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Gratitude Therapy to Improve Self-Esteem of Adolescents with Body Dysmorphic Disorder Tendencies

Cahyaning Suryaningrum^{1*}, Syaripah Aini²,
Ni'matuzahroh³, & Taufik⁴

Universitas Muhammadiyah Malang¹²³

Universitas Muhammadiyah Surakarta⁴

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Abstract. *Some adolescents experience dissatisfaction when their bodies undergo unwanted changes. They will develop an exaggerated negative self-image that leads to body dysmorphic disorder (BDD). The negative image that adolescents with BDD tendencies have of themselves is not only limited to their appearance but has extended to their whole self. Some adolescents with BDD tend to experience self-esteem problems. This study aims to determine the effect of gratitude therapy on self-esteem in adolescents with BDD tendencies. The subjects in this study amounted to 8 people selected by purposive sampling technique. Subjects in this study are adolescents aged 15-18 years and have dissatisfaction with certain body parts. This type of research is a two group randomized pretest-posttest control group design with instruments in the form of a body dysmorphic disorder tendency scale and Rosenberg self-esteem scale. The data in this study were analyzed using the Wilcoxon test and the Mann Whitney test. The results showed that gratitude therapy can increase self-esteem in adolescents with BDD tendencies. This can be seen from the results of the Mann Whitney test which shows a value of $Z = -2.021$ ($p = 0.043 < 0.05$). Therefore, it can be concluded that gratitude therapy can increase self-esteem in adolescents with BDD tendencies.*

Keywords: *Adolescence; body dysmorphic disorder tendency; gratitude therapy; self-esteem.*

INTRODUCTION

Adolescence is a phase of life that must be exceeded to form a personality. Adolescence is an important and complex phase of life because there is a transition from childhood to adulthood. Adolescence is a time full of storms and stress because at this time, teenagers do not have stable emotions. Adolescents also experience new and more complex developmental experiences and tasks than in childhood. The most apparent changes in adolescents are physical changes. Adolescents experience puberty, which affects the development of the body and hormones. The changes in their bodies make teenagers care about body image (Abdillah et al., 2023; Reel et al., 2015).

Adolescence is also synonymous with the period of searching for identity, where they are trying to find and define themselves. Parents should give teenagers the freedom to take every opportunity and try various kinds of self-identity to find their own identity. Adolescents need to show their existence and recognition from their environment

*Corresponding author: cahyaning@umm.ac.id

(Fachrandini & Febriani, 2023; Syahrul et al., 2024; Widiastuti, 2016). In adolescence, appearance is vital because appearance affects one's identity and becomes a benchmark for acceptance or rejection in the social environment. Social comparison is one of the ways adolescents search for their identity (Felita et al., 2016).

Social media is one of the media that can make teenagers make social comparisons. Teens use social media to see specific beauty standards, lifestyles, or achievements (Nugraeni, 2024). Advertisements displayed on social media have also formed the concept of ideal beauty among women. This condition makes individuals feel that using beauty products is a way to make themselves beautiful according to existing standards (Hasrin & Sidik, 2023). The desire to be better than existing beauty standards is a form of social comparison. Individuals who receive support through social media, with positive feedback from others, can improve a positive body image (Aristantya & Helmi, 2019). This issue is also supported by research by Andarwati (2016), who explains that the intensity of social media use positively affects self-image. The existence of positive comments from others influences individuals to use their social media more often. Teens who make social comparisons with others who are better than themselves can feel dissatisfied with their appearance (Rahmadiyah & Munthe, 2020).

The prevalence of individuals who experience dissatisfaction with body and appearance deficiencies based on the general population is 0.7%-2.4%. This condition is more common in adolescence at around 16-17 years old. This disorder is also more commonly experienced by women (2.5%) than men (2.2%), with the onset first occurring at the age of 13. Longitudinal studies show that BDD appears more often at the ages of 15 (49%), 18 years (39%), and 20–28 years (37%). (Enander et al., 2018) These data show that many adolescents judge their bodies negatively, which leads to body dysmorphic disorder.

Individuals who experience puberty, which makes their body change, also often experience dissatisfaction because the changes are not as desired (Shabira & Uyun, 2023). Teenagers feel lacking and not beautiful, following existing beauty standards, so they feel dissatisfied. The incongruity of the changes makes individuals develop negative judgments of themselves. In addition, the intensity of social media use can impact dissatisfaction with an individual's body image (Lukman et al., 2023). Individuals who view their physical negatives show a mismatch with one of the milestones in adolescence. The ability of adolescents to accept their physical state is a developmental challenge that must be overcome (Bonie & Backers, 2019). When they feel that they are not following existing standards and cannot fulfill these developmental tasks, adolescents will experience excessive self-image distortion that gives rise to a tendency for body dysmorphic disorder.

Individuals who experience BDD often experience stress and suicidal thoughts (Singh & Veale, 2019). People with BDD will continuously pay attention and check whether their appearance is up to what is expected. He will often look in the mirror to ensure his appearance does not look bad when viewed by others. Other studies have also found that individuals who experience BDD are accompanied by eating disorders, substance use disorders, borderline personality disorders, anxiety disorders, and have a history of suicide attempts (Eskander et al., 2020).

The development of BDD is influenced by many factors that contribute to each other biologically, psychologically, and socially (Ramdani, 2021; Zinovyeva et al., 2016). Neurotransmitter (Ramdani, 2021), parental criticism of their child's appearance, and the existence of beauty standards contribute to BDD (Zinovyeva et al., 2016). In addition, perfectionist personalities (Dewi et al., 2023; Jannah & Murdiana, 2023) and bad childhood experiences, such as body shaming, can also be the cause of BDD, where individuals feel dissatisfied and view themselves negatively (Hidayat et al., 2019).

In adolescents with BDD tendencies, appearance is often used as an ideal value to conduct self-evaluation. This issue is because physical appearance is essential for teenagers. A perfect appearance makes teenagers feel accepted and liked by society (Chua & Chang, 2016). The negative image adolescents give of themselves is not limited to appearance but has extended to them (Kuck et al., 2021). It shows that physical appearance can cause teenagers to develop low self-esteem. Teenagers are dissatisfied with their physical appearance, so they feel they don't have anything to be proud of and believe they don't have the ability (Grogan, 2021).

In their research, Rahmadiyah & Munthe (2020) show that feelings of dissatisfaction with oneself are related to social comparisons made by adolescents. The social comparison carried out makes adolescents see their shortcomings more and more, and they continue to make improvements to these shortcomings. Correction to these shortcomings shows that the subject is dissatisfied and does not accept himself. In addition, the low acceptance of adolescents for their body image also causes them to have low self-esteem (Agustiningsih et al., 2020).

Images of oneself and one's peers' physical appearances related to the shape, size, function, and health of their bodies are essential for adolescents (Agustiningsih et al., 2020). The inability to accept the negative self-image given will have an impact on adolescents, showing low self-esteem. Adolescents feel dissatisfied and unable to accept themselves by constantly correcting their shortcomings, having negative thoughts, feeling that they have nothing to be proud of, and feeling worthless (de Leon, 2017).

Body dysmorphic disorder (BDD) is a disorder in which a mental condition focuses on a deficiency or imperfection of appearance and causes difficulties in the proper functioning of other social and physical aspects of life (Singh & Veale, 2019). The condition of BDD can be characterized by the presence of preoccupation with some perceived deficiency in physical appearance that cannot be observed or seems ordinary to others; engaging in repetitive behavior or mental actions as a form of concern for their appearance; and causing significant dysfunction in social, occupational, or other vital areas (American Psychiatric Association, 2022).

In adolescents with BDD tendencies, appearance is an important thing to be accepted in the social environment. Adolescents feel that their physical appearance is lacking, are worried and anxious about their appearance, and make improvements to these shortcomings. This situation shows that adolescents with BDD tendencies are not yet able to be grateful for what happened to them. Research conducted by Lin (2015) & Portocarrero et al. (2020) shows that gratitude can improve self-esteem in adolescents and college students. Alkoze et al. (2018) explained that women who have gratitude have high self-esteem. Gratitude can be an emotion related to self-acceptance in the environment (Voci et al., 2019).

Gratitude therapy comes from positive psychology that emphasizes strengthening individual aspects, not just overcoming distractions. Seligman et al. (2005) state that positive emotions such as gratitude, hope, and optimism can improve psychological well-being. Gratitude exercises help reduce negative thoughts, reduce symptoms of depression, and improve self-esteem and well-being. Gratitude therapy improves self-esteem by encouraging self-acceptance and positive emotion (Alkozei et al., 2018). Compared to other therapies, this approach is more appropriate for mild cases such as low self-esteem and body image, as it focuses on strengthening positive emotions, rather than simply reducing negative thoughts.

Conceptually, gratitude contributes to self-esteem through several mechanisms: (1) encourages self-acceptance (Voci et al., 2019), (2) forms a positive life narrative, (3) reduces unfavorable social comparisons, and (4) strengthens interpersonal relationships that support self-esteem. The umbrella theory underlying the relationship between gratitude and self-esteem

includes: a) Broaden-and-Build Theory (Fredrickson, 2001), which explains that positive emotions such as gratitude broaden mindsets and build psychological resources, including self-esteem; (b) Self-Determination Theory (Ryan & Deci, 2000), in which gratitude supports fulfilling basic needs such as autonomy, competence, and social connectedness, strengthening self-esteem.

Homan & Tylka (2018) explain that gratitude gives individuals prosocial traits to make their lives meaningful and have positive self-esteem. Putra (2018) explains that gratitude can change the influence of unfavorable social comparisons to impact self-esteem positively. In addition, the existence of high gratitude can also make individuals accept, love, and respect their bodies. Individuals do not depend on the opinions of others but on themselves (Shabira & Uyun, 2023). Gratitude is the appreciation for something good that happened in life (Alkozei et al., 2019; Cheng et al., 2015; Jans-Beken et al., 2020). Gratitude can be in the form of admiration and appreciation for life, both personally and impersonally. Gratitude serves as a strength of character and positive emotion. Gratitude as a strength of character is the basis for individuals to behave (trait). In contrast, gratitude as a positive emotion describes gratitude for the kindness received (Afandi et al., 2021). Gratitude can make individuals wiser in responding to the environment and better able to maximize positive emotions (Bono & Sender, 2018).

Gratitude can be practiced. Gratitude therapy is a therapy that focuses on positive things and reinterprets these positive things so that they can give rise to positive emotions and behaviors (Rashid & Seligman, 2018). There are three techniques for doing gratitude therapy: three good things in life, using signature strengths in a new way, and a gratitude visit. Gratitude can be done by counting blessings, the gratitude visit, and learning schematic help appraisals (Blevins et al., 2016; Killen & Macaskill, 2015; Ma et al., 2017). In addition, gratitude techniques can be used, namely identifying negative thoughts, developing thoughts that support gratitude, changing thoughts into positives, and applying gratitude that has been possessed in daily life (Cregg & Cheavens, 2021).

Dunaev et al. (2018) show that body-focused gratitude writing makes individuals reduce negative weight prejudices and develop a positive body image. Adolescents at the high school level who are given gratitude and mindfulness training can also positively affect self-esteem (Shahid & Shoaib, 2023). In addition, a gratitude journal, a gratitude letter, and savoring can also increase the self-esteem of individuals dissatisfied with their bodies. Individuals become more grateful for everything they have, feel more confident in their body, and realize their abilities (Ridwan et al., 2021). Purba et al. (2020) also explain that explaining gratitude stories, making items to give to grateful people, and gratitude journals can increase self-esteem and life satisfaction.

Gratitude therapy, focusing on increasing gratitude, motivates individuals to have good thoughts and behaviors toward themselves (Adriani et al., 2021). Individuals who have gratitude for their condition will evaluate by focusing on positive things, reframing and accepting what is lacking and in excess (Ridwan et al., 2021). A positive outlook and acceptance of advantages and disadvantages make individuals satisfied and feel that there is something to be proud of (Putra, 2018). Individuals with gratitude and self-esteem can also regulate their emotions so that they are not sensitive to evaluations from others (Mao et al., 2020).

Based on the description above, this study hypothesizes that gratitude therapy can increase self-esteem in adolescents with BDD tendencies. This study has the objective of finding out the effect of gratitude therapy on self-esteem in adolescents with BDD tendencies. The benefit of this study is that it provides a reference for related professionals to use gratitude therapy in increasing self-esteem in adolescents with BDD tendencies.

METHOD

This study used a two-group randomized pretest-posttest control group design. This research is a scientific study with one experimental and one control group. The experimental group was given a pre-test before the treatment, and then a post-test to find out if there were any changes after the treatment. Meanwhile, the control group was given a pre-test and post-test without treatment (Patten, 2014).

Table 1.
Description of Research Subject

Category	Number of Participants	Group Experiment	Group Control
Gender			
Woman	8	4	4
Age			
16 years old	3	2	1
17 years old	4	2	2
18 years old	1	-	1
Class			
XI	7	4	3
XII	1	-	1
Categories of Body Dysmorphic			
Low	-	-	-
Keep	3	2	1
Tall	5	2	3
Self-Esteem Category			
Low	4	2	2
Keep	4	2	2
Tall	-	-	-

The subjects in this study amounted to 8 adolescents who met the criteria of moderate-high BDD tendencies based on the body dysmorphic disorder scale and low-moderate self-esteem based on the Rosenberg Self-Esteem Scale and interviews. The subjects in this study were randomized into two groups, namely 4 subjects for the experimental group and 4 subjects for the control group shown in Table 1. The samples in this study were taken using purposive sampling, a sampling technique according to predetermined criteria (Patten, 2014).

The criteria for subjects in this study were 1) adolescents 15-18 years old, 2) having dissatisfaction with certain body parts, 3) having a moderate-high BDD tendency based on the results of the scale, and 4) showing low-moderate self-esteem criteria based on the results of the Rosenberg Self-Esteem Scale and interviews. The instruments used in this study are 1) The scale of the tendency of body dysmorphic disorder from Fatin (2023), with a reliability value of 0.905. Two aspects measured on this scale are concern and distress. The body dysmorphic disorder tendency scale has 16 items, consisting of 8 favorable and 8 unfavorable. 2) Rosenberg Self-esteem Scale, adapted into Indonesian by Alwi & Razak (2022) with a reliability value of 0.89. This scale is used in the same form in both the pre-test and post-test to measure changes in self-esteem directly.

This scale measures two dimensions, namely competence or self-competence and worth or self-liking. The Rosenberg Self-Esteem Scale has 8 items, with 4 favorable and 4 unfavorable items.

The data were analyzed using two non-parametric statistical tests, the Wilcoxon Signed-Rank and Mann-Whitney U tests. The Wilcoxon test was used to compare the mean values between two measurements, namely pre-test and post-test, in the same group to determine the presence of significant changes before and after the intervention (Patten, 2014). This analysis was carried out on the scores obtained from the Rosenberg Self-Esteem Scale with the help of SPSS software version 25. Meanwhile, the Mann-Whitney test was used to test the difference in post-test scores between the experimental group and the control group on each variable, to evaluate the effectiveness of the intervention comparatively between groups (Susdarwono, 2021).

This research began with the researcher compiling and conducting a trial of the gratitude therapy module to determine the effectiveness of the therapy procedure to be carried out as the initial procedure of the research. After that, the researcher screened adolescents who had the category of medium and high body dysmorphic disorder and the category of low and moderate self-esteem. The researcher will contact subjects who meet the criteria for an interview. The researcher then gave informed consent as a consent sheet to follow the study series and divided the subjects into experimental and control groups. Subjects in the experimental group will be given treatment in the form of gratitude therapy following the modules that have been prepared and tested. Subjects in the control group did not receive any treatment during the study. After the gratitude therapy was completed, both experimental and control groups were given the Rosenberg Self-esteem Scale as a form of post-test to see changes in self-esteem in the subjects.

The time gap between the pre-test and post-test was long, 4 weeks for both groups, so the subjects did not easily remember the specific items of the given scale. During the post-test scale, the subjects were not informed that they would be working on the same scale as the pre-test, reducing the likelihood of a response being directed to improve the answer. Interviews were also conducted after the post-test scale was given to support the validity of the change in self-esteem scores experienced by the subjects, which was correct due to subjective experience and not because it could be measured.

The researcher believes that the change in self-esteem in the subjects is related to the gratitude therapy intervention because the intervention design refers to the theoretical and empirical protocols of (Rashid & Seligman, 2018), and is applied in a structured and consistent manner. This study used several forms of control to minimize the influence of external factors. First, consistency of procedures where all subjects receive the same intervention, both in terms of materials, stages, and facilitators, to reduce variability due to different treatments. Second, a standardized implementation time. Although there was a slight time adjustment (30–60 minutes), all sessions took place within a duration range designed to maintain the effectiveness of the therapy as per the guidelines used. Third is statistical control, where researchers use non-parametric statistical tests (Wilcoxon and Mann-Whitney tests) to measure changes in self-esteem scores in the pre-test and post-test and compare between groups. This analysis allowed researchers to assess the effectiveness of interventions by considering variability between individuals. Fourth, the research design involves a control or comparator group (for example, a group without or with a different intervention), which is also a form of control over external variables. With this approach, the researcher sought to isolate the effects of gratitude therapy interventions as the main factors contributing to changes in self-esteem. However, they could not eliminate all external influences. Fifth, the researcher actively monitored the subjects'

involvement in therapeutic tasks such as writing three good things and gratitude visits Sixth, the researcher also actively communicates with school counselor teachers and subjects to prevent double intervention from others and the exchange of information obtained between subjects during therapy.

Table 2.
Gratitude Therapy Procedure

Phase	Activity Description
Problem explanation, intervention, and commitment	Subjects are given explanations related to the conditions or problems they experience, the process, and the benefits of the intervention. Subjects were then asked about their willingness to be involved in the study from start to finish and signed informed consent as a form of commitment and desire to participate in the intervention.
Orientation (explanation of the importance of gratitude)	Subjects were given an explanation related to the meaning of gratitude, its application in therapy, and its positive impact on their physical condition or appearance. Subjects are also taught ways to increase gratitude and are invited to be grateful for what they have.
You are at your best	It begins with a brief relaxation, aiming for the subject to relax when writing down their situation. After that, the subject was asked to write down the appearance they thought was in their best condition. Subjects were then asked to reflect on their positive actions in difficult situations or when dealing with negative thoughts and feelings about their appearance.
Three good things	Subjects at this stage are asked to write down three things related to their physical condition or appearance each day. The subject writes down the three good things in the worksheet that has been given. In addition, the subject is also asked to write down the reason for choosing the good thing, the lessons learned from writing it, and the contribution that he or others have made to the good thing. The subject is invited to reflect on realizing that there is something to be proud of in himself.
Gratitude letter	It starts with relaxation. After that, the subject is asked to imagine someone who has a significant influence in life, whether someone who is always there for him or accepts whatever his condition. The subject was then asked to write a thank-you. The letter can explain why the subject is grateful to the person, what the person did, and how their actions may affect their life. The subject is also asked to determine the time for delivering or giving the letter. This stage ends with an evaluation related to the subject's feelings and reflection related to him who still has someone who cares and accepts him, regardless of his physical condition or appearance.
Evaluation and termination	Subjects are invited to conduct an overall evaluation of the intervention process that has been carried out. Subjects were asked about their feelings and changes after participating in the intervention. If the subject has shown a change, the intervention process ends by asking the subject to make positive affirmations to themselves and motivate them to continue to apply the tasks that have been done in their daily lives. In addition, subjects were also asked to fill out the Rosenberg Self-esteem Scale.
Follow-up	This stage is carried out a few weeks after the intervention is completed. This stage aims to determine the effectiveness of the intervention that has been given after the intervention has been given to the subject.

The interventions provided lasted 30-60 minutes per session according to the predetermined

modules. The duration of each session will be adjusted together with the subjects. The gratitude therapy that will be carried out in this study has been adjusted to the design of Rashid & Seligman (2018). The procedure in treatment known in table 2 begins with 1) explanation of the problem, intervention, and commitment, 2) orientation (explanation of the importance of gratitude), 3) you at your best, 4) three good things, 5) gratitude letter, 6) evaluation and termination, 7) follow-up.

RESULTS AND DISCUSSION

The initial analysis was the Wilcoxon test to see the difference in self-esteem scores before (pre-test) and after (post-test) therapy, which was given to each group, both the experimental group and the control group.

Table 3.
Wilcoxon Test Results

Group	Variable	Pre Test		Post Test		Z	p
		M	SD	M	SD		
Experiment	Self-esteem	7.50	1.915	13.50	2.082	-1.841	0.066
Control	Self-esteem	9.25	3.304	9.75	1.708	-0.552	0.581

Based on the results of the Wilcoxon test in Table 3, the Z value in the experimental group was -1.841 with a p value of 0.066 ($p > 0.05$). Although the Z value was not significant, there was an increase in the average pre-test and post-test scores. This result means there is an increase in self-esteem in the subject, which was initially an average of 7.50 to 13.50. The control group had no significant change with a Z-value of -0.552 with a p-value of 0.581 ($p > 0.05$). The average pre-test and post-test scores tended to be fixed in the control group. This result means there was no change in self-esteem before or after the therapy was given to the subject.

In addition to using the Wilcoxon test, the Mann-Whitney test was also used to see the difference in post-test scores between the two groups.

Table 4.
Mann-Whitney Test Results

Group	Variable	Mean of Ranks	Z	p
Experiment	Self-esteem	6.25	-2.021	0.043
Control	Self-esteem	2.75		

The results of the Mann-Whitney test showed a significant difference in post-test scores between the experimental group and the control group. It can be seen in Table 4, which shows that the results of the Mann-Whitney test have a Z-value of -2.021 with a p-value of < 0.05 , which is 0.043. Based on these results, it can be concluded that the hypothesis in this study is accepted, namely that gratitude therapy can increase self-esteem in adolescents with BDD tendencies.

The following are the changes in the pre-test and post-test RSES scores of each subject in the experimental group. In Figure 1. It can be seen that the therapy that has been given can increase self-esteem in all subjects in the experimental group, as seen from the increase in pre-test and post-

test scores. Before treatment, two subjects in the experimental group had low self-esteem, and the other two subjects were in the medium category. After gratitude therapy was given, two subjects experienced increased self-esteem in the moderate category, and the other two subjects remained in the mild category.

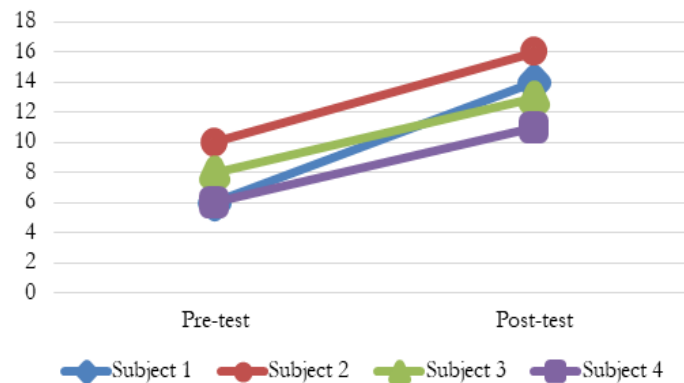


Figure 1.
Graph of RSES Score Change in Experimental Group Description:
low (0-7), medium (8-16), high (17-24)

In Figure 2, it can be seen that the subjects in the control group did not show a significant increase in self-esteem. Two subjects experienced decreased self-esteem despite being at the same (moderate) category level. In the pre-test results, it was found that two subjects showed low self-esteem, and the other two were in the medium category. After four weeks of not being given therapy, two subjects increased their self-esteem from low to moderate, and the other two subjects experienced a decrease in self-esteem

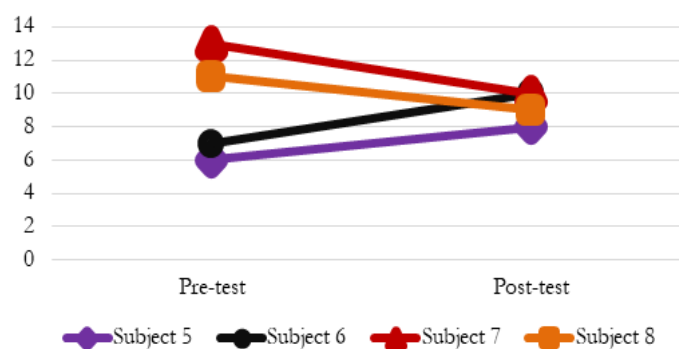


Figure 2.
Graph of RSES Score Change in the Control Group Description:
low (0-7), medium (8-16), high (17-24)

Table 5 shows that although the Z-value was not significant, there was a change in pre-test and post-test scores in the experimental group for aspects of self-competence and self-liking. Meanwhile, in the control group, there were no significant changes in the elements of self-competence and self-liking in the pre-test and post-test.

Table 5.

Results of Wilcoxon Test Analysis of Self-Competence & Self-Liking

Group	Variable	Pre Test		Post Test		Z	p
		M	SD	M	SD		
Experiment	Self Competence	4.00	2.309	7.50	0.577	-1.826	0.068
Control	Self Competence	5.25	0.957	5.75	0.500	-1.414	0.157
Experiment	Self Liking	3.50	1.000	6.00	1.633	-1.633	0.102
Control	Self Liking	4.00	2.449	3.50	0.577	-0.552	0.581

Table 6.

Results of the Mann-Whitney Test Analysis of Self-Competence and Self-Liking Aspects

Group	Variable	Mean of Ranks	Z	p
Experiment	Self Competence	6.50	-2.397	0.017
Control	Self Competence	2.50	-	
Experiment	Self Liking	6.25	-2.097	0.036
Control	Self Liking	2.75	-	

Although the results of the Wilcoxon test for the self-competence and self-liking aspects did not show significant changes in the pre-test and post-test in both groups, the results of the Mann-Whitney test in both aspects (Table 6) showed an important difference between the experimental group and the control group. This matter can be seen from both aspects, having a p-value of < 0.05, which means there is a change in self-competence and self-liking in the experimental group compared to the control group.

The study's results showed that gratitude-based interventions can increase self-esteem in adolescents with a tendency to Body Dysmorphic Disorder (BDD). Conceptually, gratitude therapy, such as gratitude writing, gratitude letter, and savoring techniques, helps individuals shift the focus from dissatisfaction with the body toward appreciation for the positives in themselves and their lives. This approach reduces internalized negative biases, improves body image, and improves feelings of worthiness. Dunaev et al. (2018) and Ridwan et al. (2021) show that gratitude effectively builds a positive meaning about oneself and reinforces healthy self-evaluation, which ultimately contributes to increased self-esteem.

The study results also show that gratitude therapy can improve self-esteem, namely self-competence and self-liking, in adolescents with BDD tendencies. Gratitude therapy can make the subject realize they have specific abilities they can be proud of and feel valuable about. Gratitude therapy can cause individuals to regulate emotions and produce positive feelings of satisfaction, happiness, and pride in themselves through writing down positive things (Boggio et al., 2020).

Individuals are invited to focus on the positive experiences they have had so that they can realize something that they can be proud of (Boggio et al., 2020). Positive emotions allow individuals to see positive things about themselves by discovering their abilities and increasing their self-worth. Armenta et al.'s (2017) research explains that positive emotions motivate individuals to carry out positive behaviors such as improving themselves and using their abilities. These positive emotions can make individuals feel more valued and satisfied with themselves (Nelson et al., 2016).

In its implementation, gratitude therapy can increase self-esteem by making individuals know the best condition of themselves, knowing the positive actions taken when they have negative

thoughts and feelings, seeing positive things that can be thankful for and knowing that there is someone who always considers themselves valuable and accepts them as they are (Rashid & Seligman, 2018). Gratitude provides positive things by describing themselves positively, feeling more satisfied, appreciating what they have, and being wiser and more positive in living their lives (Homan & Tylka, 2018).

The subjects in this study realized that dissatisfaction with their physical condition caused them to think that they had no advantages or something to be proud of, could not accept praise from others, were sensitive to criticism, and were unsure of their abilities. This result shows that the subjects have self-esteem problems following the research criteria. They compare themselves and feel jealous of the condition of others, so that they develop negative views and feelings towards themselves (Putra, 2018). During therapy, the subjects realized that their physical condition and appearance differed from those of other women's. However, they discovered these differences were normal due to hormonal and genetic changes.

Giving the subjects the you at your best technique can make them find the best conditions that make them proud of themselves, both from the size, type, and color of the clothes used. The subjects found that they were proud of themselves when they looked neat and pleasing to the eye, were confident in their friendships, and did not speak rudely. In addition, they also realize the power that can be used when they feel dissatisfied with their appearance or have nothing to be proud of, such as asking for the opinions of parents and friends, looking for appearance references on Pinterest, and not thinking about what others think about them. This solution helps the subjects to be more satisfied and confident in their appearance. This finding is explained by Adriani et al. (2021), who state that gratitude gives individuals positive thoughts and behaviors towards themselves.

Gratitude therapy makes individuals focus on positive things and accept their shortcomings and strengths in themselves (Ridwan et al., 2021). There is contemplation about positive things that have been experienced but have not been realized through the three good things that can make individuals find happiness and satisfaction by knowing something they can be proud of (Ananta, 2016). Gratitude writing can also cause individuals to develop a more positive body image (Wolfe & Patterson, 2017).

Subjects who write down the good things that happen every day related to themselves, their appearance, or their physical condition through the journal, daily gratitude, or the three good things technique can realize that there is something to be proud of about themselves, such as their ability to exercise, makeup, and academics. They also recognize that there are people around them who always give them appreciation for their appearance or abilities. Journaling daily gratitude can make subjects more able to see themselves positively, even though they still compare themselves to others, which causes them to feel dissatisfied. They realize that every human has a different body and physical condition, depending on biological and hormonal factors and their advantages and disadvantages.

The subjects also realize that they are valuable and accepted as they are by the people they are grateful for, through a gratitude letter written to that person. The gratitude letters the subjects wrote made them reflect on the positive things the person has done that indirectly affect their lives. In addition, the subjects also feel good by writing a thank you letter and giving it to the person they are grateful for, because they can express feelings of gratitude that are rarely and never even conveyed to the person. Gratitude letters can increase feelings of happiness, satisfaction, and worth (Khaer et al., 2021). Individuals focus more on respecting themselves and the people who always receive them, and ignoring the negative evaluations given by others (Mao et al., 2020).

From the description above, it can be said that gratitude therapy is a relevant therapy that can be applied to Indonesian adolescents and is easy to accept. In Indonesia, gratitude is a value that is often taught in the context of social norms and spiritual practices. Since childhood, children have often been taught the importance of being grateful and grateful for everything they have obtained, both in family life, school/work, and health. Gratitude therapy that emphasizes the positives in life and expresses gratitude is very much in line with the values acquired by Indonesian adolescents since they were children. This matter cannot be separated from the characteristics of Indonesian society as a society with a collectivist culture that emphasizes interdependence, where relationships with others and social values/norms are essential things to pay attention to (Markus & Kitayama, 1991; Matsumoto & Juang, 2013).

In addition, as a collectivist society, Indonesian people strongly emphasize the importance of social support, especially family and close friends, to overcome problems in their lives. This issue allows adolescents with BDD to feel less alone and even receive support from the environment; Not only in overcoming physical appearance but also in the context of social relationships that can ultimately increase their self-esteem. Therefore, the provision of gratitude therapy is adequate and can provide changes to increase self-esteem in Indonesian adolescents who experience BDD. These findings are relevant to the psychological well-being of Indonesian adolescents, who are strongly influenced by social support and a positive relational environment. Adolescents who feel valued and accepted by those closest to them will tend to be more able to develop self-esteem. In their research, Fachrandini & Febriani (2023) show that recreational family activities can improve adolescents' psychological well-being by creating space for reflection and emotional support. It aligns with the basic principles in gratitude therapy, specifically the gratitude letter technique, which encourages individuals to be aware of significant figures who accept them as they are. Thus, gratitude directed at interpersonal relationships also strengthens the self-liking and self-worth components of the self-esteem structure.

This research is inseparable from its limitations. The first limitation in this study is the relatively small number of subjects. This issue is due to the experimental nature of the research with specific psychological interventions, which require time commitment and active involvement of participants over several sessions. In addition, because the study subjects were adolescents with a tendency to Body Dysmorphic Disorder (BDD), the selection and screening process was carried out strictly to ensure the compatibility of characteristics with the inclusion criteria, thus narrowing the number of participants who could be involved. As a result, the effects of measurable therapy success are limited and difficult to generalize. Therefore, further research with more participants and replication in different contexts is urgently needed to test the consistency of these findings and external validity.

The second limitation is related to the implementation of homework in the form of writing three good things daily. Some subjects show irregularity or lack of consistency in completing the task, so the expected self-reflection process does not run optimally. This issue has an impact on the overall effectiveness of the intervention. To address this, the monitoring design of homework implementation needs to be made more detailed and structured, for example, with periodic evaluation schedules, writing guidelines, or daily feedback systems to support active participant engagement.

Another suggestion for future researchers is to use the study subjects by adding different genders, namely males, to see the effectiveness of gratitude therapy on adolescent boys. In addition, the researcher can use digital media to familiarize subjects with applying the three good things technique outside of meetings with researchers or during therapy. Digital media can be used to do

three good things, such as Google Forms or Google Keep. This digital media can make it easier and avoid manipulation because it can be accessed jointly by subjects and researchers.

CONCLUSION

Gratitude therapy can improve Self-esteem in adolescents who tend to have body dysmorphic disorder. Gratitude therapy can positively influence adolescents, namely, the subjects realize that dissatisfaction with appearance makes them feel worthless and realize that hormonal and genetic factors cause the difference in their physical condition or appearance compared to others. In addition, the subjects also know the best appearance to be proud of, know the things that are done to overcome their dissatisfaction, know the abilities to be proud of, and realize they have people who always accept them as they are.

REFERENCES

- Abdillah, I. Y., Ningrum, D., Rosyda, R., & Dolifah, D. (2023). Gambaran tingkat citra tubuh remaja pertengahan (middle adolescent) pada usia 16-18 tahun siswa sekolah menengah atas. *Jurnal Ners*, 7(2), 1693–1699. <https://doi.org/10.31004/jn.v7i2.15785>
- Adriani, R., Sagir, A., & Fadhila, M. (2021). Kebersyukuran terhadap kecenderungan body dysmorphic disorder terhadap wanita dewasa awal. *Taujihat : Jurnal Bimbingan Konseling Islam*, 2(2), 133–150. Retrieved from: <https://journal.iain-samarinda.ac.id/index.php/taujihat/index>
- Afandi, N. K., Subandi, & Ilyas, H. (2021). *Psikologi kebersyukuran (perspektif psikologi positif dan relevansinya dengan pendidikan Islam)*. Rajawali.
- Agustiningsih, N., Rohmi, F., & Rahayu, Y. E. (2020). Hubungan body image dengan harga diri pada remaja putri usia 16-18 tahun. *Jurnal Ilmu Kesehatan*, 8(2), 109–115. <https://doi.org/10.32831/jik.v8i2.244>
- Alkozei, A., Smith, R., & Killgore, W. D. S. (2018). Gratitude and subjective wellbeing: A proposal of two causal frameworks. *Journal of Happiness Studies*, 19(5), 1519–1542. <https://doi.org/10.1007/s10902-017-9870-1>
- Alkozei, A., Smith, R., & Killgore, W. D. S. (2019). Implicit Self-esteem is associated with higher levels of trait gratitude in women but not men. *Journal of Positive Psychology*, 14(5), 587–592. <https://doi.org/10.1080/17439760.2018.1497691>
- Alwi, M. A., & Razak, A. (2022). *Adaptasi Rosenberg's self-esteem di Indonesia*. Seminar Nasional Hasil Penelitian, 1074–1080. Retrieved from: <https://ojs.unm.ac.id/semnaslemlit/article/view/39885>
- Ananta, A. (2016). Penurunan body dissatisfaction pada perempuan dalam masa emerging adulthood dengan gratitude intervention. *Persona*, 5(2), 160–166. <https://doi.org/10.30996/persona.v5i02.733>
- Andarwati, I. (2016). Citra diri ditinjau dari intensitas penggunaan media jejaring sosial Instagram

- pada siswa kelas XI sman 9 Yogyakarta. *Jurnal Riset Mahasiswa*, 5(3), 1–12 . Retrieved from: <https://journal.student.uny.ac.id/index.php/fipbk/article/viewFile/972/882>
- American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders fifth edition text revision*. American Psychiatric Association.
- Aristantya, E. K., & Helmi, A. F. (2019). Citra tubuh pada remaja pengguna Instagram. *Gadjah Mada Journal of Psychology (GamaJoP)*, 5(2), 114. Retrieved from: <https://doi.org/10.22146/gamajop.50624>
- Armenta, C. N., Fritz, M. M., & Lyubomirsky, S. (2017). Functions of positive emotions: gratitude As a motivator of self-improvement and positive change. *Emotion Review*, 9(3), 183–190. <https://doi.org/10.1177/1754073916669596>
- Blevins, C. A., Weathers, F. W., Davis, M. T., Witte, T. K., & Domino, J. L. (2016). The Posttraumatic stress disorder checklist for DSM-5 (PCL-5): Development and initial psychometric evaluation. *Journal of Traumatic Stress*, 28, 189–498. doi:10.1002/jts.22059
- Boggio, P. S., Giglio, A. C. A., Nakao, C. K., Wingenbach, T. S. H., Marques, L. M., Koller, S., & Gruber, J. (2020). Writing about gratitude increases emotion-regulation efficacy. *Journal of Positive Psychology*, 15(6), 783–794. <https://doi.org/10.1080/17439760.2019.1651893>
- Bonie, R. J., & Backers, E. P. (2019). The promise of adolescence: realizing opportunity of all youth. *The National Academies Press*. <https://doi.org/10.17226/25388>
- Bono, G., & Sender, J. T. (2018). How gratitude connects humans to the best in themselves and in others. *Research in Human Development*, 15(3–4), 224–237. <https://doi.org/10.1080/15427609.2018.1499350>
- Cheng, S.-T., Tsui, P. K., & Lam, J. H. M. (2015). Improving mental health in health care practitioners: Randomized controlled trial of a gratitude intervention. *Journal of Consulting and Clinical Psychology*, 83(1) 177–186. <https://doi.org/10.1037/a0037895>
- Chua, T. H. H., & Chang, L. (2016). Follow me and like my beautiful selfies: Singapore teenage girls' engagement in self-presentation and peer comparison on social media. *Computers in Human Behavior*, 55, 190–197. <https://doi.org/10.1016/j.chb.2015.09.011>
- Cregg, D. R., & Cheavens, J. S. (2021). Gratitude interventions: Effective self-help? A meta-analysis of the impact on symptoms of depression and anxiety. *Journal of Happiness Studies*, 22(1), 413–445. <https://doi.org/10.1007/s10902-020-00236-6>
- de Leon, K. J. (2017b). *Canadian Adolescent perspectives on self-criticism and self-compassion: The role of parent-youth relationships and culture* [Master of Science]. University of Guelph.
- Dewi, D. P., Pratikto, H., & Aristawati, A. R. (2023). Body body dissatisfaction pada mahasiswa pengguna tiktok: Adakah peranan perfeksionisme?. *JlWA: Jurnal Psikologi Indonesia*, 1(1), 174–180. <https://doi.org/10.30996/jiwa.v1i1.9827>
- Dunaev, J., Markey, C. H., & Brochu, P. M. (2018). An attitude of gratitude: The effects of body-

- focused gratitude on weight bias internalization and body image *Body Image*, 25, 9–13. <https://doi.org/10.1016/j.bodyim.2018.01.006>
- Enander, J., Ivanov, V. Z., Mataix-Cols, D., Kuja-Halkola, R., Ljótsson, B., Lundström, S., Pérez-Vigil, A., Monzani, B., Lichtenstein, P., & Rück, C. (2018). Prevalence and heritability of body dysmorphic symptoms in adolescents and young adults: A population-based nationwide twin study. *Psychological Medicine*, 48(16), 2740–2747. <https://doi.org/10.1017/S0033291718000375>
- Eskander, N., Limbana, T., & Khan, F. (2020). Psychiatric comorbidities and the risk of suicide in obsessive-compulsive and body dysmorphic disorder. *Cureus*, 12(8), 10–15. <https://doi.org/10.7759/cureus.9805>
- Fachrandini, A., & Febriani, Z. (2023). Teenagers' well-being through family leisure activities. *Indigenous: Jurnal Ilmiah Psikologi*, 8(3), 368–382. <https://doi.org/10.23917/indigenous.v8i3.2812>
- Fatin, A. N. (2023). *The influence of self-acceptance on the tendency of body dysmorphic disorder among 2019 female students at UIN Maulana Malik Ibrahim Malang* (Undergraduate thesis, Universitas Islam Negeri Maulana Malik Ibrahim Malang). Retrieved from: <http://etheses.uin-malang.ac.id/53798/3/19410164.pdf>
- Felita, P., Siahaja, C., Wijaya, V., Melisa, G., Chandra, M., Dahesihsari, R., Psikologi, F., & Jaya, U. A. (2016). Pemakaian media sosial dan self concept pada remaja. *Jurnal Ilmiah Psikologi MANASA*, 5(1), 30–41. Retrieved from: <https://ejournal.atmajaya.ac.id/index.php/Manasa/article/view/184/365>
- Fredrickson, B. L. (2001). The role of positive emotions in positive psychology the broaden-and-build theory of positive emotions. *American Psychologist*, 56(3), 218–226. <https://doi.org/10.1037/0003-066X.56.3.218>
- Grogan, S. (2021). *Body image: Understanding body dissatisfaction in men, women and children*(4th ed.). Routledge. <https://doi.org/10.4324/9781003100041>
- Hasrin, A., & Sidik, S. (2023). Tren kecantikan dan identitas sosial: Analisis konsumsi kosmetik dan objektifikasi diri di kalangan perempuan kota Palopo. *Jurnal Analisa Sosiologi*, 12(4), 740–757. <https://doi.org/10.20961/jas.v12i4.71618>
- Hidayat, R., Malfasari, E., & Herniyanti, R. (2019). Hubungan perlakuan body shaming dengan citra diri mahasiswa. *Jurnal Keperawatan Jiwa*, 7(1), 79–86. <https://doi.org/10.26714/jkj.7.1.2019.79-86>
- Homan, K. J., & Tylka, T. L. (2018). Development and Exploration of the gratitude model of body appreciation in women. *Body Image*, 25, 14–22. <https://doi.org/10.1016/j.bodyim.2018.01.008>
- Jannah, M., & Murdiana, S. (2023). Pengaruh perfeksionisme terhadap ketidakpuasan tubuh pada mahasiswi di kota Makassar. *PESHUM: Jurnal Pendidikan, Sosial Dan Humaniora*, 3(1), 158–166. <https://doi.org/10.56799/peshum.v3i1.2652>
- Jans-Beken, L., Nele, J., Mayke, J., Sanne, P., Jennifer, R., Lilian, L., & and Lataster, J. (2020).

- Gratitude and health: An updated review. *The Journal of Positive Psychology*, 15(6), 743–782. <https://doi.org/10.1080/17439760.2019.1651888>
- Khaer, M., Yasser Mansyur, A., Ridfah, A., & Ridha, A. A. (2021). The effectiveness of writing the letter of gratitude technique in reducing the stress level of islamic boarding school student. *Jurnal Psikologi Islami*, 7(1), 79–85. <https://doi.org/10.19109/psikis.v7i1.4612>
- Killen, A., & Macaskill, A. (2015). Using a gratitude intervention to enhance well-being in older adults. *Journal of Happiness Studies*, 16(4), 947–964. <https://doi.org/10.1007/s10902-014-9542-3>
- Kuck, N., Caftitz, L., Bürkner, P. C., Hoppen, L., Wilhelm, S., & Buhlmann, U. (2021). Body dysmorphic disorder and self-esteem: A meta-analysis. *BMC Psychiatry*, 21(310), 1–16. <https://doi.org/10.1186/s12888-021-03185-3>
- Lin, C. C. (2015). The relationships among gratitude, self-esteem, depression, and suicidal ideation among undergraduate students. *Scandinavian Journal of Psychology*, 56(6), 700–707. <https://doi.org/10.1111/sjop.12252>
- Lukman, F. A., Muis, I., & Hamid, A. N. (2023). The effect of social media use intensity on body image dissatisfaction in early adult women. *Indigenous: Jurnal Ilmiah Psikologi*, 8(3), 314–324. <https://doi.org/10.23917/indigenous.v8i3.2587>
- Ma, L. K., Tunney, R. J., & Ferguson, E. (2017). Does gratitude enhance prosociality?: A meta-analytic review. *Psychological Bulletin*, 143(6), 601–635. <https://doi.org/10.1037/bul0000103>
- Mao, Y., Zhao, J., Xu, Y., & Xiang, Y. (2020). How gratitude inhibits envy: From the perspective of positive psychology. *PsyCh Journal*, 10(3), 384–392. <https://doi.org/10.1002/pchj.413>
- Markus, H. R., & Kitayama, S. (1991). Culture and the self: Implications for cognition, emotion, and motivation. *Psychological Review*, 98(2), 224–253. <https://doi.org/10.1037/0033-295X.98.2.224>
- Matsumoto, D., & Juang, L. (2013). Culture & psychology. Cengage. https://archive.org/details/culturepsycholog0000mats_c7r4/mode/2up
- Nelson, S. K., Layous, K., Cole, S. W., & Lyubomirsky, S. (2016). Do unto others or treat yourself? The effects of prosocial and self-focused behavior on psychological flourishing. *Emotion*, 16(6), 850–861. <https://doi.org/10.1037/emo0000178>
- Nugraeni, A. (2024). Peran media sosial dalam pembentukan identitas sosial anak muda penulis korespondensi. *LANCAH: Jurnal Inovasi Dan Tren*, 2(1), 142–147. <https://doi.org/10.35870/ljit.v2i1.2247>
- Patten, M. L. (2014). *Understanding research methods : An overview of the essentials*. Pyrczak Publishing.
- Portocarrero, F. F., Gonzalez, K., & Ekema-Agbaw, M. (2020). A meta-analytic review of the relationship between dispositional gratitude and well-being. *Personality and Individual Differences*, 164(110101). <https://doi.org/10.1016/j.paid.2020.110101>

- Purba, N. S. P., Sahrani, R., & Mularsih, H. (2020). Intervensi rasa bersyukur untuk meningkatkan harga diri remaja di smp X. *Jurnal Muara Ilmu Sosial, Humaniora Dan Seni*, 4(1), 186–195. <https://doi.org/10.24912/jmishumsen.v4i1.7638>
- Putra, J. S. (2018). Peran syukur sebagai moderator pengaruh perbandingan sosial terhadap self-esteem pada remaja pengguna media sosial. *Psikohumaniora: Jurnal Penelitian Psikologi*, 3(2), 197. <https://doi.org/10.21580/pjpp.v3i2.2650>
- Rahmadiyah, A., & Munthe, R. A. (2020). Social comparison dengan ketidakpuasan bentuk tubuh pada remaja perempuan. *Buletin Ilmiah Psikologi*, 1(1), 11–19. <https://doi.org/10.24014/pib.v1i1.8317>
- Ramdani, Z. (2021). Metode systematic literature review untuk identifikasi body dysmorphic disorder pada remaja. *Journal of Psychological Perspective*, 3(2), 53–58. <https://doi.org/10.47679/jopp.32952021>
- Rashid, T., & Seligman, M. (2018). *Positive psychotherapy: Clinician manual*. Oxford University Press.
- Reel, J., Voelker, D., & Greenleaf, C. (2015). Weight status and body image perceptions in adolescents: current perspectives. *Adolescent Health, Medicine and Therapeutics*, 149. <https://doi.org/10.2147/ahmt.s68344>
- Ridwan, O. A., Widyastuti, & Fakhri, N. (2021). Efektivitas pelatihan gratitude dalam meningkatkan harga diri remaja perempuan yang mengalami body dissatisfaction di Makassar. *Jurnal Psikologi Talenta Mahasiswa*, 1(2), 57–67. <https://doi.org/10.26858/jtm.v1i2.25544>
- Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist*, 55(1), 68–78. <https://doi.org/10.1037/0003-066X.55.1.68>
- Seligman, M. E. P., Steen, T. A., Park, N., & Peterson, C. (2005). Positive psychology progress: Empirical validation of interventions. *The American Psychologist*, 60(5), 410–421. <https://doi.org/10.1037/0003-066X.60.5.410>
- Shabira, F., & Uyun, Q. (2023). Harga diri dan kebersyukuran sebagai prediktor citra tubuh pada remaja perempuan penggemar K-pop. *Psikologika: Jurnal Pemikiran Dan Penelitian Psikologi*, 28(1). <https://doi.org/10.20885/psikologika.vol28.iss1.art7>
- Shahid, A., & Shoaib, S. (2023). Impact of gratitude and mindfulness training on the perceived stress levels and self-esteem among secondary school students: An experimental study. *Journal of Contemporary Trends and Issues in Education*, 3(1), 96–110. <https://doi.org/10.55628/jctie.v3i1.87>
- Singh, A., & Veale, D. (2019). Understanding and treating body dysmorphic disorder. *Indian Journal of Psychiatry*, 61(7), S131–S135. https://doi.org/10.4103/psychiatry.IndianJPsychiatry_528_18
- Susdarwono, E. T. (2021). Testing through the Mann-Whitney method and the Wilcoxon Signed Level on learning cube and perfect cube roots. *Journal of Education and Learning Mathematics*

Research (JELMaR), 2(1), 26–36. <https://doi.org/10.37303/jelmar.v2i1.43>

Syahrul, M. E., Haris, A. F., & Scorviana, N. (2024). Media sosial Instagram dalam membangun eksistensi diri remaja. *JICN: Jurnal Intelek Dan Cendekiawan Nusantara*, 1(2), 3061–3068. Retrieved from: <https://jicnusantara.com/index.php/jicn/article/view/335>

Voci, A., Veneziani, C. A., & Fuochi, G. (2019). Relating mindfulness, heartfulness, and psychological well-being: the role of self-compassion and gratitude. *Mindfulness*, 10(2), 339–351. <https://doi.org/10.1007/s12671-018-0978-0>

Widiastuti, T. (2016). Rekayasa gambar diri remaja dalam mencapai pengakuan sosial di Instagram. *Jurnal Ilmu Komunikasi*, 14(3), 215–4. <https://doi.org/10.31315/jik.v14i3.2134>

Wolfe, W. L., & Patterson, K. (2017). Comparison of a gratitude-based and cognitive restructuring intervention for body dissatisfaction and dysfunctional eating behavior in college women. *Eating Disorders*, 25(4), 330–344. <https://doi.org/10.1080/10640266.2017.1279908>

Zinovyeva, E. V., Kazantseva, T. V., & Nikonova, A. N. (2016). Self-esteem and loneliness in Russian adolescents with body dissatisfaction. *Procedia-Social and Behavioral Sciences*, 233, 367–371. <https://doi.org/10.1016/j.sbspro.2016.10.160>