Logic Model for the Body Project Prevention Intervention

The intervention theory for the Body Project, which is shown in Figure 1, proposes that reductions in thin-ideal internalization mediate the intervention effects on downstream outcomes of body dissatisfaction, dieting, negative affect, and eating disorder symptoms. Consistent with the intervention theory for the *Body Project*, reductions in thin-ideal internalization mediate the effects of the intervention on change in outcomes (Seidel et al., 2009; Stice, Presnell, Gau, & Shaw, 2007; Stice, Marti, Rohde, & Shaw, 2011). In support of the thesis that dissonance induction contributes to the effects of the *Body Project*, participants who completed high-dissonance vs low-dissonance versions of this program showed significantly greater reductions in eating disorder symptoms (Green et al., 2005; McMillan, Stice, & Rohde, 2011). The dissonance program also produces larger effects for participants with initial elevations in thin-ideal internalization, which is consistent with the theory that they should experience the greatest dissonance induction, as well as for those with initial elevations in body dissatisfaction and eating disorder symptoms, who have more room for improvement on outcomes (Stice et al., 2008). Fortunately, the *Body Project* produces similar effects for various ethnic groups (Rodriguez et al., 2008).



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