

The Influence of Social Media Beauty Filters and Digital Identity on Body Image (Body Dysmorphic Disorder), Eating habits (Eating Disorder) Among Teenagers and Young Adults in India



Souris Lahiri¹, Ahana Mishra², Moupriya Roy³, Debangana Bhattacharya⁴

¹B.Sc in Psychology, Department of Psychology, Sister Nivedita University, Kolkata

²B.Sc in Psychology, Department of Psychology, Sister Nivedita University, Kolkata

³B.Sc in Psychology, Department of Psychology, Sister Nivedita University, Kolkata

⁴Consulting Psychologist and PhD, Assistant Professor, Department of Psychology, Sister Nivedita University, Kolkata, Life Member of InSPA

ABSTRACT

Social media beauty filters have become key to digital self-presentation and possibly intensifies appearance or look-based comparison, self-discrepancy, and self-objectification, thereby increasing vulnerability to body dysmorphic tendencies and disorganized eating. Guided by social comparison theory, self-discrepancy theory, and objectification theory, this mixed-methods study examined associations between beauty-filter use, body dysmorphic symptoms, and eating attitudes among Indian young adults. 30 participants aged 18–25 years ($M = 21.8$, $SD = 1.31$) completed the Body Dysmorphic Disorder Questionnaire (BDDQ; Phillips, 1996) primarily used as a screening tool to collect data only from the samples with ample body dysmorphic tendencies and the Eating Attitudes Test-26 (EAT-26; Garner et al., 1982), and semi-structured interviews were analyzed using Braun and Clarke's (2006) thematic framework. The results showed that using filters often was linked to more worries about body image and a tendency to eat in an unhealthy way. Thematic analysis found five main patterns of experience: people using filters to improve themselves and control their emotions; beauty standards in society making people anxious about their appearance; differences between their digital and real selves; self-worth based on online validation; and a growing awareness and resistance to unrealistic beauty ideals. The results show that beauty filters can boost confidence for a short time, but they also make people more self-conscious, unhappy, and dependent on feedback from others. These results show that Indian youth need programs that teach them how to use the media and mental health treatments that are sensitive to their culture to deal with filter-related dysmorphia.

Keywords: Beauty filters, Body Dysmorphia, BDDQ, Digital identity, EAT-26, Indian young adults, Self-discrepancy, Social Comparison

1. Introduction:

Over the last decade, social media has become central to how young people form their identities, evaluate themselves, and present who they are. Platforms like Instagram, Snapchat, and TikTok, which are heavily image-driven, encourage users to curate polished and often idealized versions of themselves. In this process, many rely on tools such as beauty filters and photo-editing apps that subtly or significantly alter appearance.

While these features may seem harmless or even helpful in boosting confidence, research increasingly suggests that frequent engagement with such curated self-presentation can have unintended psychological effects. These include impacts on body image, self-esteem, and attitudes toward eating. What starts as something playful can gradually shape how individuals perceive themselves.

Beauty filters, particularly those using augmented reality, go far beyond simple adjustments like lighting or smoothing. They often reshape facial features, lighten skin tone, refine symmetry, and

enhance traits that align with dominant beauty ideals. Over time, these altered images can become a standard against which individuals judge their real appearance. This creates a blurred boundary between one's actual self and a digitally enhanced version.

Unlike traditional media, where idealized images are external—celebrities, models, or influencers—social media creates a more personal dynamic. Individuals are not just comparing themselves to others; they are comparing themselves to modified versions of their own faces and bodies. This intensifies self-scrutiny in a way that is more immediate and psychologically impactful.

Body image disturbance, which involves persistent dissatisfaction or distress about one's appearance, is widely recognized as a risk factor for both body dysmorphic disorder and eating disorders. Body dysmorphic disorder, in particular, involves an intense preoccupation with perceived flaws that may be minor or even nonexistent to others. This often leads to repetitive behaviors such as mirror

checking, seeking reassurance, or trying to hide these perceived imperfections. Even when these concerns do not meet full diagnostic criteria, they can still cause significant distress and are linked to unhealthy eating patterns.

Eating disorders are also closely tied to dissatisfaction with one's body and the tendency to base self-worth on appearance. Patterns such as restrictive eating, preoccupation with weight, and adherence to unrealistic body standards are often influenced by broader sociocultural pressures. Research consistently shows that social media use—especially when focused on appearance—is associated with higher levels of body dissatisfaction and disordered eating. These effects tend to be stronger on image-based platforms compared to text-based ones.

Several psychological theories help explain how these effects occur. Social Comparison Theory suggests that people evaluate themselves by comparing their traits to others, particularly when there are no clear objective standards. Social media amplifies this process by constantly exposing users to carefully selected, idealized images, often accompanied by visible indicators of approval like likes and comments. These comparisons are not neutral—they are often upward comparisons, where individuals measure themselves against seemingly superior standards.

More recent research highlights a different kind of comparison: comparing oneself to one's own filtered image. This form of comparison can be particularly powerful because it involves a version of the self that feels attainable yet is artificially constructed. The gap between the real self and the filtered self can create a sense of frustration, as the ideal appears within reach but is ultimately unattainable.

This aligns with Self-Discrepancy Theory, which explains how emotional discomfort arises when there is a mismatch between one's actual self and internalized ideals. Exposure to filtered images—especially one's own—can make these discrepancies more noticeable, leading to feelings such as dissatisfaction, embarrassment, or inadequacy. Research on photo editing supports this, showing that the more individuals engage in altering their images, the more likely they are to experience dissatisfaction linked to these perceived gaps.

Objectification Theory provides another perspective. It suggests that in environments where appearance is constantly evaluated, individuals begin to internalize an outsider's view of their own bodies. This process, known as self-objectification, is particularly common in social media settings where visual presentation and feedback are emphasized. As a result, individuals may become more focused on how they look rather than how they feel, leading to

increased body monitoring, shame, and risk of disordered eating.

Empirical studies support these ideas. Photo-editing behaviors have been linked to lower self-esteem, largely through increased comparison and self-objectification. Experimental research also indicates that using beautifying filters can increase the desire for weight loss, reinforce negative attitudes toward certain body types, and heighten self-objectification. This suggests that these tools are not just reflecting dissatisfaction but may actively contribute to it.

Despite the growing body of research globally, there is still limited work examining these dynamics in non-Western contexts, particularly in India. Beauty standards in India are shaped by a mix of historical, cultural, and global influences, often emphasizing fairness, thinness, and symmetry. Social media may reinforce these standards by promoting content that aligns with these ideals, potentially intensifying appearance-related concerns among young users.

Adolescence and young adulthood are especially sensitive periods, marked by identity exploration and heightened awareness of how one is perceived by others. During this time, individuals are more likely to internalize societal standards and link their self-worth to external validation. Social media metrics such as likes, comments, and follower counts often function as indicators of social value, influencing how individuals perceive their own attractiveness and worth.

In this context, beauty filters can serve a dual role. On one hand, they may offer temporary relief from insecurities and allow individuals to present themselves in ways that feel more acceptable. On the other hand, they may reinforce dependence on external validation and contribute to a fragile sense of self-worth that is contingent on appearance.

To fully understand these processes, a mixed-methods approach is particularly useful. Quantitative measures can identify patterns and relationships between filter use, body image concerns, and eating behaviors, while qualitative methods provide deeper insight into personal experiences and how individuals make sense of these influences. This combination allows for a more comprehensive understanding of how digital environments shape self-perception.

Qualitative findings suggest that many individuals feel conflicted about using beauty filters. They recognize that these images are artificial, yet still feel pressure to use them in order to meet social expectations. This reflects a broader contradiction within digital culture, where authenticity is often valued in theory but not always rewarded in practice. Understanding how young people navigate this tension is important for developing interventions that promote healthier relationships with social media. As appearance-focused online interactions

continue to increase, and concerns about body image and eating disorders grow, there is a clear need for research that is both theoretically grounded and culturally relevant.

By examining the links between beauty filter use, body dysmorphic tendencies, and eating behaviors among Indian young adults through a mixed-methods approach, this study aims to provide a more nuanced understanding of digital body image in the Indian context. It also seeks to identify not only potential risks but also ways in which individuals resist or critically engage with these pressures, ultimately contributing to more effective mental health and media literacy efforts.

2. Method:

2.1. Aim of the study:

The present study investigates how the use of beauty filters on social media relates to body dysmorphic tendencies and eating attitudes among Indian adolescents and young adults between 18 and 25 years of age. Drawing on Social Comparison Theory, Self-Discrepancy Theory, and Objectification Theory, it aims to examine measurable links between filter use, body image concerns, and disordered eating patterns. At the same time, it explores personal experiences—how individuals present themselves online, seek validation, and make sense of their identities within the broader Indian sociocultural setting.

2.2. Objective of the study:

- To examine the significant relationship, if any, between social media beauty filter usage and body dysmorphic symptoms among Indian adolescents and young adults.
- To examine the significant relationship, if any, between social media beauty filter usage and eating attitudes (dieting, bulimia and food preoccupation, and oral control) among Indian adolescents and young adults.
- To assess the mediating role of validation-seeking behaviors in the relationship between beauty filter usage and body image dissatisfaction.
- To explore the association between self-discrepancy (digital self versus real self) and vulnerability to body dysmorphic tendencies and disordered eating attitudes.
- To qualitatively explore lived experiences of digital identity construction, appearance-related comparison, emotional regulation, and self-worth through semi-structured interviews within the Indian sociocultural context.

2.3. Hypotheses of the study:

H₀¹: There is no significant association between social media beauty filter usage and body

dysmorphic symptoms among Indian adolescents and young adults.

H₀²: There is no significant association between social media beauty filter usage and eating attitudes (dieting, bulimia and food preoccupation, and oral control) among Indian adolescents and young adults.

H₀³: There is no significant mediating effect of validation-seeking behaviors on the relationship between social media beauty filter usage and body image dissatisfaction among Indian adolescents and young adults.

H₀⁴: There is no significant association between self-discrepancy (digital self versus real self) and body dysmorphic tendencies among Indian adolescents and young adults.

H₀⁵: There is no significant association between self-discrepancy (digital self versus real self) and eating attitudes (dieting, bulimia and food preoccupation, and oral control) among Indian adolescents and young adults.

H₀⁶: There are no significant qualitative themes reflecting identity conflict, validation-seeking, emotional regulation, or body dissatisfaction in relation to social media beauty filter use among Indian adolescents and young adults.

2.4. Variables under Study

2.4.1 Social Media Beauty Filter Usage

Social media beauty filter usage refers to the frequency and manner in which individuals engage with appearance-altering filters on digital platforms such as Instagram, Snapchat, and TikTok. These filters digitally modify facial or bodily features to conform to socially reinforced beauty standards and are commonly used as tools of digital self-presentation. In the present study, beauty filter usage is examined as an exposure variable influencing appearance-based self-evaluation, comparison processes, and identity-related experiences.

2.4.2 Eating Attitudes

Eating attitudes refer to an individual's beliefs, concerns, and behavioral tendencies related to food intake, body weight, and control over eating. Disturbed eating attitudes are associated with body dissatisfaction, emotional distress, and sociocultural pressures surrounding appearance and self-regulation. In this study, eating attitudes are examined through the dimensions of dieting, bulimia and food preoccupation, and oral control, as measured by the Eating Attitudes Test-26 (EAT-26; Garner et al., 1982).

2.4.3 Body Dysmorphic Tendencies

Body dysmorphic tendencies involve persistent preoccupation with perceived defects in physical appearance and heightened dissatisfaction with one's body or facial features. The Body Dysmorphic Disorder Questionnaire (BDDQ; Phillips, 1996) was

used exclusively as a screening tool to identify participants with significant appearance-related concerns. BDDQ scores were not treated as outcome variables but were used to ensure that the sample comprised individuals for whom body image distress was salient and relevant to the objectives of the study.

2.4.4 Validation-Seeking

Validation-seeking refers to reliance on external approval and feedback, such as likes, comments, and peer responses on social media, for regulation of self-worth and emotional security. In the present study, validation-seeking is examined as a psychological process linking beauty filter usage with body dissatisfaction and maladaptive eating attitudes. This construct is explored primarily through qualitative inquiry.

2.4.5 Self-Discrepancy (Digital Self vs. Real Self)

Self-discrepancy refers to the perceived mismatch between an individual's offline appearance and their digitally modified self-presentation. Repeated comparison between filtered and unfiltered self-images may intensify dissatisfaction, identity conflict, and emotional distress. In the present study, self-discrepancy is explored qualitatively through participants' narratives regarding authenticity, self-evaluation, and identity negotiation in digital spaces.

2.4.6 Qualitative Indicators of Digital Identity, Body Perception, and Emotional Experience

Qualitative indicators include subjective experiences related to digital self-presentation, appearance-based comparison, emotional responses to online validation, and perceptions of sociocultural beauty norms. These indicators were examined through semi-structured interviews and a visual elicitation technique. The visual elicitation involved participants' engagement with filtered and unfiltered images of themselves, which served as prompts to facilitate reflection on body satisfaction, confidence, authenticity, and perceived social evaluation. Participants' verbal reflections on these images were analyzed as image-associated narratives to complement quantitative findings and deepen understanding of psychological processes related to beauty filter use.

2.5. Participants:

The study included 30 female young adults between the ages of 18 and 25 ($M = 21.8$, $SD = 1.31$). Participants were selected through purposive sampling, guided by criteria aligned with the objectives of the research. All participants were residents of Kolkata, had completed at least higher secondary education, and were comfortable using English.

To ensure they could meaningfully engage with the study measures, participants were required to have access to a smartphone and internet, possess basic

digital literacy, and have used social media consistently for at least six months, either currently or within the past two years. All participants came from a middle socioeconomic background and identified as cisgender women.

Individuals who reported a history of significant physical or psychiatric illness, neurological conditions such as head injury or seizures, or substance use were excluded. Participation followed eligibility screening and informed consent procedures, in accordance with standard ethical guidelines in psychological research.

2.6. Sampling technique:

The study used purposive sampling to recruit participants who met criteria directly relevant to its aims. Female adolescents and young adults aged 18–25 were first approached and screened using the Body Dysmorphic Disorder Questionnaire (BDDQ), which was used only as a preliminary screening tool. The final sample included only those individuals who screened positive for body dysmorphic concerns, ensuring that participants had a meaningful level of appearance-related distress relevant to examining the psychological impact of beauty filter use.

All participants were drawn from an urban Indian setting and were expected to be active on social media, with regular engagement in beauty filter use. This sampling approach allowed for the intentional inclusion of individuals whose experiences closely reflected the variables under study, enabling a more focused exploration of how beauty filter use relates to body dysmorphic tendencies and eating attitudes. For the qualitative component, a subset of participants was selected from the same screened group. This allowed for a deeper examination of personal experiences related to online self-presentation, the pursuit of validation, and the shaping of identity. By selecting participants in this sequential manner, the study maintained continuity between its quantitative findings and qualitative insights.

2.7. Procedure

After providing informed consent, participants first completed a socio-demographic information form. They were then screened using the Body Dysmorphic Disorder Questionnaire (BDDQ), and only those who screened positive were included in the study. Eligible participants subsequently completed the Eating Attitudes Test–26 (EAT-26) in a quiet and distraction-free setting.

For the qualitative phase, selected participants took part in semi-structured interviews that focused on their experiences with beauty filters on social media, perceptions of their body image, tendencies to seek validation, and sense of self. With their permission, the interviews were audio-recorded and supported

with field notes. A visual elicitation technique was also used, where participants were asked to reflect on both filtered and unfiltered images in order to explore their emotional reactions, sense of authenticity, and perceptions of how others might judge them. Each interview lasted approximately 15 minutes.

All data were anonymized prior to analysis. Quantitative data were examined using descriptive statistics, while qualitative responses were analyzed using thematic analysis.

2.8. Tools used in study:

The study adopted a mixed-methods approach, combining quantitative and qualitative techniques to assess eating attitudes, screen for body dysmorphic concerns, and explore personal experiences related to beauty filter use and digital identity.

● **Socio-Demographic Information Sheet:** A self-developed socio-demographic information sheet was used to collect basic background details such as age, education, socioeconomic status, patterns of social media use, and access to digital devices. This helped in clearly defining the sample and ensuring that participants met the necessary criteria for inclusion.

● **Informed Consent Form:** Prior to data collection, participants were provided with an informed consent form outlining the purpose of the study, the procedures involved, issues of confidentiality, and the voluntary nature of participation. They were also informed of their right to withdraw at any stage without any negative consequences.

● **The Body Dysmorphic Disorder Questionnaire:** The Body Dysmorphic Disorder Questionnaire (BDDQ; Phillips, 1996) was used strictly as a screening tool to identify individuals with notable appearance-related concerns. It was not treated as an outcome measure but rather as a way to ensure that the sample was relevant to the research focus.

● **Eating Attitudes Test-26 (EAT-26):** To assess eating-related attitudes and behaviors, the Eating Attitudes Test-26 (EAT-26; Garner et al., 1982) was administered. This widely used self-report measure captures dimensions such as dieting tendencies, preoccupation with food, and aspects of control related to eating, and is commonly applied in non-clinical populations.

● **Semi-Structured Interview Schedule:** A semi-structured interview guide was developed based on

existing literature on body image, social media use, and digital identity. The interviews explored participants' experiences with beauty filters, perceptions of appearance before and after filter use, emotional responses to online feedback, perceived discrepancies between digital and real selves, and reflections on self-worth and authenticity.

● **Visual Elicitation Technique:** A visual elicitation method was incorporated within the qualitative interviews to facilitate deeper reflection. Participants engaged with filtered and unfiltered images, which served as prompts to discuss emotional reactions, confidence, validation-seeking, and perceived social judgment. The visual material was used solely to support narrative exploration and was not subjected to independent evaluation.

2.9. Statistical Analysis

Mean and standard deviation (SD) scores were calculated for the EAT-26 total score and its three dimensions (8-item, 2-item, and 6-item). Norm-based scoring procedures were applied to interpret the outcomes in alignment with established guidelines. All statistical analyses were conducted using IBM SPSS Statistics (Version 25), and results are presented in the subsequent tables.

2.10. Qualitative Analysis

Qualitative data were examined using reflexive thematic analysis in accordance with Braun and Clarke's (2006) six-phase procedure. Interview transcripts were coded inductively to identify patterned meanings across participants' narratives. Codes were reviewed, refined, and organized into themes that represented shared psychological and experiential processes related to social media beauty filter use. The analytic approach prioritised depth, contextual interpretation, and participants' subjective meaning-making. Themes are presented in the results section with supporting extracts.

3. Results:

3.1. Quantitative results:

This section presents the quantitative findings from the EAT-26, including the total score and its dimensions. Descriptive statistics are reported first, followed by interpretation in relation to the study objectives.

Table 1: Values of Mean and Standard Deviation (SD) for the eating attitude dimensions (Behavioral Control, Oral control, Dieting, and Bulimia) among Indian adolescent girls and young women (N = 30).

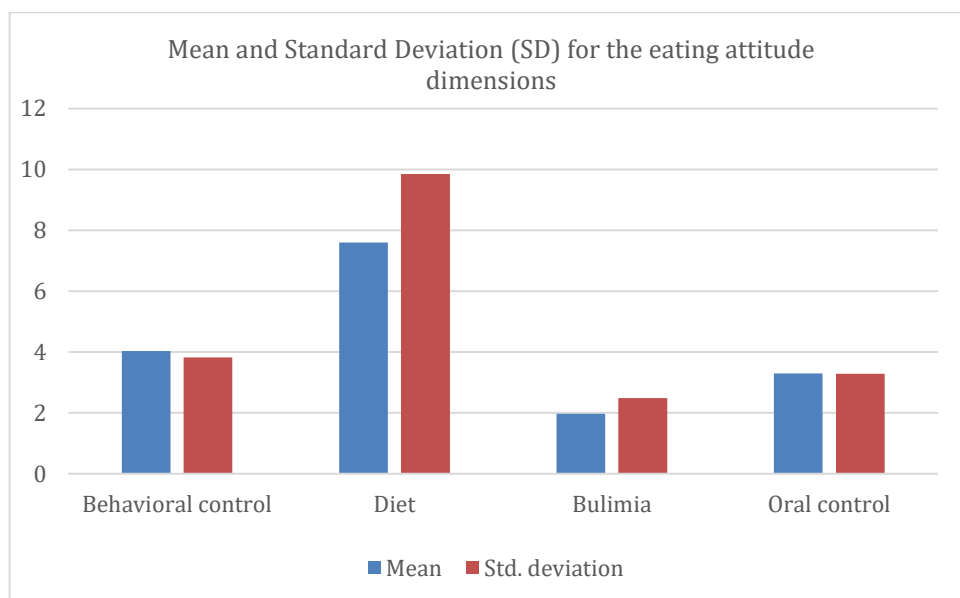
Variable	Mean	Std. deviation	N
Behavioral control	4.0333	3.82806	30

Diet	7.6	9.84921	30
Bulimia	1.9667	2.4842	30
Oral control	3.3	3.2912	30

The above table indicates that dieting had the highest mean score ($M = 7.60, SD = 9.85$), suggesting greater variability in dietary restraint and weight-control concerns among participants. Behavioral control showed a lower mean ($M = 4.03, SD = 3.83$), reflecting moderate levels of control-oriented eating

behaviors. Bulimia demonstrated the lowest mean score ($M = 1.97, SD = 2.48$), indicating relatively fewer bulimic tendencies within the sample. Overall, the results reflect variability across different dimensions of eating attitudes among the participants.

Figure 1: Graphical representation of the values of Mean and Standard Deviation (SD) for the eating attitude dimensions (Behavioral Control, Dieting, and Bulimia) among Indian adolescent girls and young women.



3.2. Qualitative Results

Reflexive thematic analysis generated five overarching themes that captured participants’ experiences and perceptions related to beauty filter use, appearance concerns, and self-image. The themes are presented below, supported by representative participant statements that illustrate each thematic pattern.

Theme 1: Filters as Tools of Self-Enhancement and Emotional Regulation

Participants described using filters to enhance facial appearance, conceal perceived flaws, and improve mood or confidence, particularly during moments of low self-esteem. Filters were viewed as convenient means of appearing “more presentable,” often replacing or supplementing makeup use. For some, this functioned as a temporary emotional boost rather than a purely aesthetic choice. Example statement: “I use filters when I feel low.”

Theme 2: Appearance Anxiety Reinforced by Beauty Norms

Participants frequently expressed dissatisfaction with natural facial features, especially pigmentation, acne, dark circles, and skin tone. Many associated fairness and flawless skin with attractiveness, and described feeling less appealing or “tired” in unfiltered images. These accounts reflected internalised cultural beauty norms and heightened appearance-based self-consciousness. Example statement: “Dark circles make me look sick.”

Theme 3: Digital-Real Self Discrepancy

Participants reported a sense of disconnect between their offline appearance and their filtered images, describing the filtered version as more beautiful but less authentic. Some explained that their online presence represented only selective aspects of themselves, reflecting a divide between real and digital identity. Example statement: “Filtered me looks like another person.”

Theme 4: Conditional Self-Worth Driven by Social Feedback

Many participants described strong emotional responses to likes, comments, and other forms of digital validation, noting that positive feedback increased confidence while low engagement prompted disappointment or post deletion. Social feedback was thus experienced as a fluctuating influence on self-worth. Example statement: "If my picture gets fewer likes, I delete it."

Theme 5: Emerging Self-Acceptance and Rejection of Unrealistic Ideals

A smaller group of participants reported moving away from filter use or questioning the unrealistic standards filters promote. These accounts reflected increasing self-acceptance, preference for authenticity, and awareness of the psychological impact of digitally altered images. Example statement: "Unfiltered is real beauty."

Table 2: Themes and Associated Codes

This presents an overview of the five themes generated through reflexive thematic analysis, along with the corresponding sub-themes, codes, and illustrative participant extracts. The table reflects how meaning was derived from repeated patterns within the data and demonstrates the interpretive links between coded segments and broader conceptual categories.

Theme	Sub-themes / Codes	Illustrative Evidence From Data
1. Filters as Tools of Self-Enhancement and Emotional Regulation	• Feeling "prettier" with filters • Hiding imperfections (dark circles, acne, pigmentation) • Using filters when feeling low • Filters substituting for makeup • Boost in temporary confidence	"I use filters when I feel low." "Filters make me feel close to the ideal face."
2. Appearance Anxiety Reinforced by Beauty Norms	• Fair skin = ideal • Smooth, flawless skin expectations • Fear of looking "tired" or "sick" in real photos • Cultural preference for fairness • Preoccupation with blemishes	"Dark circles make me look sick." "Fair faces get more love."
3. Digital-Real Self Discrepancy	• Feeling unlike oneself in filtered photos • Seeing filtered version as "someone else" • Showing only a controlled part of one's personality online • Curating an image not fully authentic	"Filtered me looks like another person." "It's only the part of me I want the world to see."
4. Conditional Self-Worth Driven by Social Feedback	• Likes and comments influence confidence • Deleting low-liked pictures • Praise increasing self-esteem • Feeling validated when admired online	"When I get praises, I feel validated." "If my picture gets fewer likes, I delete it."
5. Emerging Self-Acceptance and Rejection of Unrealistic Ideals	• Reduced filter use over time • Pride in natural appearance • Awareness of harmful effects of over-editing • Accepting flaws as part of identity	"I used to use heavy filters; now I stopped." "Unfiltered is real beauty."

The themes summarised in Table 2 highlight consistent experiential patterns related to filter use and appearance perception. Across participants, filters functioned as both an emotional and aesthetic tool, while cultural beauty norms contributed to appearance anxiety. Participants described a divide between their real and filtered identities, and many expressed reliance on social validation as a source of self-worth. Importantly, some participants also reported moving toward greater authenticity and self-acceptance. These patterns collectively form the basis of the qualitative findings described in detail above.

Table 3: Final Themes and Key Codes

This provides a summary of the final five themes generated through the thematic analysis, along with the key codes that informed each thematic category. This table reflects the refined structure of the data after reviewing, collapsing, and reorganising initial codes into coherent and representative themes.

Theme	Key Codes
Self-Enhancement & Emotional Regulation	prettier with filters, hide flaws, feel good, uplift mood, filter instead of makeup
Appearance Anxiety & Beauty Norms	fairness, flawless skin, fear of blemishes, cultural pressure, looking "tired"
Digital-Real Self Gap	filtered self different, partial identity, curated persona, authenticity concerns

Theme	Key Codes
Validation-Based Self-Worth	likes/comments matter, praise increases confidence, deleting low-like posts
Self-Acceptance	rejecting heavy filters, liking natural face, accepting flaws

The topics in Table 3 are the most important emotional and mental health issues that the people who took part talked about. These include dealing with emotions, feeling pressure to be beautiful from other cultures, having a different view of oneself, needing outside validation, and learning to love oneself. These last topics are the ideas that will help us understand how using beauty filters on social media affects how young adults in India see themselves, their sense of identity, and their self-worth.

4. Discussion:

The study set out to examine how the use of beauty filters on social media relates to body dysmorphic concerns and eating attitudes among Indian adolescents and young adults, while also drawing on qualitative accounts to deepen the analysis. All participants who completed the BDDQ screening showed indications of body dysmorphic tendencies, suggesting a consistent pattern of preoccupation with appearance. This context is important for interpreting the eating-related patterns identified through the EAT-26.

Within the EAT-26 results, dieting emerged as the most prominent dimension, followed by oral control, while bulimia and food preoccupation were comparatively less pronounced. Although no inferential statistical analysis was conducted, the pattern itself suggests a tendency toward restrictive and self-regulated eating behaviors rather than binge-purge patterns. This aligns with existing evidence indicating that individuals who are highly concerned with their appearance are more likely to engage in dieting and weight-control practices.

The qualitative findings add depth to this pattern. A recurring theme was heightened appearance anxiety, often shaped by internalized beauty standards. Participants frequently focused on aspects such as skin tone, perceived flaws, and facial texture. These concerns appeared closely tied to their eating-related attitudes, particularly tendencies toward restriction and control. Cultural ideals emphasizing fairness and flawlessness seemed to play a role in shaping how participants evaluated both their appearance and their dietary habits.

At the same time, interview narratives pointed to variations in how participants approached control over eating. Beauty filters were often described as tools for “correcting” or masking perceived imperfections, reflecting an underlying sense of self-evaluation that extended beyond appearance to

include behavioral control, such as eating. The prominence of dieting behaviors also intersected with a broader theme of conditional self-worth, where participants’ confidence was closely tied to social feedback in the form of likes and comments. This suggests an emotional pattern in which self-perception fluctuates based on external validation, reinforcing cycles of restriction and self-monitoring. Also, the qualitative theme of filters as tools for self-improvement and emotional control is directly related to the quantitative dieting behaviors: participants said they used beauty filters when they were feeling down or unhappy, which suggests that changing their appearance may be a way to deal with their feelings, just like disordered eating behaviors are described in the literature (Rodgers & Melioli, 2016). In both cases, filter use and dieting, outward appearance seems to act as a way of managing inner discomfort. It may provide short-term relief, but over time it appears to increase sensitivity to perceived flaws and emotional vulnerability.

The tension between one’s digital self and real self also reflects the body dysmorphic tendencies identified through BDDQ screening. When participants compared their filtered images with their actual appearance, many reported feeling uneasy, detached, or even unable to relate to their own image. This reflects the psychological strain that can arise when there is a gap between how one actually looks and how one ideally wants to look. Repeated exposure to these altered versions of the self may deepen dissatisfaction and, in some cases, contribute to stricter control over eating as individuals try to bring their real bodies closer to the idealized image.

At the same time, self-acceptance emerged as an important counterbalance. Participants who chose not to use filters or who felt comfortable sharing unedited images often described feelings of relief, stability, and authenticity. These experiences suggest that accepting one’s natural appearance may help reduce vulnerability to both body image concerns and disordered eating patterns.

Taken together, the quantitative and qualitative findings point in a consistent direction. The use of beauty filters alongside existing body image concerns is linked to more restrictive eating tendencies. These patterns appear to be shaped by cultural beauty standards, ongoing digital comparison, and a sense of self-worth that depends heavily on external validation. At the same time, there are indications of reflection and resistance

among participants, which suggest potential directions for intervention, awareness, and healthier engagement with social media.

5. Conclusion:

The present mixed-method study examined the relationship between social media beauty filter use, body dysmorphic tendencies, and eating attitudes among Indian adolescents and young adults. All participants screened positive on the BDDQ, indicating that the sample consisted of individuals with notable appearance-related concerns. Descriptive findings from the EAT-26 showed that dieting and oral control were more prominent than bulimia-related behaviors, suggesting a pattern oriented toward restriction rather than binge-purge tendencies. As no inferential statistical analyses were conducted, the null hypotheses regarding the relationship between filter use and eating attitudes cannot be formally accepted or rejected, and therefore remain inconclusive at the quantitative level.

However, the qualitative findings offer strong conceptual insights that call these null assumptions into question. Thematic analysis revealed consistent links between beauty filter use, heightened appearance anxiety, reliance on external validation, and a sense of mismatch between digital and real identities. These patterns indicate that participants' lived experiences do not align with the assumption of no relationship between filter use, body dissatisfaction, and eating-related concerns. In this sense, the qualitative evidence challenges the null position at a conceptual level.

An additional theme that emerged was the development of self-acceptance, which was not originally accounted for in the hypotheses. This points to the presence of adaptive processes, where some individuals begin to resist dominant appearance norms and move toward a more integrated sense of self.

Overall, the findings suggest that the relationship between digital self-presentation, body-related concerns, and eating attitudes is complex and shaped by multiple interacting factors. They also highlight the need for culturally grounded psychological interventions and media literacy efforts within the Indian context.

Implications

The findings highlight the need for culturally sensitive mental-health and media-literacy interventions focused on improving body image, reducing reliance on digital modification, and promoting autonomy in digital self-presentation. Educational programmes may help young people critically evaluate beauty norms and navigate social media pressures. Clinicians working with

adolescents and young adults should consider filter use and dysmorphic concerns when assessing eating attitudes, identity distress, and emotional wellbeing.

Limitations

The study's small sample size and purposive sampling limit generalisability. Because there are no inferential statistics, it is impossible to draw firm conclusions about how variables are related. Self-report measures may have response bias, and qualitative results are based on how the researcher interprets the data. Future studies should include a wider range of participants and look at the data over time.

6. References:

1. American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). APA. <https://doi.org/10.1176/appi.books.9780890425596>
2. Badola, S., Sidani, J., Moreno, M. A., & Radovic, A. (2025). Self-presentation on social media and body image concerns in young adults: A systematic review. *Journal of Adolescent Health, 76*(1), 54–68. <https://doi.org/10.1016/j.jadohealth.2024.10.005>
3. Beos, D., Pezirkianidis, C., Karakasidou, E., Mourouti, O., & Stalikas, A. (2021). Self-discrepancy and body dissatisfaction across adulthood. *Journal of Adult Development, 28*(2), 167–179. <https://doi.org/10.1007/s10804-020-09348-1>
4. Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*(2), 77–101. <https://doi.org/10.1191/1478088706qp0630a>
5. Brown, Z., & Tiggemann, M. (2016). Attractive celebrity and peer images on Instagram: Effect on women's mood and body image. *Body Image, 19*, 37–43. <https://doi.org/10.1016/j.bodyim.2016.08.007>
6. Caravelli, J., Monaghan, S., & Murray, S. (2025). Social comparison on social media and body image outcomes: A longitudinal panel analysis. *Computers in Human Behavior, 152*, 107152. <https://doi.org/10.1016/j.chb.2023.107152>
7. Cash, T. F., & Szymanski, M. L. (1995). The development and validation of the Body-Image Ideals Questionnaire. *Journal of Personality Assessment, 64*(3), 466–477. https://doi.org/10.1207/s15327752jpa6403_6
8. Choukas-Bradley, S., Roberts, S. R., Maheux, A. J., Ladouceur, C. D., & Silk, J. S. (2022). Peer feedback, self-evaluation, and social media: Adolescent vulnerabilities. *Current Opinion in Psychology, 46*,

101333.
<https://doi.org/10.1016/j.copsyc.2022.101333>
9. Chua, T. H. H., & Chang, L. (2016). Follow me and like my beautiful selfies: Instagram use and narcissistic patterns of self-presentation. *Journal of Children and Media*, 10(2), 142–159. <https://doi.org/10.1080/17482798.2015.1029390>
 10. Erikson, E. H. (1968). *Identity: Youth and crisis*. W. W. Norton. <https://archive.org/details/identityyouthcri00erik/g/details/identityyouthcri00erik>
 11. Fardouly, J., & Vartanian, L. R. (2016). Social media and body image concerns: Current research and future directions. *Current Opinion in Psychology*, 9, 1–5. <https://doi.org/10.1016/j.copsyc.2015.09.005>
 12. Fardouly, J., Pinkus, R., & Vartanian, L. (2017). The impact of appearance comparisons made through social media. *Body Image*, 20, 107–114. <https://doi.org/10.1016/j.bodyim.2017.01.007>
 13. Festinger, L. (1954). A theory of social comparison processes. *Human Relations*, 7(2), 117–140. <https://doi.org/10.1177/001872675400700202>
 14. Fioravanti, G., Probst, A., Casale, S., & Casale, A. (2022). Social media use and eating disorders: A systematic review. *Eating and Weight Disorders*, 27(6), 1821–1838. <https://doi.org/10.1007/s40519-021-01312-1>
 15. Fredrickson, B. L., & Roberts, T. (1997). Objectification theory. *Psychology of Women Quarterly*, 21(2), 173–206. <https://doi.org/10.1111/j.1471-6402.1997.tb00108.x>
 16. Garner, D. M., Olmsted, M. P., Bohr, Y., & Garfinkel, P. E. (1982). The Eating Attitudes Test: Psychometric features. *Psychological Medicine*, 12(4), 871–878. <https://doi.org/10.1017/S0033291700049163>
 17. Grogan, S. (2008). *Body image: Understanding body dissatisfaction in men, women, and children*. Routledge. <https://doi.org/10.4324/9780203138442>
 18. Hartmann, A. S., Greenberg, J. L., & Wilhelm, S. (2022). Body dysmorphic disorder and disordered eating: Clinical overlaps. *Clinical Psychology Review*, 95, 101982. <https://doi.org/10.1016/j.cpr.2022.101982>
 19. Higgins, E. T. (1987). Self-discrepancy: A theory relating self and affect. *Psychological Review*, 94(3), 319–340. <https://doi.org/10.1037/0033-295X.94.3.319>
 20. Holland, G., & Tiggemann, M. (2016). A systematic review of the impact of the use of social networking sites on body image. *Body Image*, 17, 100–110. <https://doi.org/10.1016/j.bodyim.2016.02.008>
 21. Holland, G., & Tiggemann, M. (2017). Self-objectification and body shame in social media contexts. *Sex Roles*, 76(3–4), 311–321. <https://doi.org/10.1007/s11199-016-0605-y>
 22. Jarman, H. K., Marques, M. D., McLean, S. A., & Slater, A. (2021). Adolescents' experiences of social media and body image. *Body Image*, 38, 100–109. <https://doi.org/10.1016/j.bodyim.2021.03.005>
 23. Jiménez-García, M. A., Sánchez-Cabrero, R., & García, J. A. (2025). Media literacy and body image outcomes in adolescents: A meta-analysis. *Journal of Youth and Adolescence*, 54(1), 77–92. <https://doi.org/10.1007/s10964-024-02045-9>
 24. Lewallen, J., & Behm-Morawitz, E. (2016). Social media and the body image of young adults. *Journal of Broadcasting & Electronic Media*, 60(1), 126–143. <https://doi.org/10.1080/08838151.2015.1127248>
 25. Ozimek, P., Breidenbach, S., & Bierhoff, H.-W. (2023). Self-objectification, appearance comparison, and self-esteem in SNS photo-editing. *Computers in Human Behavior*, 139, 107473. <https://doi.org/10.1016/j.chb.2022.107473>
 26. Parameswaran, R., & Cardoza, K. (2009). Melanin on the margins: Advertising and colorism in India. *Journalism & Communication Monographs*, 11(1), 213–274. <https://doi.org/10.1177/152263790901100107>
 27. Phillips, K. A. (1996). The Body Dysmorphic Disorder Questionnaire. *Journal of Nervous and Mental Disease*. <https://doi.org/10.1097/00005053-199612000-00014>
 28. Phillips, K. A. (2009). *Understanding body dysmorphic disorder*. Oxford University Press. <https://doi.org/10.1093/med/psych/9780195307046.001.0001>
 29. Rodgers, R. F., & Melioli, T. (2016). The relationship between body image concerns, eating disorders, and social media use. *Current Opinion in Psychology*, 9, 83–87. <https://doi.org/10.1016/j.copsyc.2015.09.003>
 30. Saiphoo, A. N., & Vahedi, Z. (2019). Meta-analysis of social media and body image dissatisfaction. *Body Image*, 29, 28–40. <https://doi.org/10.1016/j.bodyim.2019.02.002>
 31. Sarwer, D. B. (2019). Body dysmorphic disorder and eating pathology: Shared pathways. *Clinical Obesity*, 9(2), e12.2.94. <https://doi.org/10.1111/cob.12294>
 32. Sarda, E., El-Jor, C., Rodgers, R., & Flaudias, V. (2025). Social media, self-objectification, self-compassion, and body image concerns: A systematic review. *Journal of Eating Disorders*, 13, 192. <https://doi.org/10.1186/s40337-025-01353-4>

33. Schroeder, R., & Behm-Morawitz, E. (2024). Filtered reality: AR beauty filters, body image, and self-comparison. *New Media & Society*, 26(4), 1178–1198. <https://doi.org/10.1177/14614448221074689>
34. Sekhar, R., Gupta, A., & Tripathi, A. (2024). Colorism, fairness norms, and body image among Indian youth. *Asian Journal of Social Psychology*, 27(2), 155–167. <https://doi.org/10.1111/ajsp.12507>