movement** that is based on liberation from societal expectations and systems of social oppression that consider certain bodies (types of bodies) to be more valuable, healthier, and more desirable than others. It emphasizes that all bodies deserve respectful treatment, regardless of their size, shape, physical abilities, gender, or other external characteristics.

**In our project “Body Liberation for Gender Equality” we approach body liberation as a set of principles** that provide an opportunity for community centered, meaningful and inclusive support for diverse bodies under pressures of body shaming and size discrimination. By empowering women to heal relationships with their bodies, we foster gender equality.

Central to the methodological considerations, **the principles of body liberation we adopt throughout are:**

### **1. From individual blame to systemic analysis**

For individual healing and cultural change, it is crucial to recognise how systems are responsible for injustice. We are taught that some bodies are more valuable than others, and that not fitting these standards is a personal moral failing, which produces shame, body dissatisfaction, exclusion, and constrained lives. One key to loosening these constraints is learning how structures such as weight stigma, sizeism, ageism, and gender inequality shape our views and experiences. As we understand this, we gain relief from internalising harmful values and become more free to live authentically and with greater power.

### **2. Every body deserves an authentic life**

Body shaming, weight bias, and other unequal treatment make authentic living impossible for many people. To create spaces where everybody belongs, we encourage cultivating a culture of radical acceptance of all bodies, regardless of size, appearance, or social status. This principle underpins actions and policies based on the conviction that all bodies are entitled to dignity, access, and a decent life.

### **3. Community and care as conditions for healing**

Many of our wounds and hesitations around our bodies emerge in social interactions, so they also need to be healed in relationships. Because body-based oppression is deeply embedded in culture and upheld by powerful systems that do not centre individual well-being, change cannot rest on individuals alone. By building communities of care, safety, and shared resistance, we create experiences that relieve constant external pressure on our bodies and open space for meaningful individual and collective transformation.

### **4. Intersectionality for addressing complex realities**

Each person has multiple identities that shape how they move through the world. Attending to how overlapping identities (for example, gender, race, body size, class, disability) compound oppression is essential for understanding lived experience. This intersectional awareness guides the design of targeted gender-equality interventions that respond to the specific realities of those most affected.

## 4. How we researched the needs of young women

### 4.1. Data collection process

Data collection was administered via Typeform through four survey forms. A pilot version was created and shared in English, and then translated in Latvian and Czech (for the Cyprus English version was used). These were disseminated through social media channels of the participating organizations, as well as shared during events and activities in person. Recruitment materials explicitly invited women aged 18–35 who had experienced body dissatisfaction, body shaming, appearance-based judgment, or pressure to change their body size, shape, or appearance.

This messaging emphasized that participation was voluntary, anonymous, and that the survey would take approximately 6–10 minutes to complete. Respondents were informed that the results would be used for the development of support materials and training content, including educational resources and capacity-building tools for youth work and non-formal education contexts.

### 4.2. Sample overview

The report describes experiences of women aged 18–35 with higher education from Latvia, Czechia and Cyprus, living in urban areas. The majority of them self-report living in an average sized body.

This report is based on data collected through four surveys (translated versions of united template), aimed at 18–35 years young women from Latvia (n=90), Czechia (n=67), Cyprus (n=8), and through an English-language pilot version (n=5), totalling to 169 respondents. While EU youth policy and Erasmus+ formally focuses on ages 13–30, in this report we have opted to include young women up to 35 years of age.

**We justify this by EU gender equality and social inclusion frameworks that regularly apply extended age categories up to 34 or 35 to capture structural inequalities.** Notably, the European Commission Gender Equality Strategy 2020–2025, Eurostat and other policies analyse young women using 18–34/35 age ranges, reflecting **prolonged and gendered transitions to adulthood shaped by unstable employment, care responsibilities, and delayed economic independence.**

Out of the total sample (n = 169), 44.7% lived in a city (n = 76), 40.0% in a capital city (n = 68), 8.8% in a town or village (n = 15), and 0.6% in a rural area (n = 1), while 5.9% did not provide a valid or classifiable response (n = 10). Regarding their level of education, 69.4% reported having completed higher education (college or university; n = 118), while 30.6% reported secondary education (e.g. high school; n = 52).

It was important for us to distinguish between experiences of women living in different body sizes, therefore asked, if they feel comfortable, about how would respondents describe their body size, 54.7% noted their body size as average (n = 93), 27.6% as larger than average (n = 47), and 15.9% as smaller than average (n = 27), while 1.8% did not provide a valid or classifiable response (n = 3). Differences in answers among these three groups will be used to highlight some of the conclusions in this report.

While these carry important information, responses from men, non-binary participants, and women outside the target age range (total of n=29) were excluded from this stage of analysis to ensure consistency with the project's objectives and recruitment criteria. Some of the respondents (n=10) reside outside of their country bounds, but nonetheless answered in the language of survey and therefore are not excluded.

### 4.3. Survey structure and thematic areas

The survey consisted of 19 questions in total and followed a mixed-methods design, combining quantitative and qualitative data collection. While its primary intent is to provide sufficient qualitative depth to inform the development of support materials, educational resources, and training content within the framework of project “Body Liberation for Gender Equality”, the gathered conclusions serve as a meaningful contribution for anybody working with the issues at hand. A more detailed look at the questionnaire available in Annex no.1.

**The questionnaire** consisted of two primary sections.

1. 14 closed-ended multiple choice questions inquired about:
  - experiences of body shaming, unfair treatment, or appearance-based judgment related to body size, shape, or weight;
  - specific forms of discrimination encountered;
  - social and institutional contexts where these experiences occurred (family, education, healthcare, public space, online environments);
  - sources of support and help-seeking behavior;
  - [Likert-scale] overall satisfaction with one's appearance;
  - [Likert-scale] perceived influence of other identity factors on appearance-based judgment;
  - [Likert-scale] self-assessed confidence in responding to body-shaming or discriminatory situations;

2. To gather insights of qualitative nature, 5 open-ended questions allowed respondents to elaborate on:
  - factors that help them feel stronger or more supported when facing body-related pressure or comments;
  - barriers to seeking support;
  - skills or knowledge they would find useful to better defend their boundaries or rights;
  - desired changes in schools, communities, youth work, or society to better support young women's body autonomy;
  - optional additional comments.

In addition, the survey included basic demographic questions (age, gender identity, and level of education, country of residence and type of place of living), which were used for sample description and filtering - to make sure that the sample are 18-35 years young women. Additionally, we presented a question about intersectionality, inquiring if the respondents "feel that their experiences of appearance-based judgment are influenced by other aspects of their identity (e.g. ethnicity, sexuality, disability, age)?". This way we were able to take into consideration the intersectionality of participants' experiences.

While the final results highlight the joint conclusions, the survey design ensures comparability of the gathered data across countries, providing a possibility to use them for other purposes in future.

## 4.4. Ethical research considerations

The methodology was informed by feminist research principles. The survey framed body-related discrimination as a social and structural issue, rather than an individual failing, and avoided medicalizing or pathologizing language. The wellbeing of participants was strongly considered, recognizing the sensitive and potentially triggering nature of the topic. We made sure to highlight their choice to stop participation at any stage of the survey, skip particular questions or select "prefer not to say" through a disclaimer in its beginning.

"This topic can be uncomfortable and some of the questions may be triggering. Please, be kind to yourself and, if necessary, take breaks, stop filling out the survey, or seek the support of a therapist when needed."

Another approach adopted from the feminist research practices is the standpoint theory. Individuals' social positions (such as gender, class, or body weight) shape how they understand the world and reproduce knowledge<sup>14</sup>. Feminist, sociological, and critical research uses this

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<sup>14</sup> Silvestre Cabrera, M., López Belloso, M., & Royo Prieto, R. (2020). The application of feminist standpoint theory in social research. *Investigaciones Feministas*, 11(2), 307–318.



perspective to analyse social inequalities by centring the experiences of marginalised groups<sup>15</sup>, and in this report we are addressing gender inequality. In this context, we opted for asking young women what type of support they would need and want in open-ended questions to allow a more meaningful insight into their realities.

Further building on the social impact nature of our efforts, the final part of this report includes conclusions and recommendations for youth work, civic society and other stakeholders. These are informed by the survey results as well as expertise of the involved staff in efforts for gender equality, fat and body liberation..

Participation was anonymous, with the exception of those who wished to receive results of this survey. In those cases, the email addresses were separated and are kept in different location not accessible to all staff involved in the project, according to GDPR principles.

## 4.5. Limitations

While meaningful and crucial for fostering gender equality in youth work, the results of this report have significant academic limitations which means the gathered conclusions based on quantitative data **can not be used out of context as standalone statistical statements.**

We base this statement on the following considerations. The sample is purpose-driven and not statistically representative. Recruitment through organisational networks and social media resulted in an overrepresentation of urban, highly educated young women, many of whom were already engaged with gender equality or body-related topics. In addition, explicitly inviting participants with experiences of body-related injustice likely skewed the answers towards the about them having experienced it. The data is based on self-reported perceptions, which are well suited to identifying training needs but do not reflect objectively measured discrimination.

Another limitation is the uneven sample sizes across countries. It limits cross-national comparability which is not our goal on this occasion. Findings are therefore best understood as exploratory and practice-oriented, aimed at informing Erasmus+ training development rather than country-level generalisations. Additionally, it is important to keep in mind that despite a shared survey template, linguistic and cultural differences may have influenced responses. Translations might also have had an influence on the nature of qualitative data.

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<sup>15</sup> Friesen, P., & Goldstein, J. (2022). Standpoint theory and the psy sciences: Can marginalization and critical engagement lead to an epistemic advantage? *Hypatia*, 37(4), 659–687.

## 5. What do young women experience

This section will provide the information about the background of women involved in the survey and provide meaningful insight in their exposure to various experiences. Secondly, this data is used as a way to highlight common patterns that, combined together with the already existing knowledge from other researchers, raise awareness on topics and challenges connected to body image, weight bias and gender equality in the target group.

As a meaningful aspect that influences lived experiences of women, we made sure to include a question about the self-valued size of body. Of total 169 women, the majority (n=93 or 54.7%) considered their bodies of average size, 27.6% (n=47) of larger and 15.9% (n=27) smaller than average. While their valuation is not of objective nature, the chosen approach is purposeful. It includes a perspective of **relative body size to the lived social environment of these women** thus providing depth to the reported experiences. We already know that people of larger or smaller size are more likely to be affected by weight bias<sup>16</sup>, and asking this question allows us to take into consideration the existing levels of privilege for those outside of “average” bodies within their particular contexts.

As this is not the primary focus of this report, the correlation will be examined only in a few of the following sections. To ensure that the answers to open-ended questions respond to our primary goal to identify the needs of women who need support with body image issues, we asked if they have felt treated unfairly, left out, shamed or judged because of their weight, size, or shape.

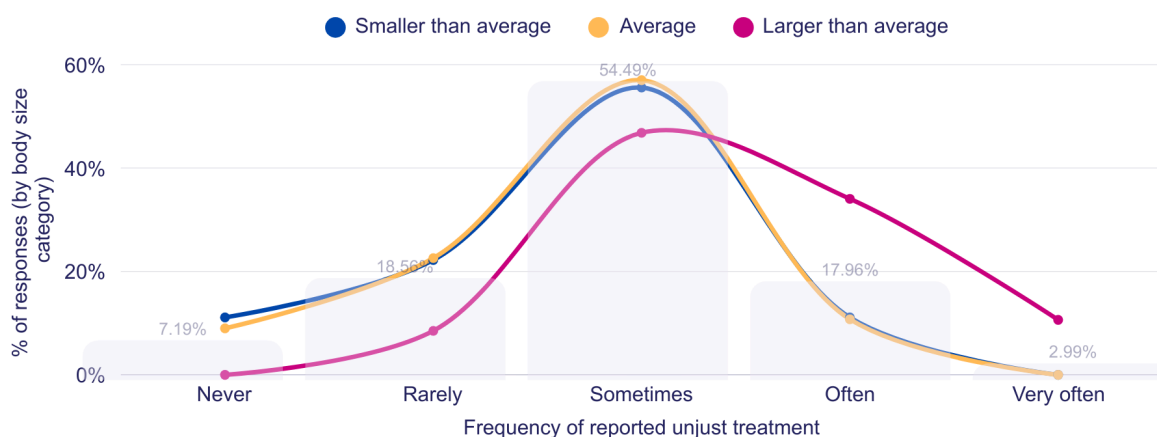


Figure no.1: Frequency of feeling felt treated unfairly, left out, shamed or judged because of respondent's weight, size or shape.

<sup>16</sup> National Eating Disorders Association. (2024). Weight stigma. National Eating Disorders Association. <https://www.nationaleatingdisorders.org/weight-stigma>

Figure nr.1 hints at several conclusions. Firstly, it is clear that in all sizes majority of women experienced such shaming or judgement at least sometimes - in the whole group only n=12 (7.19%) women felt like they never experienced such treatment, but 54.49% (n=91) mentioned they felt it had happened sometimes and about one fifth (20.96%, n=5) often or very often. It gives us meaningful assurance that the issue we are working with is not imaginary and does **exist in the surveyed group, independently of body size.**

Secondly, it is important to highlight the differences between women of different sizes. It is clearly visible that the lines associated with average and smaller than average body size align. What is even more explicit is the fact that the answer “never” was selected exclusively by women of smaller or average size (none of the larger than average selected this). It is noteworthy that in the following question 9 of 12 from those did answer that they had experienced hurtful comments, teasing or jokes which would technically place them outside of this category, which allows space for speculation. They selected never feeling experiencing these things, but later selected affirmative options which makes us think they did not recognize teasing, jokes or hurtful comments as a form of exclusion, shaming or judgement. Nonetheless, the group is small and will not further be discussed.

Meanwhile, as noticeable also by the line chart on the right side, it shows a clear pattern from respondents who reported being larger than average. More of them felt such injustice “often” or “very often” (respectively, 34.04%, n=16 and 10.64%, n=5), placing almost the same proportion of them (a total of 44.68%) within these two answers as the smaller than average and average sized women in “never”. While this report will further analyse all experiences as a total of all the young women, the differences between these three groups should still be kept in mind while viewing all the presented data.

**Women who identify as larger than average will more likely have made felt like they are shamed, excluded, treated unfairly based on their body size, weight or shape.** It means that their lived experience within their bodies in this society creates a larger burden on their mental health, participation and self-esteem. Us as civic rights advocacy enthusiasts and professionals highlight them as a marginalized group for these reasons and invite anybody working with youth including considerations and practices for minimizing these effects in your work.

## 5.1. Characteristics of young women's experiences

To further understand the types of experiences of young women, we wished to understand better what type of treatment they had experienced. The figure no.2 shows that **verbal forms of weight-based stigma are by far the most common experiences among respondents.**

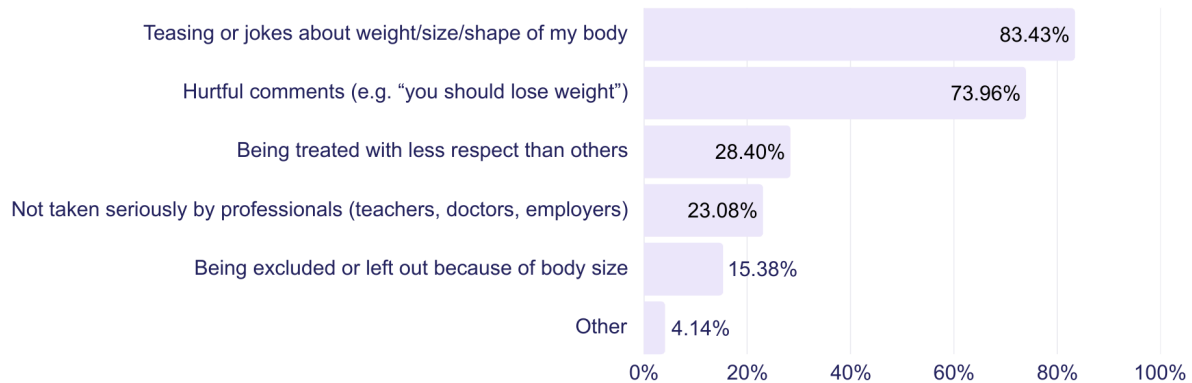


Figure 2: Self reported experiences of size discrimination, % of all respondents

Overwhelming 83.43%(n=141) report teasing or jokes about their body, and 73.96% (n=125) report hurtful comments such as being told to lose weight. Structural and institutional forms of discrimination are also present but less frequent: 28.4% (n=48) experienced less respect, 23.08% (n=39) were not taken seriously by professionals, and 15.38% (n=26) were excluded or left out because of body size. This very much correlates to the needs and wishes for particular types of support expressed and discussed in further sections.

To be able to pinpoint our potential impact in future work, the second aspect we wished to identify are the situations and environments where they have experienced negative comments or unfair treatment about their bodies. As figure no.3 shows that these are most commonly experienced in institutional settings and close relationships.

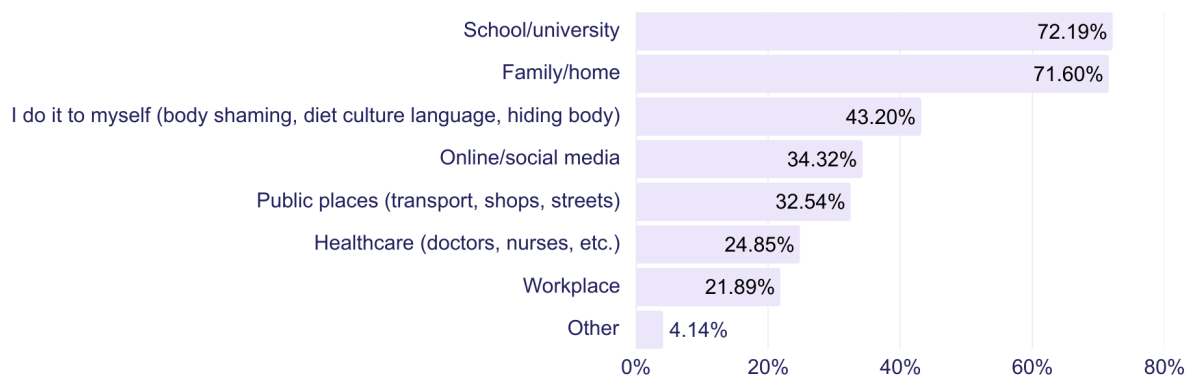


Figure 3: Self reported settings for experienced size discrimination, % of all respondents

School or university (72.19%) and family or home environments (71.60%) are the most frequently reported contexts, highlighting how body-based stigma is embedded in everyday socialization and close relationships. These align with other European research that points to the fact that people are most affected by ill treatment or comments due to their bodies within their closest relationships - among family, friends and romantic relationships, as well as in educational institutions, linked to especially memorable experiences in childhood and youth.<sup>17</sup>

A substantial proportion of respondents also report self-directed body shaming (43.20%) highlighting the internalization of the existing bias, followed by exposure in online and social media spaces (34.32%) and public places (32.54%). While the numbers are significantly lower, experiences within healthcare (24.85%) and the workplace (21.89%) indicate that weight stigma extends into professional and authoritative settings, not only informal interactions.

From the given responses we can conclude that support for coping is crucial to mitigate effects of everpresent harms and should include most varied scenarios for addressing the experienced challenges. Nonetheless, the most valuable insights and outcomes from our side would entail ways to navigate these in close relationships or home, school and university (for younger audiences) as the places that should feel the safest for young women.

Simultaneously, support in reducing the internalization of external bias and beliefs should be considered to empower young women from the inside out and strengthen their self-worth that is independent from existing narratives in society.

## 5.2. Effects on mental health and participation

Research shows that body image and body dissatisfaction is shaped by social environments and lived experiences. These are important and consistently documented factors associated with psychological distress and lower well-being, especially among young women.<sup>18</sup> This concern was one of the key motivations for this project. Accordingly, within this report, we seek to better understand the mental state of the participating young women by asking two questions: one addressing satisfaction with their appearance, and another exploring the barriers this has created for participation in everyday life situations.

### Satisfaction with overall appearance

Figure no.4 shows clear differences in satisfaction with overall appearance across body-size categories. Respondents who identified as smaller than average were most likely (55.56%, n=15) to report being mostly satisfied, while those in the average category were more evenly distributed between satisfaction and neutrality.

<sup>17</sup> Miltina, I. (2025). Fat Labor: Conceptualizing the Efforts of Coping with Fat Oppression.

<sup>18</sup> Quittkat, H. L., Hartmann, A. S., Düsing, R., Buhlmann, U., & Vocks, S. (2019). Body dissatisfaction, importance of appearance, and body appreciation in men and women over the lifespan. *Frontiers in psychiatry*, 10, 864.

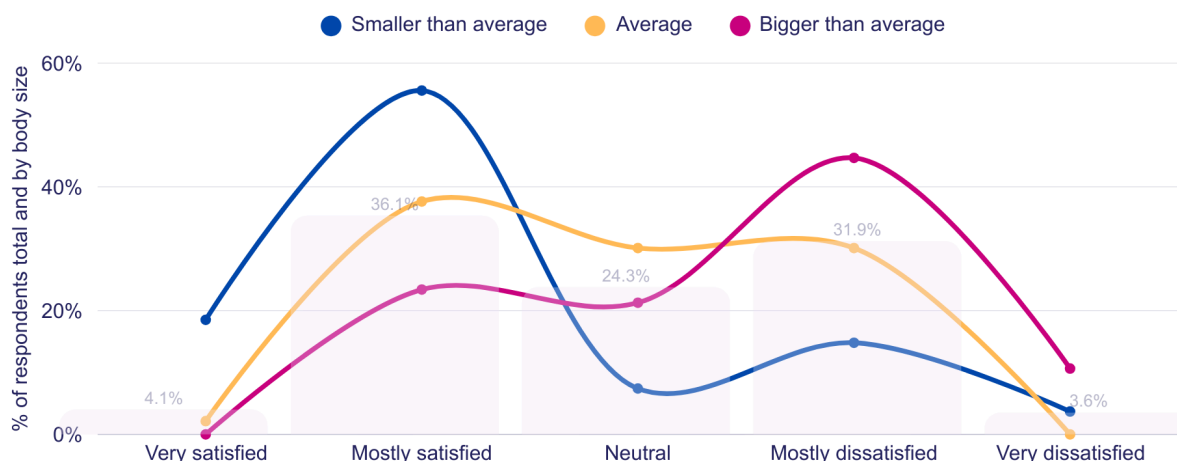


Figure 4: Satisfaction with overall appearance in the last 12 months

In contrast, respondents who identified as bigger than average are significantly more likely to report being mostly dissatisfied (44.68%, n=21) or very dissatisfied (10.64%, n=5) with their appearance, with dissatisfaction clearly outweighing satisfaction. Overall, the pattern highlights a **strong association between larger body size and lower appearance satisfaction**. While this can not be taken as a statistically significant sample, it gives a meaningful impression that is necessary for conclusions and context in other questions. Additionally, it gives food for thought on **how we lessen this correlation between body image and mental health and better support young women in larger bodies**.

## Self-reported effects on mental, physical health and participation

To further assess the potential impact of body and appearance related concerns young women in this survey attribute to their lived experience, we asked to evaluate effects on three aspects - mental health (self-esteem, mood, anxiety, eating habits), physical health (exercise, eating, body care) and participation in society (feeling included in school, work, community, social activities).

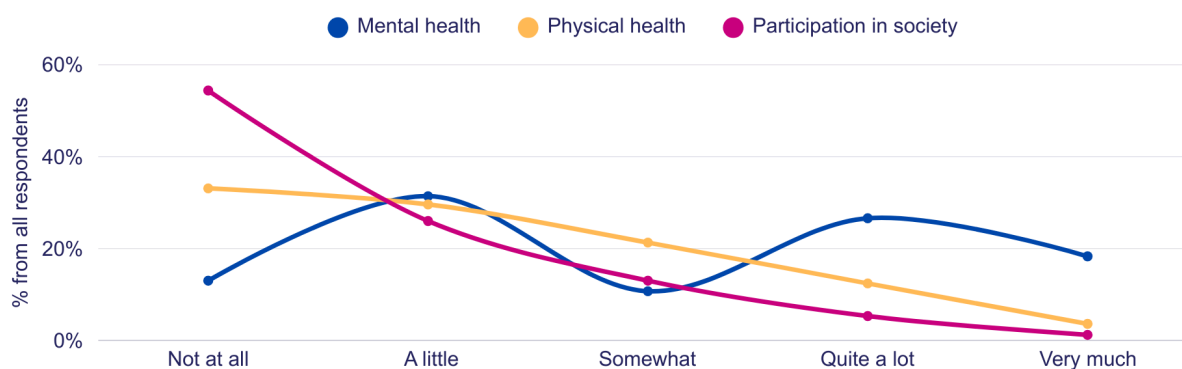


Figure 5: Self-reported level of effects on mental, physical health and participation



The data show a clear gradient in how body image pressures affect different areas of young women's lives. Mental health is the most strongly impacted domain: nearly half of respondents (44.9%) report that body image pressures affected their mental health "quite a lot" or "very much". This indicates and confirms that within this group of women the information stated by other research is true - comments and pressures related to body image, weight and size create a direct psychological and emotional stress.

Likely influenced by some of the mental health aspects, also physical health (exercise, eating, body care) was reported as influenced by many respondents - 66.90% were affected to varying degrees with the majority (50.9% of total) in the moderate section affected "a little" or "somewhat". While it is affected less severely than mental health, the number of young women who have reported such an impact is very high.

In contrast, majority report that participation in school, work, and social activities is least affected overall - for 54.4% not at all, but that leaves almost half of respondents' participation impacted at varying levels from "a little" to "very much". While it is significantly less than with other aspects, moderate to high impact indicates that body image pressures can still act as a barrier to social inclusion and participation for some young women. Further critique of this low self-reported disengagement is justified and clarified more in the following section.

## How body features and appearance affects participation

Participation is one of the keywords in the field of youth, it is also a signifier of inclusive and welcoming environments which are crucial for ensuring a wholesome growth and fulfilled life for young people. While civil society can take care of external aspects for welcoming young women, intrinsic motivation to participate is more complex and requires a set of prerequisites to make it happen. Inspired by already existing common knowledge about the body image's strong role in this, we found it necessary to identify if concerns about their bodies or appearance have stopped young women from participation. To further detail in which situations that happens most frequently, we used a modified version of the *Body Image Life Disengagement Questionnaire (BILD)*<sup>19</sup>. The findings show that such concerns influence their participation in everyday life in context-specific ways.

What we observed is that the highest levels of **disengagement were reported in activities where bodies are highly visible, compared, or socially evaluated**. Shopping for clothes and beach or pool settings emerge as the most impacted domains in this context. In both cases, about two-thirds (respectively, 65.80% and 63.90%) of respondents reported that body image concerns stopped them from participating in these activities at least to some extent, with a relatively high percentage reporting high levels of missed participation. A similar pattern was visible in the participation in physical activity or sport, with a slightly lower total of 56.1%.

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<sup>19</sup>Atkinson, M. J., & Diedrichs, P. C. (2021). Assessing the impact of body image concerns on functioning across life domains: Development and validation of the Body Image Life Disengagement Questionnaire (BILD-Q) among British adolescents. *Body Image*, 37, 63–73.

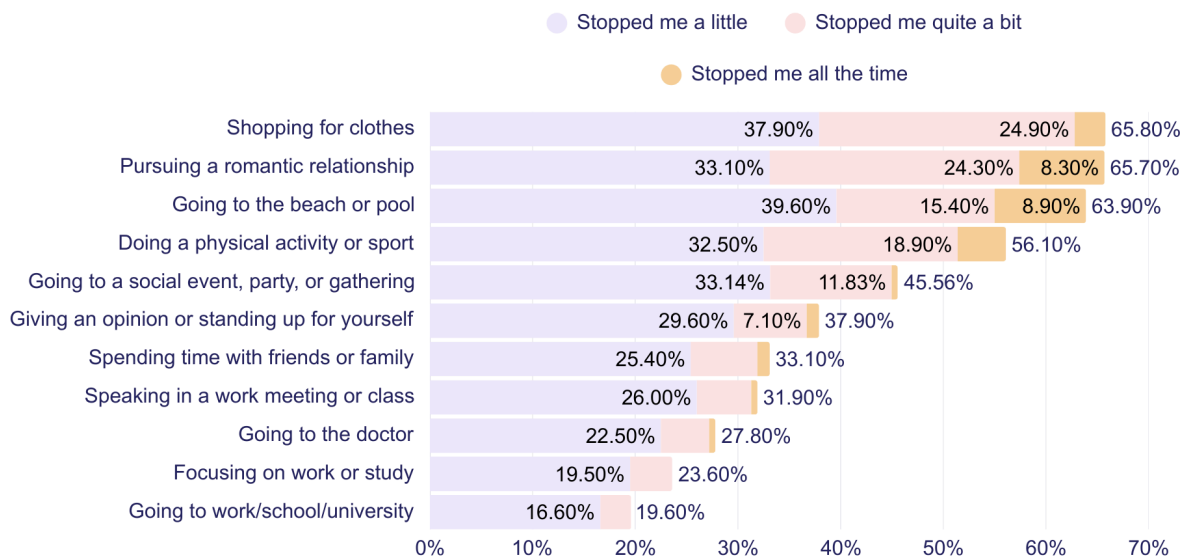


Figure 6: Concerns about body or appearance stopping respondents from participation in activities, % of all respondents

A more prevalent internal barrier was reported in the engagement in romantic relationships. About one third (32.6%, n=54) reported moderate to high disengagement while about the same amount (33.1%, n=41) said that concerns about their bodies and appearance stopped them from pursuing romantic relationships “a little”. This highlights that **body image concerns affect not only public participation, but also missed connections in intimate and relational aspects of life**. This is further supported by the more moderate yet prevalent number of women who felt that they were hesitating to participate in parties and social events (45.56%, n=64 across varied levels) or spend time with friends and family (33.1%, n=56) due to said concerns around their appearance.

Activities linked to institutional roles or obligations show lower levels of disengagement: highest proportions of respondents reported concerns around their appearance having no effects on their participation in relation to going to work/school/university (80.50%, n=136), focusing on work or study (76.30%, n=129), going to the doctor (72.20%, n=122). However, even in these contexts, around one fifth to one third of respondents still report some level of interference, indicating that body image concerns remain present even where participation may feel unavoidable or strongly expected.

Across all activities, the most common response is “stopped me a little”, suggesting that **body image concerns often act as a persistent background pressure**. While these impacts may appear minor in isolation, their accumulation across multiple life domains can meaningfully affect wellbeing, social inclusion, confidence, and participation. These findings underline that **body-related pressure requires deeper examination of the consequences for missed participation in social, physical, and relational life**.

## 6. What support young women need

Based on the results of four open-ended questions, this part of the report will reflect on the needs and aspirations that help us identify the specific gaps in the necessary individual, community and structural support. They are based on what young women expressed themselves, therefore providing credible and meaningful direction for future actions and the created solutions.

### Reported self-confidence in tackling negative comments about body

One of the first stepping stones for self-advocacy is having the confidence to stand up to the abusers. As we find out in the following chapters, it consists of overall confidence, knowledge to counter the said comments, and communication skills that allow level-headed arguments in situations of distress. To introduce this topic we started by asking young women - how confident they feel in handling situations when someone makes negative comments about their body?

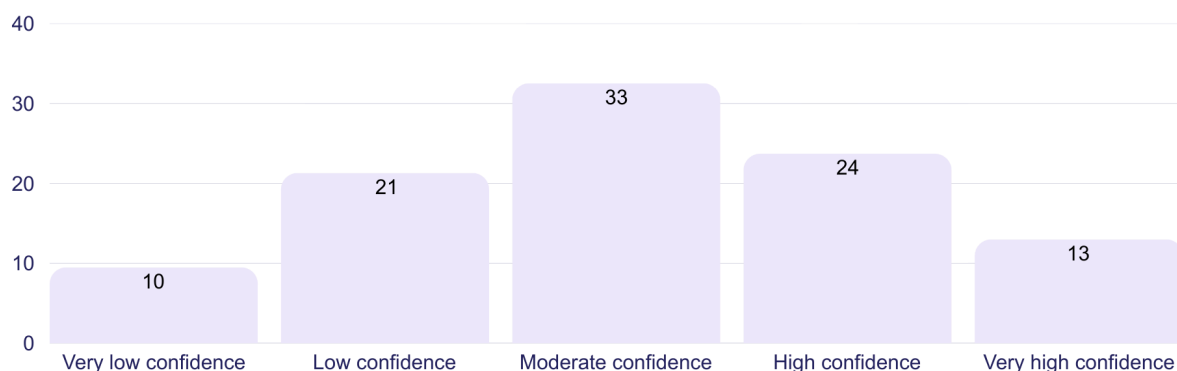


Figure 7: Reported self-confidence in tackling negative comments about one's body, % of respondents

On a five-point Likert scale, respondents reported moderate confidence overall ( $M = 3.09$ ). The largest proportion selected the midpoint, indicating partial confidence rather than certainty in handling body shaming situations. What we learn the most from, are the numbers at either end of the scale. Nearly one third (30.8%) report low confidence (ratings 1–2), while 36.7% report high or very high confidence (ratings 4–5). **This split suggests that confidence in responding to body shaming is uneven and cannot be assumed** - in each of the body size groups answers spanned from 1 to 5.

Nonetheless, the most crucial conclusion comes from comparing the average confidence in each of the groups. Those in larger than average bodies, reported their confidence half a point lower ( $M=2.64$ ) than those in average-sized bodies ( $M=3.16$ ), and more than a whole point lower than those in smaller than average bodies ( $M=3.67$ ). It means that the former felt rather

“low confidence”, whereas the latter leaned towards “high confidence”. For us, as educators, it motivates the **need to look for solutions to build confidence especially among those living in larger bodies**.

## 6.1. Support in dealing with body image pressures

In efforts to provide a more elaborate understanding about needs and wishes, we asked the young women *what would help them most to feel stronger and more supported when dealing with body image pressures or weight-related comments*. The answers give a deeper understanding about the conclusion in the previous paragraph.

This question was answered by n=152 women, and the desired support is easily categorized in following three groups. First, they wished for developing their skills and knowledge in addressing societal bias and expressions thereof. The second group revolved around various aspects of social support and increasing the feeling of belonging. And the third group of responses broadly asked for change of societal beliefs and bias (mostly through educating and raising awareness).

### Skills and knowledge for empowerment

This group consisted of the most responses (total of n=54) and heavily relied on two needs for the young women. The overwhelming majority mentioned aspects connected to reducing the internalized bias - **need to improve confidence, increase self-awareness and accept oneself to realize that our looks are not indicative of our worth**. Many of the comments from those who claimed not to have issues with external bias, mentioned that it is specifically their confidence that helps them to not get affected by negative comments related to their bodies.

*“Better self-confidence and having my relationship with my body resolved.”*

While the previous section described the changes respondents were eager to gain within themselves, the following portion of the answers (n=21) included more specific **need for coping strategies for tackling these internalized beliefs**. More than half of them wished for the most diverse ways to cope - practicing mindfulness and self acceptance, workshops on self-compassion, engaging in physical activity and artistic practices, psychotherapy and other techniques for mental health and resilience. Three respondents mentioned less productive strategies revolving around avoidance and dissociation from their bodies or succumbing to the prevalent biases in other ways.

Our key takeaway about this is that part of the young women were aware about their internal struggles and mental health challenges, but did not have enough knowledge on “how” to resolve them. This would be the point where in our development work we would find benefits in support

and expertise from mental health experts and/or activists about **healing from systemic injustice and resistance towards oppressive societal narratives**.

Some of the respondents had found ideas for pathways for such healing themselves. It was remarkable that a larger group (n=11) wished for **skills and strategies to be able to stand up and defend themselves, set boundaries and “develop the ability to respond calmly and assertively”**. Several of them specifically asked for response scripts, strategies and “maybe some witty comebacks” to memorize for situations when one’s body is being shamed. These are common strategies described in literature of marginalized communities, and have a high potential for empowerment as well as creating situations for awareness raising in daily situations.

*“Examples of women (personally known or public figures) who live happy, fulfilled, successful lives despite having “non-standard” body sizes or shapes”*

Building on the empowering theme of this whole section, respondents (n=10) wished for broader **representation and diversity of bodies** in public spaces and media. Here we interpret this as a potential strategy for empowerment and increasing the self-confidence that was broadly mentioned in other responses, but also as a potential way for educating and raising awareness in broader society (discussed more later).

## **Social support for belonging**

Moving on from the more individual support, a significant amount of identified needs was connected to making respondents feel like they belong and receiving the necessary human support. It showed up in two groups of responses. One of the most mentioned needs was connected to the **immediate social support from “others”** - family, supportive partner, friends, other women. Importantly, several mentioned a wish for a community or support groups, as well as others standing up in situations of experienced body shaming or weight related comments.

*“If others around me did not ignore such comments and supported me”*

What we heard from these responses was that **young women needed to feel less alone in their struggles and feel like their experiences or suffering is valid**. This was further underlined in a group of responses (n=7) that mentioned a wish for insights or community with “someone who has had the same experience”. In many of these it manifested as “stories” and “experiences” of people in similar situations and “examples of other women who treat their bodies neutrally or positively, and advice on how to cope with the impact of unwanted comments”.

Further insights around this answer can be drawn also from a question we asked earlier in the survey. Asked if they experienced body shaming or unfair treatment, where would they most likely turn for support, young women distinctively pointed to their preferred social support sources.

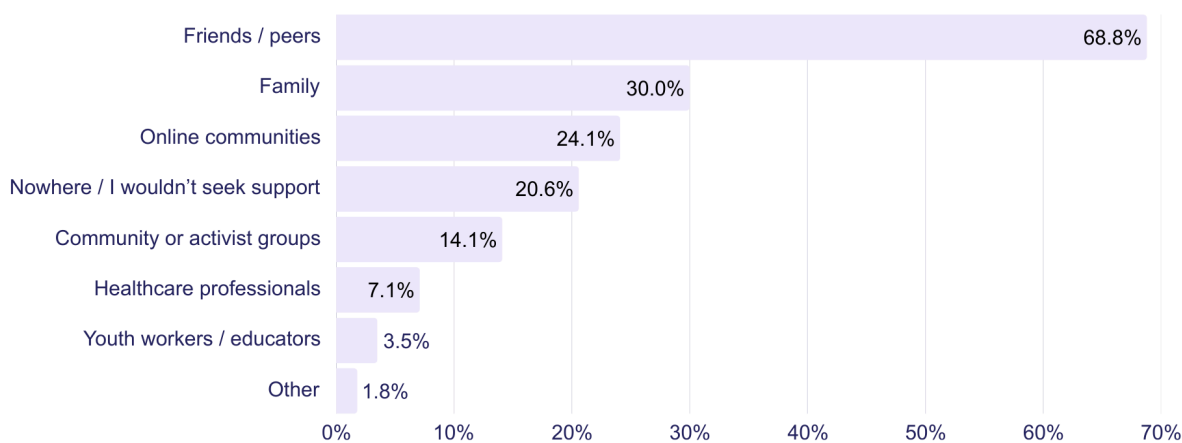


Figure 8: Sources for support that respondents would turn to if experienced body shaming or unfair treatment

Support-seeking patterns are strongly peer-oriented, with over two thirds of them indicating friends or peers as a primary source of support, and it comes at no surprise. Family and online communities play a secondary role. While we can't state definite correlation, it might be connected to their experiences with perpetrators of body shaming and judgement where 71.60% experienced it with family/at home and 34.32% - online (see figure no.3). From this we can conclude that young women would need to build more trust in their families to talk about this to their closest ones, possibly **through training the families on reasons why body comments and weight bias are harmful**.

The second notable conclusion revolves around what we noticed in terms of where young women would **not** turn for support. The fact that one in five respondents **would not seek support at all** highlights a pattern that is highly risky for mental health and participation. As answers in many other sections confirmed, concerns about bodies are common, but if one does not turn for external help, it adds to the mental toll and pressure that affects daily lives.

This was further underlined by the low numbers selecting external support by professionals who could be most qualified to help with these issues (community or activist groups - 14.1%, healthcare professionals - 7.1% and youth workers/educators a very low 3.5%).

Altogether these answers point to several conclusions for our development work for mitigating body shaming and weight bias. What young women need most is feeling like they belong - we can cultivate this by **strengthening the ability of the closest family members and friends to avoid body shaming** and simultaneously, **know ways to support the young women in their body image struggles**. In the meantime, we clearly see that **young women need to find out more about ways how activist/community organizations can be helpful in this**. And last, but not least, this provides a space for broader discussion: **what needs to change to make youth workers a more prominent source for support?**



## Broader societal change

A large portion of respondents framed the support they need not in terms of individual resilience, but as the absence of body-based judgement altogether. Many expressed a wish for a social environment in which comments on bodies would simply not occur, or where tolerance and non-interference were the norm. Statements such as “not receiving such comments at all” or “a non-judgmental attitude from others” point to a **desire for structural rather than personal solutions**.

Closely connected to this was a call for a shift in dominant societal beliefs about bodies and weight. Respondents emphasized the need for greater **understanding that bodies are shaped by complex and intersecting factors beyond individual control**, including health, trauma, socioeconomic conditions, and life stages. In this context, narratives of laziness or personal failure were explicitly rejected.

Many respondents also identified education and awareness-raising as the main pathways through which such change could take place, including public education, school-based discussions, media literacy, and campaigns that challenge narrow beauty ideals and normalize bodily diversity. Several noted that body shaming affects not only larger bodies, but also very thin people, whose experiences are often socially minimized.

As these themes do not directly answer our question about the necessary support, they are explored in more depth in section 6.4 about the desired societal change. Meanwhile, within this section these serve as affirmation for the importance of our work and underline the need of this report as a meaningful resource that helps building broader awareness.

## Other aspects

While many women described their needs for support, a significant portion of them (n=17, 11.1%) said versions of “I don’t know” or “No idea”. This gives a perspective that, possibly, they either don’t have enough information or awareness about the topic of body acceptance, or they have not had enough time and possibility to see how this topic relates to their experience and what could be helpful in this situation. For our work we interpret this as a further reassurance that overall awareness raising and education would be meaningful for increasing young women's literacy on topics about their bodily autonomy and bias-free perceptions of diverse bodies.

A few mentioned the need for structural change (“higher taxation of sweetened beverages”) and medical interventions (“Weight loss according to a specific plan”) that will not be discussed due to low prevalence as well as these being out of our scope of influence.

Summarizing the responses - the respondents clearly hint at internal aspects one might wish to change (internalized beliefs and behaviors), humanly support (communities and close relationships) and eradication of systemic injustice (ending biased ways of thinking and existing). More on ways to reach that will be reflected in the final chapters of this report.

## 6.2. Barriers for seeking support

By asking “*What makes it harder for you to seek support in situations when you experience negative treatment related to your body?*”, we were able to pinpoint some of the existing barriers. Namely - we found information that helps to answer questions on how we can make sure that the support measures and materials we create are not missing the point or not reaching the young women we wish to support.

What we came up with is a completely different picture than expected. Instead of understanding the variety of structural barriers we should consider in our work, we were overwhelmed with the amount of the **internalized barriers**. Although many of these barriers appear at the individual level, they are **produced and reinforced through social interactions, cultural norms, and repeated experiences of judgment and exclusion**. They should therefore be understood not as personal deficits or failures to cope, but as internalized effects and signals of weight stigma and body-based oppression operating within broader social and structural contexts.

While different than anticipated, the conclusions from these responses provided a very valuable insight into **potential sensitivities that we need to keep in mind and potentially address in our developmental work** and direct outreach activities. We might not be able to identify the structural barriers directly, but those can be defined as the necessary improvements that help reduce each of the following barriers.

*“Shame, thoughts that it’s probably true what they say.”*

It was eye opening to see the amount of shame and self-blame the respondents felt in seeking support related to comments and other mistreatment around their bodies. For example, of n=30 women in this group, many say “*the only person who criticizes me is myself*,” mention repeated feelings of shame about talking or not being liked, or point to low self-confidence and self-doubt that make it hard to trust their own experiences or ask for help. This further echoes in other parts of the survey - 43.20% felt they themselves were doing this to themselves when asked about situations when it happens and wished for more self-confidence to be able to deal with it.

Our main takeaway from this is that we need to reinforce the **shift of belief that body shaming and weight or size discrimination is an individual issue**. We can do this by strengthening awareness about the existing, very prevalent weight bias and other systems that assert such beliefs on individuals. Even more so, we propose radical self-acceptance or self-love<sup>20</sup> as a

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<sup>20</sup> Taylor, S. R. (2021). *The body is not an apology: The power of radical self-love*. Berrett-Koehler Publishers.

potential approach to minimize these aspects of the internalization of widespread shame about not conforming to external standards.

*“Fear that someone will laugh and that support won’t help anyway.”*

Another consequence of internalized bias shows in the n=12 responses around **fear of judgment, misunderstanding, retaliation**. These answers show a clear trauma response based on previous life experiences, and minimizing such barriers would take a complex approach. What we, as activists and enthusiasts of youth work, can do is strengthen the external support systems and awareness to slowly move towards lesser stress in such situations. This also makes us ask questions about ways to minimize one of the following, directly related, three aspects below that also were broadly mentioned. They directly give insight into the angles around the formation of such fear.

*“I don’t feel it’s worth saying anything.”*

It was quite common (n=13) to mention **a lost belief in the support systems**. Mixed with some of the fear and internalization already explained before, these answers were explaining somewhat hopeless feelings around looking for support in such situations. Either they expect that nothing will change, their needs for support will be denied as previously in the past, or the “support systems are biased towards appearance” anyways. These answers also included belief that any support is pointless as the others can’t relate or won’t understand the lived struggle around one’s body. Such a feeling of helplessness further leans into the next group of answers.

*“I deal with it myself; I ignore comments.”*

Seeing that some of them have lost belief in external support, shows no surprise that the young women have turned to self-reliance / handling it alone as a coping mechanism. While the number of such answers was not very high (n=7), it does highlight how internalization and lack of recognition for a social justice cause can form an additional burden for individuals to stay locked in their loneliness with the experienced injustice. It is important to mention this, because the body liberation approach is believed to bring a lot of relief and assistance through assurance that it is not an individual failing, but also community as a meaningful grounds to learn acceptance in action.

*“Feeling that I’m exaggerating my emotions and it’s probably not that bad.”*

Public health and medical literature documents how stigma is framed as a legitimate “tool” to motivate weight loss, making shaming and discrimination appear normal and even responsible - all in the name of “caring” for somebody at the receiving end.<sup>21</sup> Such normalization and minimization of harm is one of the most common biases that very commonly appears as a

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<sup>21</sup> Hunger JM, Major B, Blodorn A, Miller CT. Weighed down by stigma: How weight-based social identity threat contributes to weight gain and poor health. Soc Personal Psychol Compass. 2015 Jun;9(6):255-268.

barrier in the answers, too. A group of women (n=16) describe that negative treatment is seen as insignificant, socially acceptable, or “normal,” leading to the already described self-blame, shame, and feelings of unworthiness. For example, they believe that in situations of harm they are overreacting, others have more serious problems, or that such comments are simply a normal part of everyday life that have to be dealt with.

The potential solutions for such internalization for coping yet again lies in the above described approach to **shift away blame from individuals and raise awareness about social justice issues around diversity of bodies**. On top of that, it is crucial to cultivate awareness that such experiences are not “deserved” and not “necessary to tolerate”, alongside overall empowerment that respondents already wishfully mentioned. Importantly, we have to emphasize yet again that all of the above are consequences of weight bias and size discrimination in society that people have internalized. It means, they have accepted the opinion and beliefs of the external world as legitimate and true, and constantly live adjusting their behavior and representations according to the existing expectations depending on the situation.

Many of these hint at post-traumatic adaptations and internal distancing from such situations, narratives and other potential risks in anticipation of further harm. The overarching conclusion here is that **anybody working with these topics in depth would benefit from trauma-informed awareness and knowledge**.

### *“I don’t know where to find adequate support”*

The last more significant group of answers (n=13) revolved around **not having enough knowledge** - either to answer the question, to define what type of support is necessary, or where and how to look for the necessary support. In context of this report it means a clear need to provide such information and strengthen skills in defining and finding the appropriate type of support within the existing, very limited, resources - crisis hotlines, therapists, youth organizations, human rights organizations and others.

Additionally a few responses described external factors as the ones delaying the seeking of support, such as societal bias, judgement by the family members, fear of unequal power relations and retaliation, as well as cultural normalization of such harm. Nonetheless, these were the overwhelming minority and most still skewed direction internalized barriers. Taking into consideration the low prevalence, these will not be discussed more broadly.

## 6.3. Identified needs for training

To be able to distinguish different learning approaches within later stages of our work, we asked if they were to receive training or a workshop, *what knowledge and skills would they find useful to better advocate for themselves or navigate the unfair treatment in your daily life*. Identifying the visible patterns in their responses, we noticed a strong incline towards various coping

mechanisms and strategies for situations where one's body or appearance is critiqued or policed.

## Necessary knowledge

The participants expressed a strong demand for knowledge and awareness that would help them recognize, name, and respond to unfair treatment related to body size and appearance. We call this group - **the knowledge for immediate response and aftercare**. This starts by raising awareness about the underlying issues like weight stigma and body shaming, and their causes (mentioned by n=2) to empower standing up. This further feeds into the knowledge that would help recognizing micro aggressions and other forms of abuse (n=4). To round this up, knowing thyself and the reactions in such situations should be recognized, too (n=3). To continue working on self-esteem, many would feel like they could benefit from knowledge about body diversity (n=5).

This is followed by means for empowerment towards external action - the young women would like to know scripts/scenarios for setting boundaries or defending oneself (n=12) to better be able to stand up for themselves or cope in other ways in face of body comments or other harms. To strengthen this conviction, they would want to have knowledge on where to find information about how to seek support effectively and report unwelcome situations in institutional settings (n=3).

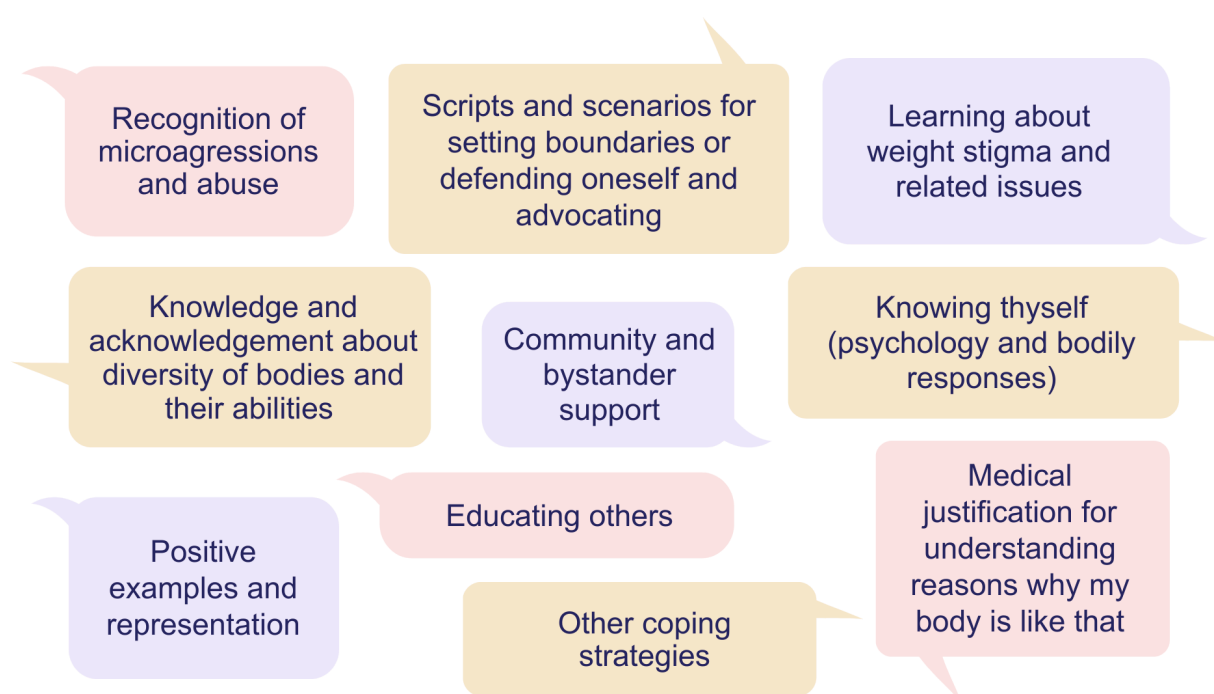


Figure 9: Necessary knowledge for better coping with size discrimination

While many (n=11) wanted to receive knowledge about physical and mental health reasoning for their bodies being a certain way and “which bodies are not healthy”, these have a tendency to lean in healthist bias and are outside of our professional bounds to further elaborate or include in any educational materials. And finally, a few (n=4) also mentioned the need for knowledge on how to raise awareness in others, how to support each other and to create a community, as well as “how to defend close people who experience negative attitudes”.

## Skills to be trained or acquired

This section showed much narrower fragmentation in different types of skills young women would like to acquire, compared to the topics of knowledge. A very clear forerunner, that is further grounded by n=10 responses of similar nature in the previous section, are **communication and interpersonal skills**. More than ¼ of all answers (n=38) mentioned how they would like to learn to be able to **communicate with assertiveness in situations when encountering comments about their bodies**. They wished not to feel emotional distress when standing up for themselves and overall, wanted to feel more comfortable when doing that. This showed both as something that they wished for themselves (“Argumentation skills and emotional regulation”), as well as for others (“How to de-escalate or intervene when someone is attacked because of their body”).

Other n=7 described a wish to train other **“techniques for boosting resilience in the face of criticism”** - “workshops on self-worth, self-discovery”, “mindfulness and emotional regulation skills”. Seeing this as a potential skill for building resilience, n=7 described the need to cultivate critical thinking and “self-worth independent of others’ perceptions”, as well as “skills to accept one’s body as it is now”, actively detaching one’s body from societal narratives and beliefs.

Interestingly, while in this question many described “giving an opinion or standing up for themselves” as one of the major needs for their empowerment, in the question about participation a major group (62.10%, n=105) reported that their concerns about body image did not delay their ability to do it. This gives an impression that some of the young women who took part in this survey might not be fully aware of the impact concerns about their appearance or body have on their participation in this world.

## Attitudes and beliefs

While this was not explicitly asked from respondents, in youth work we talk about lifelong learning and non-formal learning where an important part of the process is the change of attitudes and beliefs, sometimes even competences.

While many answers reflect interest in development of individual traits, like confidence (belief that one is worthy enough and the corresponding outward attitude), majority expressed wishes that relate to cultivation of broader social skills and attitudes among the surrounding people. Based on the answers of young women, we conclude that those working on mitigating body shaming and weight bias should be developing an overall inclusion and tolerance in the target audiences, specifically through more specific topics on body diversity, radical self acceptance,



body neutrality and liberation. Even more so - wherever possible they should be aiming to raise the confidence, resilience and bodily autonomy of young women.

Related work on assertiveness training, self-advocacy, and communication skills for responding to microaggressions and bias suggests that practicing concrete phrases and scenario-based responses can increase people's confidence and perceived ability to speak up in discriminatory situations. School- and community-based body image curricula for girls often include components on assertiveness, having "an independent voice," and speaking up about appearance-related pressure, alongside media literacy and body acceptance content.<sup>22</sup> This aligns with the answers of young women who participated in the survey, and therefore will be included in our work.

## 6.4. Desired social change

As emphasized many times, shifting blame from individual to societal or cultural systems is required to minimize the harms of body shaming and weight bias. Therefore, we found it important to ask *what changes would they like to see in their school, workplace, community, or society so that young women can feel more free and accepted in their bodies*. We also hoped to see these answers as something that could guide setting a broader vision for society where women's bodies are less scrutinized.

The themes we discovered were not surprising, as these directly responded to the challenges experienced by young women. Very eye opening and encouraging, we foresee the further described values and aspirations to guide our efforts both in the framework of this project, as well as future work for body liberation. For readers of this report and practitioners, these might also serve as meaningful directions for online campaigns, educational activities and conversation starters with the youth.

The most common desired change (n=30) asked to **end commenting on bodies or stop focusing on bodies** at all. Further complementing it, the next group of answers invited for a **change of culture** (cultivating overall acceptance and tolerance, normalizing diversity and other changes of social culture). Many described that **education and awareness**, as well as **representation and size diversity** are required as potential means for the desired change. An important conclusion for the gender equality topic of this report, was that many young women talked about the need for **female solidarity and safe spaces**, wishing that women themselves don't criticize other women thus cultivating communities for safe female co-existence. Lesser popular mentions included the wish for overall female empowerment, gender equality, recognition of responsibility among men and patriarchal structures. On a more tangible note, Health At Every Size was mentioned as well as accessibility and availability, including that of various support. And finally, some also mentioned body liberation as the vision for the necessary change in society.

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<sup>22</sup> Hinkle Smith, S. L. (n.d.). [Body image curriculum](#). EBSCO Research Starters: Education.

## 7. Conclusions

This report has yielded a rich amount of information and insights on many aspects regarding young women in situations of body shaming and size discrimination. We have chosen to highlight only those that will be most relevant for developing educational and support materials in our work.

**1) Young women suffer from body image pressures, and this should be treated as a systemic issue.** The core of this report confirms that body dissatisfaction and shaming, weight bias and size discrimination are prominent issues that require more attention. Combining our findings with the existing approaches and literature, we are inclined and motivated to recognize and treat this as a systemic gender equality, not individual shortcoming issue. Even more so, because from the answers of many young women we see it as something that is normalized, therefore the experienced harm is minimized or ignored in society and subsequently internalized by women. Therefore we are intentional in **framing body liberation as opposed to purely personal development**, see the **value in teaching about appearance-based injustice**, and **include aspects of community support throughout our work**.

**2) Body-based judgement is widespread, but women in larger bodies carry the greatest burden.** The findings show that most young women in the survey have experienced appearance-based judgement at least sometimes, regardless of body size. However, those who describe themselves as larger than average report these experiences more frequently and more intensely. They also report lower satisfaction with their appearance and lower confidence in responding to negative comments. This indicates that some bodies are more exposed to harm than others. For us as trainers and youth workers it means **acknowledging this disparity and being mindful of ways to lessen the gap within and through our activities**.

**3) The strongest impact is on mental health, with consequences that shape daily life.** Body image pressure has a clear and strong connection to mental health outcomes such as anxiety, low self-esteem, mood changes, and harmful eating behaviours. Physical health behaviours such as movement and eating are also affected, often in ways influenced by shame rather than wellbeing. Even when participants do not always describe dramatic outcomes, the findings suggest ongoing psychological strain. This pressure can shape how young women think about themselves and make everyday decisions. In our work it means **developing content that helps train emotional resilience skills, practicing self compassion and radical self acceptance as strategies to reduce shame, and cultivating spaces where young women can find relief from these daily pressures**.

**4) Participation is reduced in visible and relational settings.** Importantly for anybody working in the European youth work field, we can conclude that while many women don't report body image as being a barrier for participation, yet for many it drastically drops in high visibility

situations where bodies might be compared. It happens in activities like buying clothes, going to the beach or pool, and participating in sports or in romantic relationships. The effect is often described as small or moderate, but when experienced across different areas of life and continuously it can reduce joy, connection, and overall confidence. This shows another justification for both **raising broader awareness, as well as building spaces where all bodies are accepted, thus building resilience in navigating these negations in other environments.**

**5) Young women want practical tools to respond, set boundaries, and manage emotions.**

Many participants expressed a need for concrete and practical skills. They want to know how to recognize micro-aggressions, how to respond calmly and assertively to body-related comments, how to set boundaries with family and peers, and how to regulate emotions in stressful moments. Several asked for specific phrases or response scripts that could help them in real life. They also expressed interest in coping strategies such as mindfulness, self-compassion, and resilience-building practices. This clearly indicates that **training should include scenario-based learning, role-play, and practical exercises that increase confidence in tackling stressful situations in real life through trying them out in a safe environment.**

**6) Social support and belonging are crucial, but trust in support systems is limited.** Young women emphasised the importance of solidarity and validation. They want others to speak up when body shaming occurs and express a desire for safe community spaces. At the same time, most respondents rely primarily on friends for support. Very few would turn to youth workers, educators, healthcare professionals, or activist groups, and a significant number would not seek support at all. This suggests a gap in trust and awareness of available support structures. Our difficult task is to **increase capacity of both the support systems, as well as the ability of young women to identify and seek the necessary support.**

**7) Internalised shame and normalisation of harm are major barriers to seeking help.** A widespread lack of awareness about weight bias affects how young women treat these issues. Many respondents also described barriers such as shame, self-blame, minimising their experiences, and believing that body-related comments are “normal” or not serious enough to address. These attitudes reflect internalised weight stigma and broader cultural acceptance of body policing. We don’t see this as something to address specifically, but rather a crucial setting to keep in mind at every step we make. Because many responses resemble trauma-related coping patterns such as avoidance and self-isolation, **all educational approaches should be trauma-informed, consent-based, and attentive to emotional safety.**

**8) Culture of commenting on other bodies has to change.** Lastly, but not less importantly, we observed a broad wish for appearance-based judgement to cease in general. Young women don’t only want to cope, but rather want the culture to stop commenting on their bodies. We see this as a bright representation of how objectification and body policing plays out in female lives. This is one of the overarching goals for our body liberation efforts - to **change the culture that deems some bodies “right” or better, and some “to be changed” or worse, and look for systemic change for those who are impacted by it most.**

## 8. Recommendations

In the project “Body Liberation for Gender Equality” we explored how young women in Latvia, Czechia and Cyprus experience situations related to body image and size discrimination. What we observed is an **overwhelming lack of awareness, skills and tools to be able to recognize the wrongdoings in such situations**, as well as standing up to set boundaries in most varied places.

While this project aims at addressing some of the issues, the scope of those is beyond our reach. More so, even if women are those who are affected most, every member of society is influenced by the existing harmful cultural values and habits around different bodies. To consolidate resources and increase impact, **we call for the support and effort of varied stakeholders at improving the lives of young women across Europe**, thus contributing to necessary improvements towards gender equality. **Here is what you can do.**

### For everybody

- **Become aware** of your own stereotypes based on weight, height and body size. Challenge them! Learn about weight stigma or size discrimination and how it manifests itself in our society.
- **Don't body shame and use language that is inclusive** towards all bodies. Familiarize yourself with the concept of body neutrality!
- When possible and comfortable, **stand up against appearance-related injustice** towards others, it goes a long way knowing that one is not alone in these challenges.
- **Listen to lived experiences of people in different bodies**, and encourage respectful discussion on this topic to normalize talking about it.

### For policy makers

- **Include weight, height and body size as protected characteristics** in anti-discrimination legislation to spark a top-down change in understanding about these issues.

- **Ensure systemic support for (young) people** who deal with body shaming and weight stigma harms, educating specialists in healthcare, education and public service about trauma informed, weight-neutral and diet-free language. Provide training on these specific topics to specialists in the mental health sector and crisis hotlines.
- **Ensure accessibility of public spaces** for diverse bodies - make sure there is awareness among public service providers about the need to provide accessible seating and mobility in public places (including elevators and other aids where necessary).
- **Encourage public media and institutions** to use body-neutral language and inclusive imagery that reveals diverse bodies across communications. **Place safeguarding mechanisms for limiting and controlling communications** that promote ill-informed, harmful and stigmatizing content related to bodies and body image, especially those that are shared and available to young audiences.

## For educators and youth workers

- **Learn about weight stigma and impact of body image issues** on your own perceptions and work, as well as the roles it plays in the lives of young people. Familiarize yourself with the ways body image concerns affect participation and livelihood of young people (especially women).
- **Cultivate spaces where conversations are body-neutral, kind and mindful.**
- **Include topics about body image, weight stigma and size discrimination** in the work you already do alongside other forms of systemic injustice and discrimination.
- Make sure to include and **take into consideration perspectives of those affected the most** - young women in bigger bodies or with other visible differences, and from marginalized backgrounds.

*Find more suggestions for youth workers in the open letter with [recommendations to European youth work](#) from 2024.*

## For family members and close friends

- **Learn about the impact of body image issues and weight stigma**, especially by listening to your dear ones who experience these challenges. Take their word for it and pay attention if they mention anything, because it takes tremendous courage to speak up and formulate negative experiences around body shaming.
- **Raise your own awareness** of prejudice, bias, or generational views that may impact your expressed behaviours.
- When **using language inclusive to all bodies**, not only avoid commenting on the bodies of others in a way that values one or other way of being above others. **Remember also that comments about your own body have an effect on others!**

- Find best ways to **encourage family members and friends to participate in activities, enabling them to develop new competencies** - this will empower them and build resilience to stand up and advocate for themselves in situations where their bodies are subjected to unfair treatment.
- If you see that somebody close to you is struggling, **encourage them to seek help and offer support when looking for specialists.**

## Recommendations for young women

- While the world might not always be built this way, remember that **you are allowed and even entitled to enjoying life in any type of body you have been given.** If your current world does not seem to accommodate such acceptance, seek out body positive, fat accepting and overall inclusive spaces in person or online where all bodies are welcome. You might find that with non-profits, activists or in youth work spaces.
- Accepting your body is an individual journey and there is no timeline or recipe that works for everybody in unlearning the harmful beliefs told by the systems that benefit from your dissatisfaction with yourself. If you are in the beginning of your path, **learning about weight stigma and diet culture as well as following diverse bodies of all sizes on social media can be an empowering starting point.**
- If at any point you feel like concerns about body image or body shaming is affecting your livelihood, **reach out for support** - a family member, a youth worker or mental health expert that will help you deal with the heaviness of the burden.
- **Familiarize yourself with notions of hate speech and hate crime** to strengthen your awareness about situations when body shaming is just a comment and when it is more than that.
- If you are experiencing bullying, hate speech, or even physical violence related to your body, its shape, size or any other visual characteristics, make sure to note down all the details of the situation and perpetrator. **Turning for help with institutions might be useful in more serious instances.** For example:
  - turn to human rights organizations for legal advice if you experience hate speech or hate crime
  - report such crimes to the police if you experience physical altercations, if legislation regulates this in your country then it might relate to hate speech too.
  - report and block hateful online comments to the platforms. It might not always work, but you might also turn for assistance with nonprofits that work around topics of online harassment and hate speech.



## 9. Annexes

### Survey questionnaire

#### Section 1: Background

**Q1. Which would fit best with how you identify yourself?**

- ☐ Female / ☐ Male / ☐ Non-binary ☐ Do not wish to disclose

**Q2. What is your age?**

- ☐ Under 18 / ☐ 18–35 / ☐ 36–50 / ☐ 51 or older

**Q3. Have you ever felt treated unfairly, left out, shamed or judged because of your weight, size, or shape?**

- ☐ Never / ☐ Rarely / ☐ Sometimes / ☐ Often / ☐ Very often

**Q4. People's bodies come in many shapes and sizes. If you feel comfortable, how would you describe your body size?**

- ☐ Smaller than average / ☐ Average size / ☐ Larger than average / ☐ Prefer not to say

**Q5. Which of these have you experienced? (Select all that apply)**

- ☐ Hurtful comments (e.g. "you should lose weight")  
☐ Being treated with less respect than others  
☐ Not taken seriously by professionals (teachers, doctors, employers)  
☐ Teasing or jokes about weight/size/shape of my body  
☐ Being excluded or left out because of body size  
☐ Other

**Q6. Where have you experienced negative comments or unfair treatment about your body? (Select all that apply)**

- ☐ Family/home  
☐ Healthcare (doctors, nurses, etc.)  
☐ School/university  
☐ Online/social media  
☐ I do it to myself (body shaming, diet culture language, hiding body)  
☐ Public places (transport, shops, streets)  
☐ Workplace  
☐ Other

#### Section 2: Experiences and perceptions

**Q7. How satisfied have you been with your overall appearance in the past 12 months?**

- ☐ Very satisfied / ☐ Mostly satisfied / ☐ Neutral / ☐ Mostly dissatisfied / ☐ Very dissatisfied

**Q8. Do you feel that your experiences of appearance-based judgment are influenced by other aspects of your identity (e.g. ethnicity, sexuality, disability, age)?**

☐ Not at all / ☐ A little / ☐ Somewhat / ☐ Quite a lot / ☐ Very much

### **Section 3: Coping & Support**

**Q9. On a scale from 1-5, how confident do you feel in handling situations when someone makes negative or body shaming comments about your body?**

**Q10. If you experience body shaming or unfair treatment, where would you most likely turn for support? (Select all that apply)**

- ☐ Family
- ☐ Friends/peers
- ☐ Online communities
- ☐ Community or activist groups
- ☐ Healthcare professionals
- ☐ Youth workers / educators
- ☐ Nowhere / I wouldn't seek support
- ☐ Other

**Q11. What would help you most to feel stronger and more supported when dealing with body image pressures or weight-related comments?**

**Q12. What makes it harder for you to seek support in situations when you experience negative treatment related to your body?**

**Q13. If you were to receive training or a workshop, what knowledge and skills would you find useful to better advocate for yourself or navigate the unfair treatment in your daily life?**

**Q14. What changes would you like to see in your school, workplace, community, or society so that young women can feel more free and accepted in their bodies ?**

### **Section 4: Demographic profile**

**Q15. Country of residence**

(Open response or dropdown list)

**Q16. Do you reside in a:**

☐ Capital city / ☐ City / ☐ Town/village / ☐ Rural area

**Q17. What is your highest obtained level of education?**

☐ Primary / ☐ Secondary (e.g. high school) / ☐ Higher education (college, university, etc.)

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