

#Fitspiration and Mental Health for LGBTQ+ College Students

Kristen Welker^{1*}, Sarah Philpot², Artur Krysiuk², and Chris Outzen³

¹School of Health & Rehabilitation Sciences, The Ohio State University, Columbus, OH, 43215

²Health & Exercise Sciences Department, Truman State University, Kirksville, MO, 63501

³Communication and Journalism, University of Wisconsin-Eau Claire, Eau Claire, WI, 54701

*Corresponding Author: Kristen.Welker@osumc.edu; 614-685-3403; Twitter: @kristenwelker

Fitspiration is associated with increased risk for decreased self-esteem and body satisfaction, along with restricted and disordered eating. Historically, low self-esteem, body dissatisfaction and disordered eating also are associated with certain groups in the LGBTQ+ community. This study sought to identify if fitspiration viewing and outcomes differed between LGBTQ+ college students and their peers. A total of 429 students completed a cross-sectional survey, including 54 (13.5%) who identified as LGBTQ+. There were no differences in fitspiration viewing tendencies or self-esteem between LGBTQ+ students and their peers, but more LGBTQ+ students reported being “not at all” satisfied with their body. Being LGBTQ+ was associated with having body dysmorphic disorder (BDD), although was unaffected by viewing fitspiration. Fitspiration viewers did, however, have significantly higher

scores for restrained eating and eating concerns. LGBTQ+ students who view fitspiration had the highest eating concern scores reported. Overall, fitspiration played a role in eating concerns, as has been previously demonstrated, but being LGBTQ+ and viewing fitspiration seems to be of greatest concern. Future studies should explore qualitatively the experiences of LGBTQ+ students on social media, and assess if increased visibility online is leading to a decrease in negative health outcomes experienced by LGBTQ+ people.

Keywords: Fitspiration, LGBTQ, Body Dissatisfaction, Social Media

Social networking sites, such as Facebook, Instagram, LinkedIn, Pinterest, Snapchat, Tumblr, and Twitter, are used by millions of people across the world. These social networking sites connect people through shared interests and activities (Boyd & Ellison, 2007). A study exploring patterns of online health information seeking among adults, found nearly 90% of participants are using social networking sites, and just over 50% of participants have reported using social networking sites for health information (Song, Omori, Kim, Tenzek, Hawkins, ... & Jung, 2016). On

many social networking platforms, specific accounts, pages, and groups focus on topics of special interest, including those dedicated to the distribution of fitness information. Pages which provide content regarding fitness, inspiration, and motivation are known as “fitspiration” pages (Carrotte, Prichard, & Lim, 2017). These pages may include content, such as exercise tips, recipes, photos of food or people (e.g. professional photographs, selfies), and inspirational messages (Carrotte, Prichard, & Lim, 2017; Tiggemann & Zaccardo, 2015).

Fitspiration, Body Dissatisfaction, and Disordered Eating

Exposure to fitspiration through social media may influence body dissatisfaction, self-esteem, and disordered eating. Previous studies have shown the effects of viewing fitspiration images, which resulted in viewers experiencing increased motivation, body dissatisfaction, and decreased self-esteem (Prichard, McLachlan, Lavis, & Tiggemann, 2017; Tiggemann & Zaccardo, 2015). Furthermore, women aged 18-49 who post fitspiration images on social media have reported an increased drive for thinness, drive for muscularity, compulsive exercise, and bulimia (Holland & Tiggemann, 2017). Previous research on men aged 17-27 who view fitspiration posts resulted in an association with ideal muscularity and an increased appearance comparison, which increases body dissatisfaction, appearance-based exercise motivation, and decreased health-based exercise motivation (Fatt, Fardouly, & Rapee, 2019). Additionally, researchers have examined men who interacted with fitspiration images, which indicated an association between physical appearance and engagement, such as increased body comparisons, sexual desirability, and changes in perceptions of masculinity (Palmer, 2015).

Researchers have developed a considerable body of literature confirming a link between media use and body dissatisfaction, self-esteem, and disordered eating. A study on college age women demonstrated that even limited exposure to pro-eating disorder content in media can result in short lived but significant changes to eating habits, with 60% of subjects reducing their caloric intake by 2500 calories or more, 33.3% reducing caloric intake by 4000 or more, and 28% of the subjects were unaware they had even made such a change (Jett, LaPorte, & Wanchisn, 2010). Healthy living blogs have been shown to present similar messaging of thin praise, fat stigmatization, and guilt messages regarding food and nutrition (Boepple & Thompson, 2014). Photo-sharing social media, such as

Instagram or Pinterest, contain posts with similar messaging in both images and accompanying texts (Ghaznavi & Taylor as cited in Boepple, Ata, Rum, & Thompson, 2016). Further studies demonstrated that certain factors in a social media environment can result in women participating in social comparison or intending to try self-enhancing techniques (Lewallen & Behm-Morawitz, 2016). Recent studies on fitspiration websites have shown similar messaging, with reviewed fitspiration pages often idealizing a thin and attractive female body, suggesting that “it is possible that viewing these websites will have a similar effect on women’s body-related cognitions and emotions” (Boepple et al., 2016, p. 135).

Body Dissatisfaction, Self-Esteem and Disordered Eating for LGBTQ+ Persons

Historically, individuals in the LGBTQ+ community have struggled with body dissatisfaction, body dysmorphia and disordered eating. Previous literature has primarily focused on how these issues affect individuals based on biological sex, and less frequently on how it might affect individuals based on gender and sexual orientation.

Lesbian and bisexual women. For lesbian women, internalized body and beauty standards has shifted from the mainstream standards of society to alternative beauty standards, which are restrictive to the lesbian community (Cogan, 2001). Studies have shown lesbian women experience less body dissatisfaction because they resist ideal beauty standards and internalized sociocultural norms compared to heterosexual women (Alvy, 2013; Bergerson & Senn, 1998), broader beauty standards (Henrichs-Beck, Szymanski, Feltman, & Batchelor, 2015), and a decreased drive for thinness (Leavy & Hastings, 2010). Furthermore, one study identified bisexual women, who occupy both LGBTQ+ and heterosexual cultural environments, were more than twice as likely to have had an eating disorder compared to both lesbian and heterosexual women (Koh & Ross, 2006). A study on specific sexuality groups found that lesbians and bisexual women reported an increased drive for muscularity, lower self-esteem, and lower internalization of the thin ideal compared to heterosexual women (Yean, Benau, Dakanalis, Hormes, Perone, & Timko, 2013).

Gay and bisexual men. For gay and bisexual men, an ideal body has shifted from a defined, muscular aesthetic common at the rise of the gay culture’s visibility to a slimmer body with leaner musculature, with limited acceptance of other body types (Filiault &

Drummond, 2007). Studies have shown that gay and bisexual men are more susceptible to social messages about body because they are more attentive to social comparison and internalization of cultural ideals in order to be accepted as part of the gay subculture (Gigi, Bachner-Melman, & Lev-Ari, 2016). Same-sex romantic attraction is also a factor motivating further social comparison, with studies demonstrating gay men assume other gay men will reject an overweight potential partner (Foster-Gimbel & Engeln, 2016). The rigid definitions of accepted gay bodies and the perceived necessity of these body types in order to be accepted as a romantic partner are likely connected to gay and bisexual men being found at greater risk for disordered eating and concern about body shape (Gigi et al., 2016). Interestingly, the use of anabolic androgenic steroids by gay and bisexual men was more common among older men experiencing less dissatisfaction with body fat and experiencing greater eating disorder symptoms (Griffiths, Murray, Dunn, & Blashill, 2017). This could be related to perceptions of older gay men which assumes masculine features, such as large and muscular bodies, as attractive to other gay men (Ravenhill & de Visser, 2019).

Transgender and non-binary persons. For transgender persons, the connection between gender and the body is especially significant. Qualitative interviews with transgender youth found that experiences of body satisfaction and dissatisfaction were linked to gender, gender expression, and body size (McGuire, Doty, Catalpa, & Ola, 2016). Further studies showed that non-binary people reported significantly higher levels of gender and body satisfaction compared to binary transgender people (Jones, Bouman, Haycraft, & Arcelus, 2019). This may be related to whether an individual identifies within the social gender binary, as research indicates for transgender persons “body characteristics that influence social gender perception are associated with overall satisfaction of appearance” (van de Grift et al., 2016, p. 189). Muscularity is an especially important aspect of body satisfaction for transgender men because a visibly muscular male body may be critical to “passing” in public spaces (van de Grift et al., 2016). Essentially, research has consistently shown a link between levels of body-gender congruence and body satisfaction, with the ability to socially “pass” as one’s gender consistently linked to increased body satisfaction and self-esteem (Owen-Smith, et al., 2018).

Research Questions

With evidence suggesting a link between sexual orientation, gender, self-esteem, body dissatisfaction and disordered eating, it appears that members of the LGBTQ+ community may experience unique influences and pressures related to their body. The purpose of this study was to further explore the role of fitspiration in body dissatisfaction and dysmorphia for LGBTQ+ college students. Additionally, this study seeks to explore if LGBTQ+ students experience these phenomena at similar rates to non-LGBTQ+ students with similar fitspiration viewing behaviors.

Specifically, the following research questions will be addressed:

1. Do heterosexual and LGBTQ+ college students differ in fitspiration viewing behavior?
2. Do LGBTQ+ college students viewing fitspiration experience lesser body self-esteem?
3. Do LGBTQ+ college students viewing fitspiration experience lesser body satisfaction?
4. Do LGBTQ+ college students viewing fitspiration experience increased disordered eating?

To the knowledge of the research team, this is the first study to assess fitspiration use in LGBTQ+ college students specifically, and it is unknown if LGBTQ+ students will use fitspiration similarly to non-LGBTQ+ students, but, previous literature indicates LGBTQ+ students may experience decreased body satisfaction and self-esteem, and increased disordered eating than their non-LGBTQ+ counterparts.

METHODS

Participants

Participants were recruited from a small Midwestern university. Around 500 students were recruited for this study. Inclusion criteria for this survey included being at least 18 years of age, able to read and understand English, enrolled full time at the University, and have at least one active social media account (i.e., Facebook, Instagram, Snapchat, Twitter, Pinterest, LinkedIn). Any student not meeting all of these criteria were removed from consideration.

Measure

This study utilized a cross-sectional survey design. The survey contained six sections, each corresponding to the following topics: exercise, self-esteem, eating behaviors, body image, social media and demographics. Not all sections were used for analysis in the current study.

Exercise. The exercise section of this survey included four items. Participants were asked to report the number of days they typically exercise each week and the typical length of each exercise session, in addition to being asked to indicate the percentage of their typical workout that is dedicated to weight training and cardio training (response options ranged from 0-100% in 20% increments).

Self Esteem. Self-esteem was assessed using Rosenberg's Self-Esteem Scale (Rosenberg, 1965). This scale includes ten items, which are used to compute a total score indicating an individual's self-esteem. Not all questions are worded positively, and those with a negative slant are reverse scored. Each item has answer options of "strongly agree," "agree," "disagree," or "strongly disagree." Scores from each item are coded (or reverse coded) and summed to create a total score, with a possible range of scores of 10-40. Higher scores indicate higher self-esteem.

Eating Behaviors. Disordered eating was measured using selection sub-scales of the Eating Disorder Examination Questionnaire 6.0 (EDEQ 6.0). This questionnaire includes 33 questions addressing eating behaviors and concerns regarding eating. Overall, there are four sub-scales, including: restraint, eating concern, shape concern and weight concern. Only the restraint and eating concern sub-scale scores were used in this study. Each sub-scale score is computed as the average of scores from each item of the sub-scale.

Body Image. There were two tools used to assess participant body image: a question developed for this study and the Body Dysmorphic Disorder Questionnaire (BDDQ; Phillips, 2005).

A survey item developed by the study's research team asked participants to answer the following question: "Are you satisfied with the way your body currently looks?" Answer options included "not at all," "a little bit," "most of the time," and "always." A second question developed by the research team asked participants to write in the three words and/or phrases that best describe their ideal body type for themselves.

Body Dysmorphic Disorder Questionnaire (BDDQ). The BDDQ scale (Phillips, 2005) includes a series of yes/no questions about how the person looks. A person is considered to have body dysmorphic disorder if they answer “yes” to both parts of question 1, “yes” to any of the items in question 3, and selects “1-3 hours” or “3+ hours” for question 4 (“On an average day, how much time do you usually spend thinking about how you look?”). Specifically, the BDDQ addresses a concern of not being thin enough or getting fat. This scale has been previously demonstrated to have strong accuracy, sensitivity, specificity, positive and negative predictive values, and positive and negative likelihood ratios for body dysmorphic disorder (Dey, Ishii, Phillis, Byrne, Boahene, & Ishii, 2015).

Social Media. There were eight items developed by the research team for this study to assess social media and fitspiration use. Participants were first asked to identify each of the social networking sites they are currently using at least once a month (options include Facebook, Instagram, Snapchat, Twitter, Pinterest, and LinkedIn). Participants were then asked to report if they ever view any fitness-related pages on social networking sites, and, if so, how frequently. Finally, a short scale was included to assess the impact of social networking sites. Participants were asked how frequently (i.e., “never,” “rarely,” “sometimes,” “always,” and “N/A”) they felt the need to eat less, exercise more often, exercise more intensely, use performance-enhancing drugs and/or steroids, and compare themselves to people in the photos/videos after viewing fitness-related pages on social networking sites.

Demographics. The demographics section included five items. Questions asked for the participant’s age, body weight, height, gender, and sexual orientation. Each of these items were free-response, thus allowing the participant flexibility, particularly for both gender and sexual orientation, to respond in a way which best represents themselves.

Procedure

This survey was distributed to students on campus at a Midwestern university in the United States. Each survey was administered as a paper copy, and completed independently. This study received approval from a University Institutional Review Board.

Student participants were recruited through extra-curricular student groups. Leaders from each student group were approached and asked permission to distribute

surveys. Upon receipt of permission, members of the research team attended a meeting session, where they introduced the survey and provided students with the informed consent document. Students who wished to participate were then invited to complete the survey. Students took approximately 10-15 minutes to complete each survey.

All data collected was anonymous and confidential. There was no personally identifying information collected. All analysis took place through SPSS statistical software (IBM SPSS 25).

RESULTS

A total of 429 undergraduate students between the ages of 18 and 24 ($M = 20.03$, $SD = 1.19$) completed this survey. There were 173 (40%) males, 243 (57%) females, two (.5%) gender-fluid, four (1%) non-binary, one (.2%) trans man, and six (1.4%) participants who chose not to provide information on gender. Of those who reported sexual orientation, there were 335 (86%) participants who indicated being heterosexual, while 54 (13.8%) indicated being LGBTQ+. Of those identifying as LGBTQ+, 10 (2.3%) identified as gay, 7 (1.6%) identified as lesbian, 23 (5.4%) identified as bisexual, 8 (1.9%) identified as asexual, 4 (1%) identified as pansexual, 1 (.2%) identified as queer, and 1 (.2%) identified as greysexual. There were 40 (9.3%) students who chose not to provide information regarding their sexual orientation. For the purposes of analysis, groups were created to indicate “LGBTQ+” and “non-LGBTQ+.”

Participants for this study used an average of 3.7 ($SD = 1.21$) social media pages, with scores ranging from zero to six. Of the social networking sites provided, Snapchat was the most popular with 398 (94%) users, followed by Instagram ($n = 383$; 90%), Facebook ($n = 324$; 77%), Twitter ($n = 249$; 59%), Pinterest ($n = 159$; 37%), and LinkedIn ($n = 67$; 16%). There were 225 students (57%) who indicated viewing fitness-related pages on social networking sites. Most participants did not view fitness-related pages for long periods of time. Just over 60% ($n = 219$) reported viewing specifically fitness-related pages only periodically throughout each month. There were 65 participants (19%) who viewed these pages one or two times per week, 44 (13%) who viewed most days and 20 (6%) who viewed fitness-related pages every day.

RQ1: Do heterosexual and LGBTQ+ college students differ in fitspiration viewing behavior?

An independent samples t-test was used to assess differences in general social networking site use between heterosexual and LGBTQ+ students. There are no significant differences between groups as heterosexual students ($M = 3.77$, $SD = 1.23$, $n = 334$) and LGBTQ+ students ($M = 3.56$, $SD = 1.15$, $n = 88$) are using a similar number of social networking sites ($t(420) = 1.44$, $p = .150$).

For fitness-related pages specifically, 52% ($n = 42$) of LGBTQ+ students and 59% ($n = 183$) of heterosexual students are viewing fitness-related pages. A 2x2 chi-square test of independence indicates there is no statistically significant relationship between sexual orientation and fitspiration viewing, $\chi^2(1, N = 393) = 1.21$, $p = .270$, $\phi = -.056$.

RQ2: Do LGBTQ+ college students viewing fitspiration experience lesser body self-esteem?

The mean score on the Rosenberg Self-Esteem Scale (possible range 10-40) was 30.54 ($SD = 5.91$) for all students ($n = 407$). An independent samples t-test was used to compare SES scores between LGBTQ+ students and non-, as well as between fitspiration viewers and non-viewers. There was no statistically significant difference for sexual orientation, as non-LGBTQ+ students ($n = 317$) had an average score of 30.83 ($SD = 5.79$) and LGBTQ+ students ($n = 90$) averaged a score of 29.51 ($SD = 6.23$; $t(405) = 1.87$, $p = .062$). Additionally, there was no statistically significant difference between viewers ($M = 30.27$, $SD = 6.37$, $n = 157$) and non-viewers ($M = 30.76$, $SD = 5.52$, $n = 216$) for self-esteem, $t(371) = -.803$, $p = .423$.

When controlling for only students who viewed fitspiration ($n = 216$), results remained the same for sexual orientation, as there was no statistically significant difference between groups, $t(214) = .473$, $p = .637$. Non-LGBTQ+ fitspiration viewers ($n = 177$) scored an average of 30.85 ($SD = 5.59$) and LGBTQ+ fitspiration viewers ($n = 39$) had an average SES score of 30.38 ($SD = 5.26$).

RQ3: Do LGBTQ+ college students viewing fitspiration experience lesser body satisfaction?

When asked about body satisfaction (i.e., Are you satisfied with the way your body currently looks?), fitspiration viewers and non-viewers answered at similar rates, with

viewers trending slightly lower. Most students responded “a little bit” (41% and 36.2%, respectively) or “most of the time” (38.4% and 47.5%, respectively).

On that same question, a greater percentage of LGBTQ+ students responded with “not at all” (19.5%) than their non-LGBTQ+ peers (11.1%), but otherwise both groups responded similarly to this question.

A 2x2 chi-square test of independence was used to analyze the relationship between sexual orientation and body dysmorphia, using questions from the Body Dysmorphia Disorder Questionnaire (BDDQ). Body dysmorphia was categorized into two groups: those who have body dysmorphia based on responses to the BDDQ and those whose BDDQ scores did not indicate having body dysmorphia. Whether or not participants had body dysmorphic disorder related to sexual orientation, $\chi^2(1, N = 413) = 6.98, p = .008$, with a small effect size of $\phi = .130$. 28.7% of LGBTQ+ students were identified as having body dysmorphic disorder (BDD), while 16.2% of non-LGBTQ+ students’ responses indicated BDD.

A second 2x2 chi-square test of independence was used to analyze the relationship between sexual orientation and body dysmorphia for only participants who view fitspiration. Whether or not participants who view fitspiration had body dysmorphic disorder is not related to sexual orientation, $\chi^2(1, N = 176) = 3.01, p = .083$. Of the fitspiration viewers only, 31% of LGBTQ+ students and 19% of non-LGBTQ+ students were identified as having BDD.

RQ4: Do LGBTQ+ college students viewing fitspiration experience increased disordered eating?

An assessment of disordered eating included at two sub-sections of the Eating Disorder Examination Questionnaire 6.0 (EDE-Q 6.0), which focused on restrained eating and eating concerns.

Restrained eating. A restrained eating score was determined by computing an average of scores from 5 questions from the EDE-Q 6.0, which asked about deliberately limiting or excluding foods to influence body shape or weight (possible range 0-6). Overall, all students had an average score of 1.41 ($SD = 1.38$), with scores ranging from 0-6. A series of independent samples t-tests indicate significant differences in restrained eating between fitspiration viewers ($M = 1.56, SD = 1.36, n = 223$) and non-viewers ($M = 1.13, SD$

= 1.27, $n = 167$; $t(369.77) = -3.229$, $p = .001$) but no significant difference between LGBTQ+ students ($M = 1.43$, $SD = 1.55$, $n = 93$) and non-LGBTQ+ students ($M = 1.41$, $SD = 1.33$, $n = 331$, $p = .861$).

A one-way ANOVA was used to assess group differences in restrained eating score for LGBTQ+ students and non who both view fitspiration and do not view fitspiration. The ANOVA was significant for between groups difference ($F(3) = 3.50$, $p = .016$), but Tukey's post hoc tests indicate there were no statistically significant differences between specific groups. The difference between restrained eating in non-LGBTQ+ students who were viewers and non-viewers approached significance ($p = .051$) but there were no other significant differences between pairs indicated.

Eating concerns. An eating concern score was determined by computing an average of scores from 5 questions from the EDE-Q 6.0, which asked about concerns over eating behaviors. Overall, all students had an average score of .769 ($SD = 1.03$), with scores ranging from 0-6. A series of independent samples t-tests indicate there are no statistically significant differences between LGBTQ+ ($n = 85$) and non-LGBTQ+ students ($n = 316$, $p = .098$) but there is a statistically significant difference between fitspiration viewers ($M = .898$, $SD = 1.07$, $n = 213$) and non-viewers ($M = .556$, $SD = .898$, $n = 159$) for eating concerns, $t(365.59) = -3.33$, $p = .001$.

A one-way ANOVA was used to assess group differences in eating concern score for LGBTQ+ students and non who both view fitspiration and do not view fitspiration. The ANOVA was significant for between groups difference ($F(3) = 4.977$, $p = .002$), with Tukey's post hoc tests indicating significant differences between groups. Non-LGBTQ+ students who did not view fitspiration ($n = 123$, $M = .471$, $SD = .74$) differed from non-LGBTQ+ students who did view fitspiration ($n = 173$, $M = .876$; $SD = 1.0$, $p = .004$), and from LGBTQ+ students who view fitspiration ($n = 40$, $M = .995$, $SD = 1.25$, $p = .023$). There were no group differences for eating concern for LGBTQ+ students who did not view fitspiration with any other group ($M = .844$, $SD = 1.25$).

DISCUSSION

Throughout this study, little statistical difference was found between LGBTQ+ and non-LGBTQ+ students. Specifically, there was no significant difference in fitspiration

viewing between LGBTQ+ students and their peers. Previously, literature has suggested LGBTQ+ are more prone to issues with self-esteem (Yean et al., 2013). This was not the case in this study. Even LGBTQ+ students who viewed fitspiration scored similarly to non-LGBTQ+ students with regard to self-esteem. It is possible that because students can self-select who they follow on social media, self-esteem is less impacted. Additionally, the increase in new media forms has provided LGBTQ+ youth with new resources to explore their identity and build their confidence. Craig and McInroy (2014) found that through new media, “Participants were able to contrast the negative messages they received through other media...with the comfort that they felt in the expressions of those who were similar in their online lives,” (p. 102). Participants were also found to practice “crucial developmental tasks” such as self-confidence and self-acceptance (Craig & McInroy, 2014, p. 106). With concerted effort to increase visibility of LGBTQ+ individuals online, it is possible social media may now serve as a place of belonging for LGBTQ+ students, rather than as a source of isolation with limited feelings of connectedness (Fox, & Ralston, 2016; Hillier, Mitchell, & Ybarra, 2012). It is possible that this results in greater resilience against some fitspiration messages.

In this study, non-LGBTQ+ students and LGBTQ+ students experienced similar levels of body satisfaction. Small sample sizes restricted the ability to dissect the LGBTQ+ student group into smaller groups to specifically target those who identify as transgender, non-binary or gender fluid. It is possible these students may have greater struggle with body satisfaction, as these identities are often born out of experiences in which the body does not represent the true self (McGuire et al., 2016). However, while there were no differences in body satisfaction, there were differences in body dysmorphia. Dysmorphia was more associated with LGBTQ+ students, although fitspiration viewing did not seem to play a role in this association. As stated previously, it is possible this difference is a result of the complex challenges presented to many in the LGBTQ+ population, particularly those grappling issues associated with gender identity (e.g., Jones et al., 2019; van de Grift et al., 2016).

Restrained eating behaviors differed between those who view fitspiration and those who do not, regardless of sexual orientation or gender. This also was seen with regard to controlled eating. It seems LGBTQ+ status does not influence restrained or controlled

eating, but viewing fitspiration does. These results are similar to previous findings (e.g., Jett, LaPorte, & Wanchisn, 2010) that suggest media consumption can result in controlled eating behaviors. It is possible this is a result of the many diet-related posts tagged as #fitspiration, or of the many depictions of fit individuals with captions of things promoting diet behaviors. This should be further explored to identify if diet-focused text and imagery is at the root of these behaviors or if individuals are seeking out sources to reaffirm their already-existing behaviors.

Limitations

Results from this study are representative of a college student population in a Midwestern state. While the sample size was large enough to provide statistical power for generalizing these results to the population of interest, generalizing to other populations should be done cautiously. LGBTQ+ students accounted for almost 14% of the sample for this study. This rate is slightly less than the reported rate for the university where students were recruited, but is much larger than some US national estimates. For example, a recent Gallup poll suggests only 5.4% of the US adult population identify as LGBTQ+ (McCarthy, 2019). While the sample of LGBTQ+ students recruited for this study was adequate, the limited diversity within the sample prohibited some more nuanced analysis. Future studies should purposively sample more of the lesser represented segments of the LGBTQ+ population, specifically trans persons, to ensure adequate representation and address those differences in body acceptance and eating behavior previously identified (e.g., Gigi et al., 2016; Griffiths, et al., 2017; Jones et al., 2019; Koh & Ross, 2006; McGuire et al., 2016; Yean et al., 2013).

It should be considered that social media users may not realize they are viewing fitspiration when it appears on their screen. If they are not actively seeking these pages out, it is possible there is a lack of comprehension that what they are seeing is, in fact, an effort to promote fitness inspiration. The definition provided for this study sought to clarify this for participants, but passive viewing may cause respondents to be unaware of their fitspiration viewing. Future studies should perhaps provide specific examples, and cast a wide definition to capture fitspiration use. Many users on social networking sites may only interact with a post for a few seconds or less, so it is necessary to enhance recall as many ways as is possible.

CONCLUSION

Overall, there were few differences between LGBTQ+ students and their non-LGBTQ+ peers. Fitspiration viewers overall were more likely to struggle with disordered eating behaviors, while LGBTQ+ students were more likely to experience body dysmorphia. Otherwise there were few differences to identify. This study demonstrates a similarity between LGBTQ+ and non-LGBTQ+ students, despite many social attempts to differentiate the two groups. With respect to fitspiration, there were no identifiable differences in use between the two groups. Future studies should explore qualitatively the experiences of LGBTQ+ students on social media, and assess if increased visibility online is leading to a decrease in many negative health outcomes experienced by LGBTQ+ people.

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Online Connections

To follow these authors in social media:

Kristen Welker: Twitter - @kristenwelker

LinkedIn - <https://www.linkedin.com/in/kristen-welker-phd-ches-9a931119/>

Chris Outzen: <https://christopheroutzen.academia.edu/>