

Body Shaming and Adolescent Mental Health: Implications for Guidance and Counseling Practice



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Abstract: This study aims to examine the impact of body shaming on adolescent mental health and its implications for guidance and counseling at SMK Kesuma Bangsa 2 Depok. A quantitative research approach was employed using a survey method. The participants of this study consisted of 138 students from grades X, XI, and XII in the 2024/2025 academic year. Data were collected using questionnaires and analyzed through prerequisite tests and simple linear regression analysis. The results showed that body shaming has a significant effect on adolescent mental health. The coefficient of determination (R^2) was 0.340, indicating that body shaming contributes 34% to variations in students' mental health, which falls into the moderate category. Furthermore, the correlation coefficient (r) of 0.304 also indicates a moderate relationship between body shaming and adolescent mental health. These findings suggest that body shaming plays a meaningful role in influencing adolescents' mental health. Therefore, guidance and counseling services are essential in addressing this issue by providing preventive and interventive programs to support students' psychological well-being.

Keywords: Body Shaming; Adolescent Mental Health; Adolescents; School Counseling; Psychological Well-Being

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INTRODUCTION

Human life has several developmental phases that must be passed through, one of which is the adolescence phase. The adolescence phase is a transitional process of individual development from childhood to adulthood. This period is considered a very important time in a person's life, especially in the formation of an individual's personality. "As stated by Nadiatul, adolescence is a transformative stage of life due to the many physical and psychological transformations that occur during this period (Kawengian et al., 2022). "In line with Papalia and Olds, who stated that adolescence is a time of change or transition from childhood to adulthood, which begins at the age of 12 and will end in the early 20s." It is during adolescence that phenomena surrounding lifestyles easily and quickly develop, adolescence is a transitional period that makes it easy for adolescents to follow and be carried away by the current of change. These changes will make adolescents more prone to emotional and psychological turmoil, while on the physical side, changes will be more clearly visible to the naked eye (Yolanda et al., 2021).

In the contemporary era, ideal body standards have emerged as a significant social benchmark, which often exerts considerable pressure, especially in educational environments (Faisyah et al., 2025). The physical changes that occur in adolescent boys and girls are very different. In adolescent boys, the changes include the growth of two Adam's apples in the neck, a cracking or deepening voice, the growth of fine hairs in certain areas of the body, and the most common, rapid, dramatic growth in height. In adolescent girls, the physical changes are different: breast development, underarm and pubic hair growth. Females also experience changes in posture, such as visible leg growth and hip fat, making them appear wider than before. Due to these physical changes in adolescence, many adolescents struggle to accept their physical appearance because it doesn't meet their desired standards. They believe their physique isn't attractive because it doesn't meet the beauty standards of their environment. Some experience a flat nose, dark skin that doesn't fit them or others in their environment, a body that is far from slim, and a height that doesn't match that of their peers. These physical changes cannot be separated from the lineage inherited from the family.

Many of the new changes that occur during adolescence have been found to influence mental health issues among teenagers. These issues can include, for example, low self-confidence, low self esteem, anxiety, and

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depression (Ifdil et al., 2022). Monk also said many teenagers suffer from an inability to manage physical and psychological changes, which ultimately impact their emotions and psychological stress.

Hurlock explains that mental health disorders are disorders in which a person experiences an inability to adapt to conditions in society or their surrounding environment. The inability to solve problems can lead to very severe and excessive stress disorders that disrupt the individual's mental health, making them more vulnerable and ultimately declared to have a mental health disorder that can usually be caused by things that make them feel inferior, such as inappropriate words or treatment, usually also called body shaming (Putri, 2007). Body shaming is a form of behavior that criticizes a person's body shape and physical appearance, causing the victim to experience body shaming. Body shaming is a state of low self confidence that can be caused by other people's judgments based on ideal criteria that consider us to be less than what is considered ideal and perfect (Nasution, 2020).

Bullying is associated with an increased risk of poor mental health and low life satisfaction, regardless of whether the individuals are victims, perpetrators, or both. This is also influenced by cultural values and the quality of life experienced, thus preventing programs (Amirazon et al., 2022). A common mental health problem experienced by adolescents is friendship problems.

Mental health problems experienced by adolescents are quite bad for physical health, achievement and academics (Syahputra et al., 2024). Survey data conducted by the National Adolescent Health Information Center NAHIC (2005) shows that adolescents and young adults aged 10-24 years, both men and women, have undergone outpatient treatment for mental health disorders, as many as 1.9 million men underwent outpatient mental health care while women were 1.6 million people. The Basic Health Research Survey shows that 11.6% of the Indonesian population aged over 15 years experience mental and emotional health disorders, around 19 million children experience mental and social health (Riskesdas, 2007).

METHOD

This research will use a quantitative design with a correlational approach. This approach was chosen to measure the strength and direction of the relationship between bodyshaming (as the independent variable) and mental health (as the dependent variable). A correlational design was chosen to test the presence or absence of a relationship, as well as the strength and direction of the relationship between bodyshaming (the independent variable) and mental health (the dependent variable). This approach allows researchers to identify patterns of relationships between variables without manipulating the variables or establishing cause-and-effect relationships. This research is a field research study, which is conducted by directly observing the field. The approach uses quantitative methods, which are a way of breaking down research problems into numerical data. In this study, researchers focused on analyzing the Effect of Bodyshaming on the Mental Health of Adolescents at SMK Kesuma Bangsa 2 Depok

Participants

In this study, the subjects were 210 students of SMK Kesuma Bangsa 2 Depok. After calculations, the sample size was 134 respondents. The sample size was then determined in each class by determining the proportion based on the number of students who participated.

Sampling Procedures

Determining sample criteria is very helpful for researchers to reduce bias in research results, especially if there is a Bodyshaming variable that influences the variables being studied. The Slovin formula is used to determine the sample size. Approval of the research title was submitted as an introduction to the letter of request for permission to conduct research to the Vice Principal of SMK Kesuma Bangsa 2 to conduct research at SMK Kesuma Bangsa 2, which had been approved by supervisor 1 and supervisor 2. The researcher submitted a letter of request for permission to conduct research to the Vice Principal's Office of SMK Kesuma Bangsa 2 to conduct research at SMK Kesuma Bangsa 2 Depok. The research was carried out at SMK Kesuma Bangsa 2 Depok. After the research was conducted, the researcher explained to the respondents the objectives, benefits, research procedures, and time commitments, and requested informed consent. After agreeing to the research, consenting respondents were asked to sign a statement of willingness to become respondents. Furthermore, the researcher distributed questionnaires to respondents, then explained how to fill out the questionnaire to

them, giving them the opportunity to ask questions if there was any unclear information. The questionnaire was then filled out by the respondents by marking a cross (X) on the list of questions available in the questionnaire. The researcher then re-checked the questionnaires that had been filled out by the respondents to anticipate if there were any unanswered questions, so they could be completed immediately. The completely filled questionnaires were then collected by the researcher for further data processing. After calculation, the sample size for the case was 134 respondents. The number of samples for each class was then determined by establishing a proportion according to the number of careful students. The number of samples for each class was obtained using the following formula.

Materials and Apparatus

This study examined two main variables, namely body shaming as the independent variable (X) and mental health as the dependent variable (Y). Data were collected using a structured questionnaire designed to measure students' experiences related to body shaming and their mental health conditions.

Prior to the main data collection, a pilot study was conducted to evaluate the validity and reliability of the research instrument. The validity test results showed that the majority of items had corrected item-total correlation coefficients exceeding the r-table value of 0.1716 ($df = 91$), indicating that the items were valid. Items that did not meet the validity criteria were removed from the instrument to improve measurement accuracy.

Furthermore, the reliability test results indicated that the instrument had a high level of internal consistency, with a Cronbach's Alpha coefficient of 0.87. This value exceeds the acceptable threshold of 0.70, indicating that the instrument is highly reliable. Therefore, the final questionnaire used in this study consisted only of valid and reliable items. The use of a validated and reliable questionnaire allowed the researcher to systematically assess the relationship between body shaming and students' mental health. This instrument served as the primary tool for collecting quantitative data, which were then analyzed using statistical methods.

Procedures

This study employed a quantitative approach to examine the relationship between body shaming and adolescent mental health. The research process began with a pilot study to ensure that the research instrument was valid and reliable before it was administered to the main sample. After the instrument was finalized, the questionnaires were distributed to students of SMK Kesuma Bangsa 2 Depok. Participants were provided with clear instructions on how to complete the questionnaire and were asked to respond honestly based on their personal experiences. The data collection was conducted in a classroom setting under the supervision of the researcher to ensure proper completion of the questionnaire.

Following data collection, statistical analysis was conducted to test the proposed hypotheses and determine the relationship between the variables. The hypotheses formulated in this study were as follows: (H_a) there is a significant relationship between body shaming and adolescent mental health, and (H_0) there is no significant relationship between body shaming and adolescent mental health. The collected data were analyzed using prerequisite tests and simple linear regression analysis to determine the significance, strength, and direction of the relationship between body shaming and mental health.

Design or Data Analysis

The data analysis techniques used in this study and researchers will use Statistical Product and Service Solutions (SPSS) version 20 for Windows. The analysis techniques used in testing variables are normality tests, linearity tests, and hypothesis tests

RESULT AND DISCUSSION

This chapter will present the research results and discussion of data collection using a questionnaire completed by respondents regarding the Effect of Body Shaming on the Mental Health of Adolescents at SMK Kesuma Bangsa 2 Depok. The research was conducted on May 19, 2025, with a sample of 143 respondents. The general data are as follows. To find out the results of data processing using the Body Shaming instrument from all respondents totaling 143 students, testing was carried out using the SPSS version 20 statistical application, namely as follows:

Table 1. Body Shaming Data Categorization

| Score Interval | Category | Frequency | Percentage |
|----------------|-----------|-----------|------------|
| >115 | Very High | 8 | 5.59% |
| 97–114 | High | 28 | 19.5% |
| 79–96 | Moderate | 67 | 46.8% |
| 49–78 | Low | 40 | 27.9% |
| <48 | Very Low | 0 | 0% |
| Total | | 143 | 100% |

Based on the results of the table above, it can be seen that from all the respondents tested, amounting to 143 people, it is known that the number of students who have very low Body Shaming is 0 students, low level is 40 students or around 27.9%, moderate level is 67 students or around 46.8%, high level is 28 students or 19.5%, very high level is 8 students or 5.59%. The table above shows that the level of Body Shaming of students is generally in the moderate category.

Table 2. Categorization of Mental Health

| Score Interval | Category | Frequency | Percentage |
|----------------|-----------|-----------|------------|
| >92 | Very High | 1 | 0.69% |
| 76–91 | High | 1 | 0.69% |
| 60–75 | Moderate | 0 | 0% |
| 44–59 | Low | 136 | 95.1% |
| <43 | Very Low | 5 | 3.49% |
| Total | | 143 | 100% |

Based on the results of the description table above, it can be seen that from all the respondents tested, a total of 143 people, it is known that the number of students who have very low Mental Health is 5 or 3.49%, a low level of 136 students or around 95.1%, a moderate level of 0, a high level of 1 or around 0.69%, a very high level of 1 or around 0.69%. The table above shows that the level of Mental Health of students is generally in the low category.

Table 3. Normality

| Variable | Asymp. Sig. | K-S (Z) | Description |
|---------------|-------------|---------|-------------|
| Body Shaming | 0.436 | 0.870 | Normal |
| Mental Health | 0.522 | 0.813 | Normal |

Normality test using the Data processing approach is carried out by looking at the value column in the Kolmogorov-Smirnov. Data is considered normal if the value displayed in the Kolmogorov-Smirnov value column shows a value greater than 0.5. For decision making, the normality test is if the significance value is >0.005 , then the data is normally distributed. The normality test was carried out with the help of IBM SPSS Statistics 20. The results of the normality test are used in the following table: Based on the results above, it is known that the sig.(2-tailed) value for body shaming (X) is 870 and Mental Health (Y) is 813. Because the sig.(2-tailed) value for Body shaming and Mental Health is greater than 0.5, then as in decision making in the One-Sample Kolmogorov-Smirnov Test, it can be concluded that the data is said to be normally distributed, thus the normality requirements are met.

Table 4. Linearity Test

| Variables | F | Significance | Description |
|--------------------------------------|-------|--------------|-------------|
| X (Body Shaming) – Y (Mental Health) | 1.066 | 0.390 | Linear |

The linearity test was conducted to determine whether the relationship between body shaming and mental health follows a linear pattern. This test is important to ensure that the assumption of linearity required for regression analysis is met. The criteria for linearity are as follows: if the significance value (linearity) is less than 0.05, the relationship is considered linear; if the significance value is greater than 0.05, the relationship is considered non-linear. Additionally, if the significance value of deviation from linearity is greater than 0.05, it indicates that the relationship between variables is linear. Based on the results of the linearity test, the significance value obtained was 0.390. Since this value is greater than 0.05 ($0.390 > 0.05$), it can be concluded that the relationship between body shaming and mental health is linear. Therefore, the assumption of linearity is fulfilled, and further analysis using linear regression can be conducted.

Table 5. Coefficient of Determination (Model Summary)

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate |
|-------|-------|----------|-------------------|----------------------------|
| 1 | 0.556 | 0.309 | 0.304 | 7.559 |

Based on Table 5, the Adjusted R Square value is 0.304, which indicates that body shaming contributes 30.4% to the variation in students' mental health. The remaining 69.6% is influenced by other variables not examined in this study.

Table 6. Regression Analysis Results (ANOVA)

| Source | Sum of Squares | df | Mean Square | F | Sig. |
|------------|----------------|-----|-------------|--------|-------|
| Regression | 3596.239 | 1 | 3596.239 | 62.935 | 0.000 |
| Residual | 8057.006 | 142 | 57.142 | | |
| Total | 11653.245 | 143 | | | |

Based on the results of a simple linear regression analysis, it is known that the Body Shaming variable has a significant effect on mental health with an F value of 62.935 and a significance value of $0.000 < 0.05$. Therefore, the regression model is suitable for use and the Body Shaming variable can predict changes in Mental Health.

Table 7. Regression Coefficients

| Variable | B | Std. Error | Beta | t | Sig. |
|--------------|--------|------------|--------|--------|--------|
| (Constant) | 93.519 | 4.093 | — | 22.850 | < .001 |
| Body Shaming | -0.341 | 0.043 | -0.556 | -7.933 | < .001 |

Table 7 above shows that the significance value obtained is $0.000 < 0.05$. Therefore, it can be concluded that body shaming has a significant effect on mental health. These results indicate that H_0 is rejected and H_a is accepted. Based on the results of the research conducted at SMK Kesuma Bangsa 2 Depok, the two variables have been analyzed using the SPSS version 20 application with a total of 143 respondents. This study aims to determine the effect of body shaming on mental health among students at SMK Kesuma Bangsa 2 Depok.

Table 8. Descriptive Statistic

| Variable | Gender | N | Mean | Std. Deviation | Minimum | Maximum |
|---------------|--------|----|--------|----------------|---------|---------|
| Body Shaming | Male | 67 | 91.030 | 13.513 | 57.000 | 118.000 |
| | Female | 76 | 96.658 | 15.368 | 65.000 | 120.000 |
| Mental Health | Male | 67 | 63.104 | 8.464 | 44.000 | 95.000 |
| | Female | 76 | 59.974 | 9.364 | 40.000 | 81.000 |

From the descriptive statistical analysis above, it can be concluded that, on average, female respondents have slightly higher body shaming scores than male respondents, and slightly lower mental

health scores. In addition, the data distribution (standard deviation) for both variables tends to be slightly larger in the female group, indicating higher variability in their body shaming experiences and mental health levels. The shape of the body shaming distribution tends to be symmetrical for both genders, while mental health in male respondents tends to be skewed to the right.

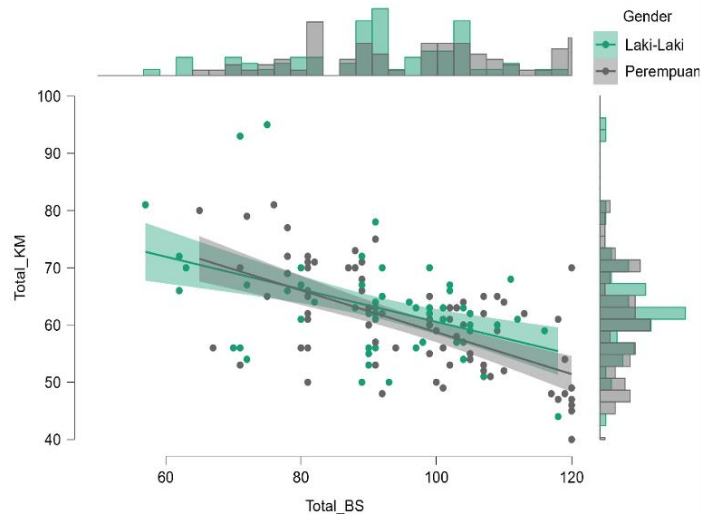


Figure 1. ScatterPlot Body Shaming – Mental Health

In the figure above, the downward sloping regression line (negative slope) indicates that there is a negative relationship between Body Shaming and Mental Health. This means that the higher a person's Body Shaming score (moving to the right on the X-axis), the lower their Mental Health score tends to be (moving down on the Y-axis). This indicates that high Body Shaming is associated with lower Mental Health. Overall, the visualization in the Figure above provides preliminary evidence of an inverse relationship between body shaming and mental health among respondents. This finding is consistent with the literature showing that negative experiences related to body image can have a detrimental impact on psychological well-being. Furthermore, the marginal histograms provide important context regarding how these two variables are distributed in the study population, both overall and across genders. However, to confirm the statistical significance of this relationship and quantify the strength of the correlation, further statistical analysis (e.g., regression analysis) is required.

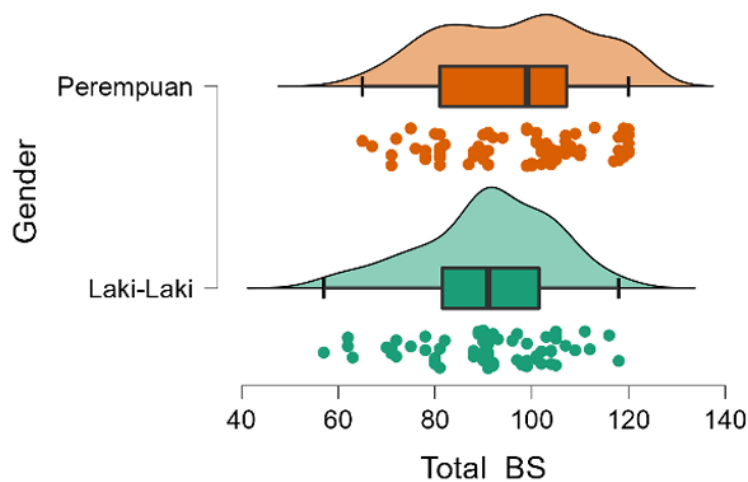


Figure 2. RainCloud Body Shaming

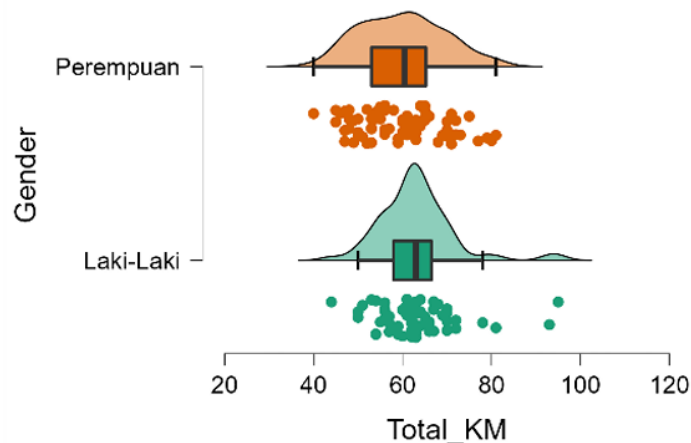


Figure 3. RainCloud Mental Health

Figure 2 and 3 displays two RainCloud plots depicting the distribution of 'Body Shaming' (left) and 'Mental Health' (right) scores, separated by gender (Female and Male). From the RainCloud plot of Body Shaming, it can be observed that although both genders show Body Shaming, the distribution of scores for women tends to be higher and concentrated in a certain range compared to men who have a wider distribution. Meanwhile, for Mental Health, both men and women tend to have scores concentrated in a relatively low range.

Based on the results of the study at SMK Kesuma Bangsa 2 Depok obtained by the two variables have been processed using SPSS version 20 to 143 respondents. This study aims to determine the influence of Body Shaming on Mental Health of Adolescents at SMK Kesuma Bangsa 2 Depok. The results of the analysis of the data that have been collected and studied, based on the data that has been obtained shows that the significant influence on Body Shaming on students of SMK Kesuma Bangsa 2 Depok, the significance value is <0.000 linear regression is $Y = 93.519 + 0.341 X$. Based on the table the significance value is $<0.000 <0.005$ which means H_a is accepted. Showing that Body Shaming has a simultaneous and significant effect on Mental Health of students at SMK Kesuma Bangsa 2 Depok. This study also obtained an Adjustment R Square of 0.304 which means that the Body Shaming variable has an influence of 30.4% on Mental Health.

This result is in line with the research conducted by Wong (2009) entitled "the effect of body shaming on mental health in Mts 1 Medan" It has been found that body shaming has a significant influence on mental health in adolescents. The significance value obtained is <0.001 with a linear regression model, namely $Y = 28.765 - 0.654X$. Based on the significance value table of $<0.001 <0.05$, the alternative hypothesis (H_a) is accepted. This shows that body shaming simultaneously has a significant effect on adolescent mental health.

The results of this study are in line with research conducted by (Anggraeni & Saputra, 2018), which states that adolescents who experience body shaming will cause psychological and mental health problems because they cannot solve their problems, feel imperfect and lack self-confidence. The results of this study are in accordance with research conducted by (Rachmat, 2020) which also states the influence of Body Shaming on adolescent mental health. Influencing victims of Body Shaming differently There are four broadcasters giving their opinions on the influence of creating motivation that is felt to be able to develop their inner potential. About an informant who stated that a different opinion, so it is more dead when you are in that area social The social environment is very important in self education or self-empowerment. The social environment of the victims also varies. The regression coefficient on the Body Shamming (BS) variable is 0.718 or 71.8 percent, meaning that Body Shamming (BS) has a positive and significant effect on Mental Health (KM) of 0.718 or 71.8 percent. Thus, the existence of Body Shaming in schools will affect the mental health of students at MTSN 1 Banda Aceh. The test results for the Body Shaming (BS) variable have a calculated t value of 12,022 and a t table of 1.655. Because the calculated t value $>$ t table, it can be concluded that there is a positive and significant influence of the Body Shaming (BS) variable on Mental Health (KM).

This is in line with previous research conducted by Nasution & Simanjuntak (2020), which obtained research results that there is an influence between body shaming treatment and self-esteem in early adolescents at SMP N 2 Datuk Lima Puluh with a correlation coefficient value showing r count of $0.445 > T$ table 0.254 . Another study conducted by Nurjannah (2021) conducted on middle adolescents showed that body shaming has a significant relationship with students' self-esteem, namely with a significance value of $0.000 < 0.05$ and a t count value of $6.006 > T$ table 1.997 .

Based on other research conducted by Natralia (2023), the F value was $101,395$ with a significance value of 0.000 ($p < 0.05$), indicating that body shaming has a negative relationship with self-esteem in female adolescents, which means that if body shaming treatment increases, there will be a decrease in the level of self-esteem in individuals, and vice versa, high self-esteem can reduce the level of body shaming to low. The findings of this study align with research conducted by (Alini & Masyalla, 2021), which revealed that direct or indirect body shaming can lead to a decrease in an individual's self-esteem. This is because body shaming occurs when a part of an individual's body does not meet prevailing beauty standards in that environment. This negative prejudice can lead individuals to compare themselves to others, criticize, ridicule, and belittle themselves.

Research conducted by Damanik (2018) found that adolescents who experience body shaming tend to have negative views and assessments of themselves, both their condition and body shape. This growing sense of dissatisfaction with their body shape can lead to low self-esteem, reflected in negative assessments of their body shape, feelings of shame in social settings, and self-comparison and competition with others (Khoiriyah & Rosdiana, 2020).

These results are in line with research conducted by Abdurachman (2019) entitled "The Effect of Body Shaming on Students' Mental Health." This value can be interpreted as meaning that when the body shaming factor is equal to zero, the mental health factor is 42.31 units. This can be interpreted as meaning that without the body shaming factor, it can be formed in real terms of 42.31 units (Rachman, 2019). The contribution for researchers is the magnitude of the influence of body shaming on students' mental health. The results of Susilawati's (2021) research entitled "The Effect of Body Shaming on the Mentality of Students at SMP 1 Tajur Halang" using purposive sampling technique with a total of 100 respondents, the Scale has 14 valid items with a value of $(\alpha) = 0.887$. The results of the study show a regression equation of $Y = 35.017 + 0.247$ and a sig p of 0.018 , which means the hypothesis is accepted.

From the results of Komarudin's research, et al. (2020) "the effect of body shaming on the mental health of adolescents at SMK Darussalam" questionnaires were distributed to 10th grade students of SMK Darussalam, data was obtained and then validity, reliability, normality and simple linear regression tests were carried out. According to the validity test that has been completed by the researcher, the results of the calculated R of each question item of the two variables show that it is greater than the R table, so each question item is said to be valid. Likewise, the results of the reliability test in the study based on the table above can be seen that the reliability on the body shaming and self-esteem scale is $0.87 > R$ table 0.361 , so the scale is declared a high level of reliability, then the researcher tested whether the data is normal or not, from the results obtained using IBM SPSS statistics 22 in the table of results of the One Sample Kolmogorov-Smirnov normality test it can be seen that the sig. value is 0.078 . This shows the Asymp. Sig. value (2-tailed) > 0.05 so it can be concluded that the results of the normality test from the research sample are normally distributed.

The results of this are in line with the following research, in the research of Nani Barorah Nasution and Ernita Simanjutak entitled "The Effect of Body Shaming on Self Esteem of Junior High School Students" (2020), the results of data analysis using simple linear regression show that every increase in one unit of body shaming score will be followed by a reduction in the score of the level of self-esteem. Furthermore, the results of the correlation coefficient show that the data that r count $> r$ table ($0.455 > 0.254$). So it can be concluded that there is an effect of Body Shaming on Self Esteem of students of SMP Negeri 2 Datuk Lima Puluh in the 2020/2021 academic year, in this study the same thing is the thing studied along with how to calculate the correlation coefficient.

Based on descriptive research data on students at SMK Kesuma Bangsa 2 Depok, body shaming is classified as moderate, while mental health is classified as low. In this regard, it is crucial to implement a guidance and counseling program related to students' personal well-being. Guidance and counseling

teachers need to first understand the underlying causes of students' mental health conditions and behaviors. The skills of guidance and counseling teachers are also essential in providing appropriate services to each student.

Guidance and counseling teachers can take several steps to reduce body shaming behavior. One of the efforts is through individual counseling services, which are provided to help students overcome personal problems. Through these services, students can be guided to understand and correct their erroneous thought patterns. In addition, information services can be provided to help students receive and understand various information related to their personal, social, academic, and career development. These services can specifically address strategies to overcome body shaming and improve mental health, as well as strengthen students' resilience. Guidance counselors can also educate students about the importance of maintaining an optimistic attitude when facing challenges and difficulties.

Furthermore, content mastery services can be implemented to help students develop competencies and positive habits that are useful in school, family, and community life. Guidance counselors can support students' development by aligning service materials with learning content. They can also collaborate with subject teachers to integrate guidance materials with real-life student behavior, so that the interventions become more relevant and effective in addressing body shaming and improving students' mental health.

The author acknowledges that this study still has several limitations and shortcomings. During the data collection process, some respondents did not bring their mobile phones and refused to complete the questionnaire. In addition, the measurement instrument was considered to contain too many items, making it tedious for participants to complete. Other limitations include the respondents' lack of commitment or participation due to coercion, which may have caused the data to not fully reflect their actual conditions, as well as other factors that were beyond the author's knowledge and control.

CONCLUSIONS

This study shows that body shaming has a significant impact on the mental health of students at SMK Kesuma Bangsa 2 Depok. These findings confirm that the higher the level of body shaming experienced by students, the more their mental health tends to decline. Therefore, body shaming is an important factor that needs to be considered in efforts to maintain the psychological well-being of adolescents in the school environment. This study also contributes to enriching the study of the relationship between body shaming and adolescent mental health, particularly in the educational context. The results imply the need for active guidance and counseling teachers to provide appropriate services to support student mental health and prevent body shaming behavior in schools. However, this study still has limitations, particularly in the data collection process and the possibility of other undiscovered factors that may influence student mental health. Therefore, future research is expected to examine other relevant factors and use a wider range of methods to obtain more comprehensive and in-depth results.

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